Living Well, Dying Faithfully:

The role of Christian practices in end of life care

In August 2006 The Centre for Spirituality, Health and disability joined forces the Duke Institute on Care at the End of Life, Duke Divinity School, North Carolina to draw together a group of experts from within the fields of theology, ethics and medicine to explore the role of Christian practices in end of life care. The group engaged in three days of intense conversations around this area seeking after new insights into what it might mean to die well in a technological age where dying has become highly problematic. The symposium's proceedings are currently being collated and edited and will be available in due course. (Please check back here for further details in the future)

Symposium participants

Overview of the aims of the symposium

What might it mean to die faithfully? We are used to being taught how to give people dignity, worth and peace in the midst of their suffering. Medicine teaches us well the importance of pain relief and treatments which will cure us of our suffering or at least make the time we have left more pleasant. But the question of how we can love God and remain faithful to God’s calling in the midst of our dying is rarely at the forefront of our thinking. And yet, if Jesus is correct (and we are convinced that he is!) when he states that the first and greatest command is to 'Love the Lord your God with all your heart and with all your soul and with all your mind.' (Mth 22:37), surely there is no other question as pressing as this one. If this is how we are to live, it is also how we are to die.

There is little question that medicine as a healing art, has made huge advances within the field of end of life care in terms of such vital areas as pain control, surgical interventions, advanced and sophisticated medical technology and the various curative and palliative activities that have emerged in recent years. These advances are laudable and offer much hope and comfort to people who are dying and to their loved ones. Nevertheless, it seems that the more medical technology increases, the less clear the question of what it means to ‘die well’ seems to become. The closer we come to attaining our dreams of immortality, the more threatening and mysterious death becomes. The more we depend on technology to define our understandings of illness and death, the more odd sounds the suggestion that we should ‘die well.’ In a techno-medical system which is often implicitly or explicitly death denying, it easy for us to fail to notice that death and terminal illness may have meaning beyond the understandable but ultimately unrealistic desire to avoid both. Within such a context the suggestion that "Death has been swallowed up in victory." (1 Cor 15:54) can be seen as little more than denial. And yet that is the heart of the gospel: not even death can separate us from our Creator. For I am convinced that neither death nor life, neither angels nor demons, neither the present nor the future, nor any powers, neither height nor depth, nor anything else in all creation, will be able to separate us from the love of God that is in Christ
Jesus our Lord. (Romans 8:38-39) To “die well” requires more than can be told within the narrative of medicine alone.

In order to die well we need to learn to see beyond our culturally constructed assumptions concerning the meaning of death, what it means to be healthy and what is important in life and begin to accept the reality that death and dying are inevitable and perhaps even valuable aspects of human existence. Dying well means that we must learn to see dying as an experience within which we have much to learn about living well. Death is not a medical failure. We need to discover, or perhaps better rediscover the fact that the process of dying is a deeply meaningful and spiritual human experience within which the search for God, meaning, hope, purpose, forgiveness and perhaps even salvation, often rise to the forefront of people’s expectations in new and challenging ways. These deeper, theological dimensions of the experience of death and dying are often hidden from our notice by our tendency to focus on pathology, illness and loss, rather than exploring the possibility of discovering health and well-being even in the midst of dying. Both medicine and theology are necessary for end of life care. The question is: how can they be enabled to work together effectively to enhance health and well-being for people who are dying, their families and their loved ones?

The symposium initiated a constructive, interdisciplinary dialogue which will sought to explore the ways in which these two modes of healing – theology and medicine - can be brought together in constructive dialogue in ways that will enhance both the theory and the practice of end of life care.

**Key points addressed by the symposium included:**

What does it mean to ‘die well?: medical and theological perspectives.

What are people for?: what we believe people are for will determine how we think they should die.

A revised understanding of death?

The power of lament and prayer

The possibilities of hope and compassion

What can Christian theology and practice tell us about dignity-in-dying?

Ministries and practice of presence and non-abandonment

Honest and Truth-telling

Can theology and medicine cooperate in constructing a mutually enhancing empirical research agenda?