JOURNEYING, PRESENCE, SUPPORT, AND HOPE.

Anglican Church in Aotearoa, New Zealand
and Polynesia for the civil jurisdiction of Aotearoa
New Zealand

THE GIFT OF LIFE

God created humankind in his image. GENESIS 1:27 NRSV
(Jesus said) I came that they may have life, and have it abundantly. JOHN 10:10 NRSV

Believing every life is of value, we seek to find ways to ensure that all people can know the gift of life in all its fullness. Sharing Christ's preferential option to care first for the powerless and vulnerable, we recognise that there are two vulnerable groups when considering assisted dying: those experiencing unbearable suffering and those who may, implicitly or explicitly, be coerced into seeking assisted dying because their lives may be perceived not worth living.

A caring society seeks to balance the needs of individual with the needs of the whole community. Within society and our church there are a range of views as to how we navigate the tension between protection and freedom. The Church has always been uneasy about euthanasia; many church communities campaigned against the change in the law; and many individual Anglicans believe euthanasia to be morally wrong. We have a calling to provide care to all throughout life and to the very end of life. We are likewise called to be prophetic, seeking a society that cares equitably for all, throughout their lives.

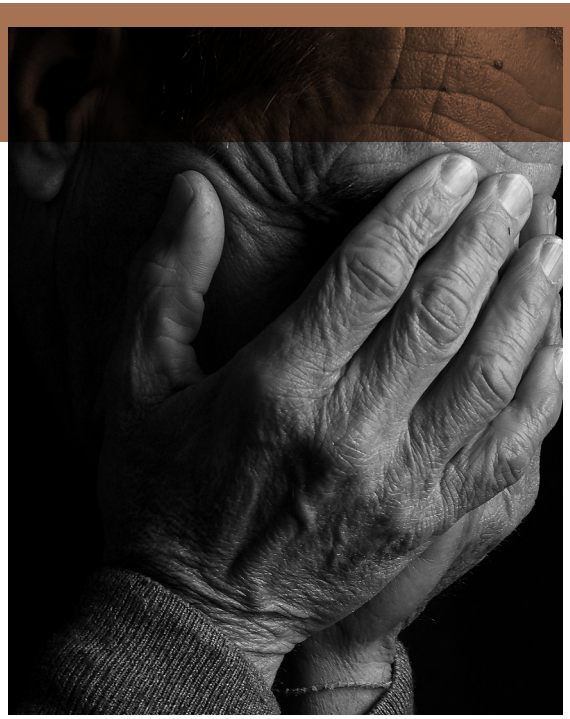
We are now in a changed situation and must consider how we will provide pastoral care to people who, experiencing unbearable suffering, are considering assisted dying. We should prepare by reflecting on our own experiences and beliefs, and by considering how we will respond individually and as faith communities. This will be an evolving journey for the church and for Aotearoa New Zealand.



THE SUFFERING OF GOD

God is love, and those who abide in love abide in God, and God abides in them. 1 JOHN 4:16 NRSV

(Jesus dying cries out) My God, my God, why have you forsaken me? MARK 15:34 NRSV



Our first response to suffering is always compassion. God is love and calls the people of God to love one another, to love neighbours and even to love enemies with the same divine love, full of kindness, compassion and mercy. At the heart of our faith is the mystery of the God who in Christ chose to suffer and to die, experiencing betrayal, desertion, and crucifixion. For some people, in their suffering, they will find a deep connection to God within them. However, this is not the experience of all; some feel utterly forsaken.

Despite our shared human nature, each person's experience of suffering is unique and cannot be fully known to anyone else. What one person can bear with ease; another finds unbearable. We can too easily find ourselves echoing the example of Job's comforters and offering false explanations for suffering. Such responses deny the reality and mystery of suffering. The suffering God instead invites us to accompany with compassion and empathy.

Fully present with the sufferer, we should listen. Job's friends were determined to explain Job's suffering in a framework they could understand. This is not our role; this is not compassion. It is a failure to acknowledge the reality of another's suffering. God judged Job's friends to have spoken falsely and Job to have spoken of God what was right, acknowledging the unfairness of Job's suffering. The nearest Job and we, as readers of the Book of Job, get to an explanation for suffering is that we are creatures and not the Creator. In the midst of suffering, such explanation may be profoundly unsatisfactory.

We do not fully understand the mystery of suffering.
Our only loving response must be to enter, as best we can, into the suffering of the other and to journey with them as far as we are able, knowing our own frailty and need for that same love of God that those who suffer need.

JOURNEYING WITH THOSE CONSIDERING ASSISTED DYING

Let love be genuine, hate what is evil, hold fast to what is good; love one another with mutual affection ... Rejoice with those who rejoice, weep with those who weep. ROMANS 12:9 10, 15 NRSV

It is a matter of conscience how far anyone offering pastoral care journeys with someone considering assisted dying. Everyone offering pastoral care must ensure they provide it safely, which requires both care of the sufferer and the carer's self-care, respecting their own limits.

Some pastoral carers will wish to accompany the person along much of the journey, possibly even to the end. We should be mindful of the cost of such care. Some will feel their conscience does not allow them to accompany. This is respected. The compassionate carer will ensure that the person is not abandoned and that someone appropriate can provide care as needed.

A person considering assisted dying is a person in need. A pastoral carer may become involved before or after assisted dying is approved according to criteria specified in law. To meet the criteria for assisted dying, they must be experiencing unbearable suffering.

Here we find ourselves entering into the messiness of life. There may or may not be a supportive whānau or other community around a person considering assisted dying. A pastoral carer may or may not be warmly welcomed into such situations. In many situations there will be cultural considerations. Approaches to assisted dying can vary considerably from one cultural context to another.

The cultural lens we bring to a situation may not be the same cultural lens that a person considering assisted dying is looking through.

Where possible we should provide the space for those considering assisted dying to explore their reasons, which are most often around meaning and purpose in life. Journeying is a relational act. Connecting with another person can in itself reconnect that person with life and hope. Pastoral spaces allow sufferers to experience their true worth and to speak openly, without fear of judgement, in a way they may not be able to with anyone else. It is a precious sacred space.

Pastoral carers also create a space in which those considering assisted dying can recognise any possible sense of coercion, perceived or real. We may be the person of last resort, the one person who, unconditionally valuing life, can hear the fears and the pressures the sufferer feels. We may be called to be an advocate for the sufferer, affirming the value of their life.

In this journeying, we are also supporting the whānau of those considering assisted dying, who may have mixed feelings or even disagree. We journey with and care for the whole whānau. Care for them may challenge us and lead to uncomfortable places. We may be called to share their burden.

For pastoral carers, there may be sharp dilemmas. If we stay with the person choosing assisted dying to the end, we may be perceived as condoning assisted dying. If we withdraw, we may be seen as abandoning them in their hour of greatest need. Accompaniment, however, does not mean endorsement of the choice which has been made. There is no canon of our Anglican church which constrains a licensed pastoral carer, whether an ordained or lay person,

to journey to the end with a person choosing assisted dying; nor is there a canon which prevents such journeying.

Individual pastoral carers, parish ministry teams, and institutions within the Anglican church in Aotearoa New Zealand should be appropriately trained with respect to the guidance in this document, any specific policy directions relating to their ministry contexts or institution, and obligations under the End of Life Choice Act.

In particular, as is explicit in the Act:

- Pastoral carers will not raise the option of assisted dying with anyone in their care;
- Pastoral carers will not discuss the option with the friends or whanau of people in their care.

The Anglican Church has always sought to find the via media, recognizing the truth that lies on both sides of many debates and situations. In our journey with others and through life, we do not give up our own beliefs. Rather, we remain an active and visible reminder of God's love for each person. We accompany the person and their whānau as a sign of hope through the complexities of life.

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JOURNEYING, PRESENCE, SUPPORT, AND HOPE

Beloved, since God loved us so much, we also ought to love one another.
1 JOHN 4:11 NRSV

We are travellers together on our journey of faith. Such companionship starts from the perspective of the inalienable goodness of creation and human life and that the image of God rests in all people. For all of us, there are times to serve and times to be served. This interrelatedness calls us to accompany those who are suffering, including those considering assisted dying, as we seek to show the invincible and unending love of God.

We are familiar with the pastoral needs of those who are dying and often journey with them, providing our authentic presence, primarily through listening, speaking to console and build up and asking sensitive question which draw out hopes and fears. So too, for those considering euthanasia or assisted suicide, there are the same needs, for an authentic expression of our personhood reflecting the love of the One who first loved us. Expressing ourselves with humility and vulnerability we build trusting relationships that support and comfort those suffering and dying. We may offer healing through prayer, anointing, and sacrament, but should not forget that our authentic presence may provide profound healing too.

When a person considering assisted dying invites us to provide pastoral care, we offer such care with compassion and without judgement. It is a space of holding, in which their beliefs and emotions are acknowledged, honoured, and experienced, as we suffer with them. Our pastoral responsibility is to explore what aspects of their suffering can be relieved and what may help them embrace life.

For those working in public healthcare, it cannot be our role to change a person's mind or question their decision though, if asked, we should acknowledge our beliefs. Even as leaders of faith communities, we must listen carefully to those who suffer. Embodying our ethic of care, expressing God's invincible love for all, will often be our most effective way of communicating.

The hope of such conversations is to help the person make an authentic and informed decision, free from coercion. Conversations are not undertaken with any agenda beyond this; they cannot be intended to change a person's mind. Those suffering are profoundly vulnerable and we must never abuse our potential position of power. We must not impede access to what is a lawful act. Yet our presence may bring hope and ease the burden of those who are suffering.

No one who seeks assisted dying will be doing so lightly. They will be aware of the impact it has on those around them and especially their whānau, who might themselves be considered a third vulnerable group. Our presence is a visible sign of hope for whānau as well as for the person considering assisted dying. It is a compassionate response to those in need, reflecting the dignity and worth that resides in all people and all human life. It is a visible sign of God's love for all, at all times, in all places, in all circumstances.





CARERS' SELF-CARE

Caring for those who are considering assisted dying will raise a wide range of boundary issues. We may find our own values in conflict with those we are caring for. We must be profoundly aware of the need to keep those we care for safe, while also keeping ourselves safe. Knowledge of our own vulnerabilities and how to care for ourselves is essential in offering care to others.

Those offering pastoral care must themselves receive such care. A healthy support network has many dimensions. Family, friends, spiritual directors, supervisors, and opportunities for recreation, nourish us in diverse ways and help us to care for others safely. All of us should recognise when, for whatever reason, we are not in a position to safely offer care. None of us should hesitate to seek extra support for those we care for or for ourselves.

CONTINUING TO SEEK FULLNESS OF LIFE FOR ALL

For I was hungry and you gave me food, I was thirsty and you gave me something to drink, I was a stranger and you welcomed me, I was naked and you gave me clothing, I was sick and you took care of me, I was in prison and you visited me. MATTHEW 25:35-36 NRSV

We continue to advocate for better medical care for all who suffer, and in this context, we especially advocate for better resourcing of palliative care. Our public health system needs the commitment and resources to support people to live, and die, with dignity and comfort. Every person should live in the certainty that they will receive all necessary care, pain control, and comfort, when they need it. We need healthcare that, to the best of our ability, alleviates pain and suffering, whether physical, mental, spiritual, or relational, at every point in life.

No person in need through illness should be seen as a burden, yet social norms create implicit coercive pressures on vulnerable people. A challenge for the church in our evolving society is to speak and act for a society which supports vulnerable people rather than presses against them. We believe that every life is precious and we have a calling to provide care for all throughout life and to the very end and to ensure society does so too.

Learning to support one another in our suffering will enrich all of our lives. Suffering is a part of life but so too is love and joy. Whenever anyone shows love for another, they reveal a glimpse of God.



OUR WITNESS

Some pastoral carers will agree with the law whole-heartedly and others will have reservations. But most pastoral carers come into the space of assisted suicide with a religious perspective that extends beyond death, and acknowledges the call of God in all our lives. In that sense pastoral carers will witness what is happening in a different way. It may be helpful for all of us now, and for future generations, to make an anonymised record of the end of life actions one has encountered, not only for one's supervisor, and for personal reflection and growth, but also with the thought of reviews or reconsiderations of this legislation at some time in the future.

