Our society’s gradual embrace of physician-assisted dying is not any sort of conspiracy hatched by some covert or elitist group; this is, alas, in many respects a grassroots movement. What attitudes in our culture are currently pushing us in the direction of assisted suicide? Whatever their differences, they are attitudes that are all rooted in one common denominator: fear. As a society we fear prolonged disability; we fear becoming a burden to our families; we fear economic burden; we fear being trapped by sterile technology and not dying in peace; we fear losing control; and most fundamentally, we fear pain and suffering. Because of the pervasiveness of these fears, we can predict, along with Sidney Callahan,\textsuperscript{1} the appearance of more campaigns and referenda to compel state legislatures to approve physician-assisted death. This development is compounded by the fact that respected secular ethicists and physicians defend the morality of euthanasia.

The attitudes of our contemporaries toward aging and dying are shaped by their fundamental beliefs about personhood and the purpose of life. The challenge before us, it should be emphasized, is foremost one of moral persuasion and not political protest. Sadly, evangelicals (among whom I number myself) have typically opted for the latter, the short-term strategy, rather than the former, the long-term strategy and, truth be told, the harder work. A significant element in the moral argument that we

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A version of this paper was presented at “A Culture of Life,” a conference hosted by the Notre Dame Center for Ethics and Culture, University of Notre Dame, November 29-December 1, 2001.

will need to make against suicide, physician-assisted suicide, and euthanasia concerns the ethics of suffering.

Suffering, in the eyes of contemporary culture, is meaningless and hence to be avoided at all costs and by all means. For this reason, abortion and euthanasia—and to a lesser extent, infanticide—receive substantial popular support. Why? Because these are perceived as necessary to end present—or prevent future—suffering. Each, therefore, becomes a “compassionate choice.” As it relates to end-of-life issues, the reality of suffering imbues a person with both a moral and legal “right” to die.

The argument that the Christian community will need to advance has both a negative and positive component. Negatively, we must make a public case in exposing euthanasia and physician-assisted death for what it is—an evil that destroys both individual integrity and the common good in society. We in the West must be convinced of “the interconnectedness of [all spheres of] life and the limits of a cult of privacy, autonomy, and private property.” Positively, we must make a compelling case for the alternative—namely, caring for the aged and dying in a way that pre-

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3Thus, on October 27, 1997, Oregon became the first state to legalize physician-assisted suicide. Initiated in 1994 as Measure 16, “The Oregon Death with Dignity Act,” the initiative was voted into law by a margin of 51% to 49%. Oregon Health Division’s second annual report, published in the New England Journal of Medicine 342.8 (February 25, 1999): 598–604, is noteworthy for what it does not report. For example, according to the report, only 37% of the patients killing themselves in 1999 received a psychiatric evaluation. For a helpful assessment of the report, see K. Foley and H. Hendin, “The Oregon Report: Don’t Ask, Don’t Tell,” Hastings Center Report (May-June 1999): 37–42. What is exceedingly alarming in Oregon is that those who are sanctioned by the state government to assess its operation are advocates of physician-assisted death. What is more, the very same issue of NEJM contained results of a Dutch study showing that 18% of the physician-assisted suicides in the Netherlands are botched (at 551–56).

4An excellent example of the latter is the declaration “Always to Care, Never to Kill: A Declaration on Euthanasia,” which was produced by the Ramsey Colloquium of the Institute on Religion and Public Life in New York City in 1991 and published in the February 1992 issue of the journal First Things (at 45–47).

5Thus Callahan, “Moral Case,” 40. The interconnectedness of all life can be graphically illustrated on two levels by one very tragic suicide. Several years ago the Navy—indeed, the whole nation—was rocked by news that Admiral Jeremy (“Mike”) Boorda, the U.S. Navy’s Chief of Naval Operations, had taken his life. Because of the social stigma attached to self-inflicted death, as a result of a shotgun wound to the head, the media, who were shell-shocked, were extremely reticent to use the “s” word. The press made no mention of the hellish nightmare and life-long emotional scars that Boorda’s suicide had inflicted upon his wife and four children. What is more, no one dared to conjecture about the immensely demoralizing effect the suicide had on the millions of our nation’s service-men, irrespective of rank. Was it now preferable for officers and non-officers alike, following Boorda’s lead, to take their own lives, given the demands associated with serving
serves both individual integrity and the common good. An important “plank” in that campaign is to re-educate society regarding the “redemptive” side of suffering. This task, it should be stressed, is both conceptual and pragmatic; it must be confronted on both a theoretical and existential level.

From a technological and research standpoint, the elimination of suffering is typically touted as a primary goal in debates over genetics and end-of-life issues. The drive to eliminate suffering, however, does not necessarily spring from authentic compassion for people who are in pain or suffering. Let the reader beware. Its motivation may issue out of a utopian desire to rid society of its imperfections by means of technology. Not surprisingly, this unfettered optimism in technological advancement inevitably carries with it a deep-seated bias against traditional religion and moral codes. In a culture in which scientific and biomedical technology flourishes, disconcerting questions will need to be raised by someone. For example, is the desire to eliminate suffering in some cases misguided? Is it possible to find any meaning in suffering? What if the desire to eliminate suffering bleaches society of its “humanizing” dimensions such as service of love, sacrifice, compassionate care-giving, community, and personal character growth and development in the end rendering these elements nonsensical and illusory to people?

In his 1995 encyclical *Evangelium vitae* (“The Gospel of Life”) Pope John Paul II challenged his audience to embody a culture of life in the face of what he called a “culture of death.” While *Evangelium vitae* was primarily a philosophical reflection on contemporary culture and an exhortation toward authentic Christian witness, the theological groundwork for this encyclical was laid eleven years earlier in a significant though relatively unknown apostolic letter entitled *Salvifici doloris*, or, “The Christian Meaning of Human Suffering.” In this letter John Paul examines the meaning of personal suffering as well as the Christian responsibility to the suffering of others.

What follows is a brief summary of the letter, after which some observations are offered by this “appreciative Protestant” concerning the applicability of John national interests? Because of the impact of suicide on communal bonds, Sidney Callahan writes: “Maintaining an absolute prohibition against actively taking a human life—self or other, with or without consent, dying or not—is necessary to protect human communal bonds. All human living, loving, declining, and dying is full of stress that must be endured and overcome by communal support. What humans need most is an unconditional commitment to steadfastly care for one another through any illness or impairment until the end comes” (ibid).

Although suicide is a personal response to the pressures of a life deemed not worth living, its thought germinates in a social climate in which a collapse both of the intellect and of faith has already taken place. For a cultural analysis of our own time, see J.D. Charles, “Suicidal Thought in a Culture of Death,” in T.J. Demy and G.P. Stewart, eds., *Suicide: A Christian Response* (Grand Rapids: Kregel, 1997), 209–20.


*Salvifici doloris* literally means “redemptive suffering.”
Paul’s thesis to the wider Christian community as we seek to embody a redemptive presence in the current cultural context.

The Christian Meaning of Human Suffering

Though much shorter than an encyclical, Salvifici doloris is divided into eight parts. Between introduction and conclusion are found sections entitled: The World of Human Suffering; The Quest for an Answer to the Question of the Meaning of Suffering; Jesus Christ: Suffering Conquered by Love; Sharers in the Suffering of Christ; The Gospel of Suffering; and The Good Samaritan. John Paul’s basic thesis is that meaning can only be found in suffering as a result of revelation, and specifically, the revelation of Christ’s suffering on the cross and the redemption of humanity that ensued. This, however, does not simply remain a religious concept; it becomes incarnated in meaningful and relevant ways.

Suffering, observes John Paul, is “a universal theme that accompanies man at every point on earth,” and therefore, demands to be constantly reconsidered. In fact, Paul’s words to the Roman Christians, that “the whole creation has been groaning in travail together until now,” are a poignant reminder of the universality of the problem, even when suffering “seems to be particularly essential to the nature of man.” Suffering, then, is “almost inseparable from man’s earthly existence.” Early on in the letter, John Paul reminds his audience that pain and suffering have something of an apologetic function; that is, the church must “try to meet man in a special way on the path of his suffering.” Effective apologetics, after all, wrestles seriously with building bridges to surrounding pagan culture; it will not suffice merely to cite Scripture or affirm scriptural authority, as Protestant evangelicals have tended to do.

The pontiff points out the limits of medicine, insofar as the science of healing is uni-dimensional. Humans suffer in a variety of ways; their anguish can also be moral, psychological, and spiritual. There arises inevitably within human beings the question: Why do we suffer? Although physical pain is widespread and measurable in the animal kingdom, only humans reflect on why they suffer. This anguish is intensified by the fact that no satisfactory answer is forthcoming. For John Paul, no resource expresses so vividly the emotion, anxiety, and dissonance of human suffering as does the book of Job. And what is particularly striking to

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10Rom. 8:22 English Standard Version.
11*SD* 2.
12Ibid., 3.
13Ibid.
14At the same time it is legitimate to argue that the task of medicine is to cure and care even when it cannot heal. A basic ingredient in that caring process is palliative. Thus D. Beauregard, “The Mystery of Suffering,” *Ethics & Medics* (August 1995): 1–2, and J.F. Bresnahan, “Palliative Care or Assisted Suicide?” *America* (March 14, 1998): 16–21.
15*SD* 9.
the pontiff is the sheer amount of the story devoted to the dialogue between Job and his acquaintances. Their task, as they understand it, is to convince him that he must have done something seriously wrong, for “suffering—they say—always strikes a man as punishment for a crime.”16 In their theology of retribution, suffering only has meaning in the context of moral justice, whereby evil is repaid for evil.

While much of the Old Testament in fact corroborates the truth that suffering is the direct result of evil, this explanation is challenged by Job—that is, not the moral law of reaping and sowing but his friends’ application of this law to his own situation. Hence, “it is not true that all suffering is a consequence of a fault,” for Job is not being punished.17 Rather, as the context of the story immediately establishes, suffering in Job has the character of a test—a test to demonstrate Job’s righteousness.

And yet although such a “stock Christian” answer has some validity, “at the same time it is seen to be not only unsatisfactory … but it even seems to trivialize and impoverish” the notion of divine justice.18 For John Paul, a satisfactory “answer” to the problem of suffering can only be grasped when it is tethered to “the entire revelation of the Old and above all the New Covenant.”19 Suffering, thus viewed, “must serve for conversion, that is, for the rebuilding of goodness in the subject.”20 In order to perceive the true answer to the “why” of suffering, “we must look to the revelation of divine love, to what God has done for man in the cross of Jesus Christ.”21

Because the very essence of Christian soteriology is liberation from evil, herein we behold salvific love. The mission of the only-begotten Son consists in conquering sin and death, by which “we have in mind not only evil and definitive, eschatological suffering … but also … evil and suffering in their temporal and historical dimension.”22 Evil remains bound to sin and death. Hence it is necessary that in his messianic ministry “Christ drew increasingly closer to the world of human suffering. ‘He went about doing good’ (Acts 10:38), and his actions were directed primarily to those who were suffering and seeking help.”23 Moreover, because of his full awareness that his mission was to suffer and die, he therefore severely rebuked Peter when the latter wished him to abandon the thought of suffering and death.24

Therefore, as innocent sufferer, Christ takes upon himself the sufferings of the world. And this we call “substitutionary,” and above all, redemptive suffering. Christ

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16 Ibid., 10.
17 Ibid., 11.
18 Ibid.
19 Ibid., 12.
20 Ibid.
21 Ibid., 13.
22 Ibid., 15. Here evangelicals would do well to pay attention. In our recent history we have stressed the eschatological over the temporal, with a deficient “theology of creation”; hence, we have not been responsible in our cultural mandate.
23 Ibid., 16.
24 Ibid.
has accomplished the world’s redemption through his suffering.\textsuperscript{25} This is the work of his death on the cross.

Human suffering, as a result of the cross, can never be seen as isolated. Insofar as Christ bore our sins and shared in our sufferings, we know that he continues to share in our sufferings (see Is 53). Thus, in our sufferings not only do we have the assurance that maturity and spiritual refinement are taking place, we have hope. The imperative “If anyone would come after me, let him deny himself and take up his cross and follow me” (Lk 9:23) is linked to the promise “Blessed are those who mourn, for they shall be comforted” (Mt 5:4). In the end, our suffering allows us to minister to others at their point of need more effectively.

John Paul wishes his audience to ponder the fact that “with the passion of Christ all human suffering has found itself in a new situation …. In the cross of Christ not only is the redemption accomplished through suffering, but also human suffering itself has been redeemed.”\textsuperscript{26} “To suffer,” writes John Paul, “means to become particularly susceptible, particularly open, to the working of the salvific powers of God offered to humanity through Christ.”\textsuperscript{27}

Despite its relative absence in pulpits, classrooms and study groups, the question of suffering therefore, according to John Paul, has “a special value in the eyes of the church. It is something good, before which the church bows down in reverence with all the depth of her faith in the redemption.”\textsuperscript{28} As the individual embraces suffering through the grace of the crucified Redeemer, gradually, notes John Paul, the salvific meaning of suffering is revealed.\textsuperscript{29}

Finally, to the question of suffering belongs the parable of the Good Samaritan,\textsuperscript{30} for it is precisely the Samaritan who shows himself to be the real “neighbor” to the victim.\textsuperscript{31} If the parable teaches anything, it teaches that we may not “pass by on the other side” indifferently; rather, it underscores the redemptive character of suffering by its condemnation of passivity. The Good Samaritan is “good” because he has compassion and is sensitive to the sufferings of others.\textsuperscript{32} In this concrete expression of the Samaritan’s love, “the salvific meaning of suffering is completely accomplished and reaches its definitive dimension”: suffering is present in the world “in order to release love, in order to give birth to works of love toward neighbor, in order to transform the whole of human civilization.”\textsuperscript{33}

\textsuperscript{25}Ibid., 17.
\textsuperscript{26}Ibid., 19. Thus Paul can write to the Corinthians, “For this slight momentary affliction is preparing for us an eternal weight of glory beyond all comparison…” (2 Cor. 4:17–18 ESV).
\textsuperscript{27}Ibid., 23.
\textsuperscript{28}Ibid., 24.
\textsuperscript{29}Ibid., 26.
\textsuperscript{30}Luke 10:25–37 ESV.
\textsuperscript{31}\textit{SD} 28–30.
\textsuperscript{32}Ibid.
\textsuperscript{33}Ibid., 30. Although John Paul is sensitive to the isolation that suffering forces upon the individual, the emphasis of his letter is conspicuously communal and ecclesial.
Articulating a Distinctly Christian Approach to Suffering

Someone has observed that when a revolutionary group wishes to wage war on human decency, the first—and most effective—strategy is to co-opt language in the service of the cause. It is therefore not surprising that proponents of physician-assisted death routinely speak in terms of “compassion” and human “dignity.” As they seek to expand their agenda both on a popular level and in the context of policy debates, the rhetoric of compassion allows them to capture the moral high ground. It is precisely this sort of verbal sleight-of-hand that George Orwell had in mind as he penned in 1947 a brief but highly important essay entitled “Politics and the English Language.” What Orwell found in his own day can be applied to our own:

One ought to recognize that the present political chaos is connected with the decay of language … Political language—and this is true of all political parties, from Conservatives to Anarchists—is designed to make lies sound truthful, and murder respectable, and to give an appearance of solidity to pure wind.

Orwell rightly saw the connection between our moral vocabulary and political tyranny. Thus, current debates over bioethical and health care issues, to a large extent, are battles over words and their meanings. Consider contemporary usage of the word “compassion.” Like the term “dignity,” “compassion” (which means literally “to suffer with”) is a word occurring with utmost frequency in the moral lexicon of both the Christian community and secular naturalists. Both groups will invoke the term in articulating their response to human suffering. This is particularly the case in debates over sustaining and ending life. On the one hand, naturalists will claim to operate in the name of compassion. To the extent that suffering constitutes the ultimate evil, the relief of suffering is seen as the greatest good. Thus, terminating life, due to the threat of suffering, is invested with moral meaning.


36While the essay “Politics” gives theoretical explanation to this linkage, the novel 1984 serves as a graphic illustration thereof.

37“Dignity,” inherent in every human being, must have a source outside of noble deeds; it is a dignity that is bestowed, not achieved (Gen. 1:26; Eph. 1:10; 1 Tim 2:4–6; 1 Cor. 15:42–57 ESV). For an excellent statement of the implications of human dignity in the classic Christian sense for health care issues, see J.M. Haas, “Human Dignity and Health Care,” Ethics & Medics (February 1997): 1–2.

38Christian ethics, it should be stated, seeks to alleviate all human suffering, both present and future, as far as is reasonably possible. Only psychopaths and sadomasochists would deliberately choose to revel in it. Traditional Catholic approaches to health care and alleviation of suffering would appear to embody the best method, given its distinction between ordinary, customary and unusual, treatment. As stewards of
On the other hand, there pleads for our consideration the classic Christian understanding of compassion, eloquently articulated by John Paul in *Salvifici doloris*, and more recently, in *Evangelium vitae*. The pontiff notes that while evil can cause forms of suffering, suffering is *not* called evil in and of itself. To illustrate, physical pain is a sensory experience that informs us that some defect has come upon the body. Individuals who lack the sensory ability to detect or feel pain (for example, in what we traditionally have called leprosy) are prone to constant injury and may die prematurely. Similarly, on a psycho-spiritual level, “pangs of conscience” inform us that something within the realm of the soul needs attending.39 At bottom, the basic knowledge of pain itself is something that is good.40

While acknowledging that suffering is not the equivalent of evil, Christian compassion calls us to “suffer with” those who are suffering, using Christ—and the Good Samaritan—as our model, ever mindful of the redemptive element in suffering. Authentic compassion does not eliminate the sufferer as the means to alleviating suffering itself. The Christian moral tradition has always called us toward compassion for the sick, the unborn, the aged, and the dying. It calls us to strive to alleviate suffering, but always with respect for the *inviolable sanctity of all human life*, irrespective of how fragile.

Edmund Pellegrino, Director for Clinical Bioethics at Georgetown University Medical Center, has pointed out the moral dissonance between (and irreconcilable nature of) the Christian and the secular understanding of “compassion.” Pellegrino writes:

> For the secularist, the sentiment of compassion has moral weight of its own. It is, itself, a virtue which entails relief of pain and suffering as a major end of moral life. For the Christian, sentiment cannot function as a reason for moral choice, sentiment is not a virtue unless ordered by reason, and suffering has a distinct meaning in human lives.41

Although the Christian and the secular naturalist both *feel* compassion as an emotion, they are worlds apart in *how they interpret and order it*. For the Christian, compassion is not self-justifying, i.e., it must be harnessed to and controlled by faith-oriented reason, *if* that is, it is to be a virtue and not prostituted as a vice.42 For the naturalist, compassion remains a sentiment; to the extent that something *feels* good, it is viewed as morally good. Outside the Christian ethic, the only life worth living is

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39 This analysis is ably described by Lund-Molfese in “The Gift of Suffering,” 170–71.

40 *SD* 5, 6.


42 Ibid., 3.
a life without suffering. Therefore, “compassion” expresses itself in killing or assisting in the death of the severely handicapped, the chronically ill, or the comatose. As John Paul has frequently observed, when compassion is loosed from the moorings of its Christian moral tradition, the result is a “culture of death.” And though it may shock, it is not an over-statement to suggest that in time this ethical divorce breeds terror.43

Thoughts on Pain, Suffering and Palliative Care

Most people with terminal illnesses die in the sterile environment of a hospital, if not a nursing home. As people anticipate death, few things create a more dreadful sense of anxiety than the anticipation of unrelieved pain and suffering. The solution, a growing chorus tells us, is physician-assisted death. After all, in the words of Faye Girsh of the Hemlock Society, “The only way to achieve a quick and painless and certain death is through medications that only a physician has access to.”44 What the public frequently does not hear is that there is another way to die: namely, under medical care that stresses adequate pain management while offering the individual spiritual and emotional support. According to policy analyst Joseph Loconte, every year roughly 450,000 people die this way; they die in hospice.45

“The vast majority of terminally ill patients can have freedom from pain and clarity of mind,” says Martha Twaddle, medical director at the hospice division of the Palliative Care Center of the North Shore in Evanston, Illinois.46 “Hospice care,” she emphasizes, “helps liberate patients from the afflictions of their symptoms so that they can truly live until they die.”47 Adds Nicholas Christakis, assistant professor of medicine and sociology at the University of Chicago, “Most people nowadays see two options: a medicalized, depersonalized and painful death in a hospital or a swift death that rejects medical institutions and technology.”48 This is a false choice, he notes, hospice offers a way out of this dilemma.

Leon Kass, the respected bioethicist who teaches in the School of Social Thought at the University of Chicago and has now been appointed to the President’s Council on Bioethics, lauds the moral vision of the hospice movement that places the movement in diametric opposition to physician-assisted death:

Hospice borrows from a certain Judeo-Christian view of our obligations to suffering humanity …. It is the idea that company and care, rather than at-

43Pellegrino clearly sees this eventuality (“Moral Case,” 3). Moral atrocity, it should be remembered, does not happen overnight; it is prepared by social and cultural currents. Therefore, the Christian community must be actively engaged in the great ethical debates of the day.


45Ibid.

46Ibid.

47Ibid.

48Ibid.
tempts at cure, are abiding human obligations. Those obligations are put to the severest test when the recipient of care is at his lowest and most unattractive.49 Citing the unparalleled record of hospice programs and their compassionate end-of-life care for people with incurable diseases, Joseph Loconte believes that the hospice movement, with the palliative approach to medicine it represents, could revolutionize America’s culture of dying.50 Indeed, it is exhilarating to ponder what might result from the combined forces of the hospice movement and the Christian community, with its commitment to an enduring moral vision.

As people of faith we have a critical—indeed, an irreplaceable—role to fill in the public discussion of end-of-life matters. If the Christian community does not foster opposition to our “culture of death,” no one will. And this opposition to death on demand must be the corporate expression of Protestants, Roman Catholics, and Orthodox working together with like-minded individuals in common-cause witness to our culture. Nevertheless, our passionate opposition to a culture of death in which the redemptive character of suffering is fully denied, must be validated by compassionate action. Only then will there be sufficient reason to choose life, even in the face of present or future suffering.51

49Ibid., 48.
50Ibid., 42. Unquestionably, Oregon’s Measure 16, the “Death with Dignity Act,” will challenge hospice’s identity and integrity. The roughly fifty individual hospice programs in the state that provide care to over forty-two hundred terminally ill Oregonians will be hard pressed not to abandon their commitment not to hasten death. The specific contours of these challenges are detailed by C.S. Campbell et al., in “Conflicts of Conscience: Hospice and Assisted Suicide,” Hastings Center Report (May-June 1995): 36–43.
51However difficult, it is imperative especially for evangelicals to learn how to participate responsibly in public debate and discussion of critical moral issues of our day. We must do this by avoiding two extremes—on the one hand, capitulating to secular, naturalist assumptions, and on the other hand, entering dialogue as thundering prophets of apocalypse (which, in the end, is counter-productive). Practically, several principles might serve as guidelines for responsible political involvement—e.g., seeking to foster the common good of society, affirming the sanctity and dignity of all human beings, and committing ourselves to good works and social improvement. Protestant evangelicals would do well in this regard to learn from Roman Catholics, who, by reason of their rich moral-philosophical tradition, are accustomed to articulating a robust public philosophy.