Harris Athanasiadis September 13, 2026

HOW DO WE VALUE THE GIFT OF LIFE?

John 5: 2-17

How do we value the gift of life?... Well, there are all kinds of ways we can answer this question, no? But there is also a whole new challenge that has come before us in the last 10 years. We are now given a choice we never had before. The word for this is: MAID (Medical Assistance in Dying). Some of you are quite familiar with MAID and some of you may not be. Some of you may have been present in a hospital room or at a home when a loved one was helped to die by a doctor. Whether it was because they were very sick and would never recover, and whether they were in pain, suffering and distress, the choice was given to them to choose to die with a series of injections administered by a doctor within minutes. MAID is seen as the merciful option and there are more reasons still why it is increasingly a choice many people are making.

MAID was first approved legally in Canada in 2016. At that time, it was a choice being given to persons who were terminally ill with no chance of recovery. A person was going to die but was choosing not to prolong their suffering. Instead, they could chose a date and time to die with a doctor, and approved by a medical team. They were given the option to welcome family and friends to be present and to have the time to share final moments, prayers or whatever else they chose to mark the time. It was seen as the humane and compassionate option, as a recognition of human dignity for the person. To value the gift of life also involves agency and the choice to die rather than continue living the uncertainty of when and how death will come as decline and suffering continue.

However, by 2021, the legal terms of MAID have expanded to include options for people who may suffer a terrible condition that is not necessarily leading to death in the foreseeable future. This includes conditions like dementia and Alzheimer's and possible chronic conditions that it is argued cause intolerable suffering but not necessarily death. More recently, there is debate about whether mental health conditions like severe depression should be allowed within the legal parameters of MAID. While the debate continues among politicians, legislators and the medical communities within Canada, the trend has been very clear. MAID is expanding as an option for people and more and more people have been choosing it here in Canada. This trend is also one found in Europe among other places, although various nations are developing their processes in different ways.

So, what may we think and feel in response to all this? Some of us, like myself, who have been involved in situations of MAID with people may have strong ideas about it. But we need to be cautious about generalizing our experience to apply to all situations. Each individual case and condition is so distinctive, it's unfair to make blanket judgements one way or another for or

against. But, as the option for MAID has been expanding, many within the medical community and beyond have been raising alarm bells too.

In a recent column in the Globe and Mail newspaper, journalist Robyn Urback points to data showing how, in her words: "Canada has become a place where death is the solution to suffering." She gives examples where a patient who is refused MAID by one team of doctors in one province, goes to another province where they are approved to get it done. She refers to specific cases like a 52-year-old man with chronic back pain and a bipolar disorder who received MAID while out on a day pass from a hospital. Or, the 26-year-old with Type 1 Diabetes, partial blindness and mental illness who was denied MAID in Ontario but went to BC and had it done. Then there is the 51-year-old woman with chemical sensitivities who couldn't find appropriate housing who chose to die and was approved. Or the disabled person in their 30s who applied for MAID after being denied funding for an in-home caregiver but was approved for MAID.

The thrust of the article, and Urback is not alone in arguing this, is that as our medical and social welfare systems are deteriorating, MAID is the solution people are seeking and we as Canadians are tolerating.

Another factor in addition to our failing health care and social support systems in Canada is our isolation as individual Canadians. Many who suffer from various health issues also suffer from loneliness and lack of community friendship and support. We here at Armour Heights in partnership with Mosaic really aim to target this problem with various programs we offer on a regular basis. But many are not reached and like our failing medical and social support networks being funded, social programs through organizations and churches have been shrinking too. People are falling through the cracks and it is alarming to hear of situations where social support is unavailable while the option to terminate life is not.

Then there is the disabled community which has been raising alarm bells about MAID for a while now. How do we value the gift of life for those some deem less able? Are we as a society willing to support the extra cost of caring and providing independence to those who need special equipment and medical support on a regular basis in order to live with a dignity and freedom many of us take for granted? Or, may the option of MAID put pressure on those with certain conditions to cut social costs by choosing to end their lives?

Finally, let me also point to another area of concern, namely, palliative care. Many within the medical community have been raising alarm bells about how MAID may undermine the whole palliative care hospice movement by hastening death because it is the cheaper option. Why extend life by managing pain and allowing the person to die with care until they do, when you can end life sooner and not have to drag it out? And yet, what's at stake in that alternative?

There is a recent book on MAID I read by an experienced hospital chaplain named: Dr. David Maginley, called: "Early Exits: Spirituality, Mortality, and Meaning in an Age of Medical Assistance in Dying." Maginley is not only an experienced chaplain, but also a survivor of stage 4 cancer. He claims that the introduction and expansion of MAID is destroying the Palliative Care movement and this is having harmful impacts for people, especially on a spiritual level. And he is so upset by it, he has left his profession and taken early retirement because he cannot work in a medical context where MAID is so easily accessible.

Why is Macginley so upset? Well, he believes that a person's journey toward death is as important as all they do to live a richly meaningful life. The dying process involves a very necessary process of letting go… Our choice should not be how and when we die but in choosing to let go and let be. Such letting go is an invitation to give up our ego as we transition to the next stage of after-life which is communion with the whole or for some of us: God. And Macginley offers many examples of how as a chaplain over 20 years, he has witnessed and supported people on this journey. By holding on to control and to choice in order to protect our egos we are also choosing to die without experiencing the final gift life has to offer, to let go control, let be and move into another kind of fullness of being…

Now, even though, I am not fully convinced by Maginley's clarity of certainty about how all people can die so beautifully, I hear his concern about how much our society privileges choice, agency and control as the epitome of human dignity. How many of us have experienced moments if not new pathways to freedom, peace and personal growth in situations and circumstances when we have had to give up control and let be, when we have had no choice about what we had to suffer and yet found new pathways to blessing by accepting new realities in our lives? Acceptance is a choice too. Choosing to let go is choice too.

OK, so how do we, then, truly value the gift of life in the face of new choices available to us with MAID? And how may our choices be influenced by our social supports, lack thereof or our need for control? Let's dive into our gospel lesson in search of some revelatory wisdom.

Our gospel lesson is an example of how Jesus engages a person with a terminal condition of disability. We're told several things about the man in question. He has been paralyzed for a long time. What happened to him as a child or youth for this to have happened to him? We know from contexts of violence and war, which was very much the situations of Jews at the time as an occupied people, how trauma manifests in bodily illness or disability and how it is also linked to mental distress, harmful experiences and losses too. So, this explains how Jesus the healer approaches the man. It's not just about some medical intervention to the man's body. It has to be an engagement of the whole person: mind and soul as much as body. All of it need healing.

Well, Jesus addresses the man in a way he has not been addressed before. He and many other sick and disabled people have been camping out for a long time near this pool of water. Clearly

there is some kind of reservoir beneath the water that not only provides the water but also stirs it up every so often. The belief many people have is that whenever the water is stirred up, there are healing properties in it. Is this mere superstition, or is there some credible idea of how faith in some healing possibility combined with water movement may actually provide some therapeutic healing benefits for people. We don't know. And it's besides the point anyhow.

What is important is that Jesus asks the man whether he wants to be made well. Does the man have any faith in what can happen for him or has he given up? Jesus invites the man to answer. Giving an answer is also about agency and choice. The man can say yes or no. And yet, what does the man actually say? He says that whenever the water is stirred he has no one to help him get to the water. Rather, everyone more able to move than him gets in front of him and goes in. Wow! How sad is this? Imagine the despair and isolation of this man totally on his own, suffering all these years with no supportive network or friend to help him. How sad! But Jesus' question is not about the man getting to the pool. It's bigger than that. "Do you want to be made well?" The answer to such a question may seem obvious, but it's really a question about how much the man himself may be empowered to choose for himself. He is no passive recipient with Jesus. His faith in what's possible must be activated for Jesus' healing power to get activated! "Do you believe you can heal somehow?"

The man rises to the challenge. Jesus tells him to get up and walk. And… he does! This is about faith, faith in the man which also awakens his own faith in what's possible for him. This is also about support and care for the man. It's about the man experiencing that he matters to someone else. Jesus takes the time to pay attention to him, to engage him, to listen to him. What choices may we make, even in our suffering and dying, when we know someone cares about us and calls us to re-claim life in whatever situation we're in. This story is not just about physical healing. It's about whole person healing. And this involves agency and choice in ourselves and it involves someone who reaches out to us with genuine care and compassion.

And just in case we don't pick this up, here's what Jesus further tells the man after he rises up in his journey of healing. While the authorities are busy focussed on rules about when and how healing is allowed to happen, Jesus says this to him: "See, you have been made well! Do not sin anymore, so that nothing worse happens to you." Pay attention here. Jesus is saying that physical paralysis is one thing. Making bad moral choices in your life is even worse. Whatever happens to us physically, how will we make good choices whatever our situation in life? To fall into bitterness, hate, contempt, indifference or any number of anti-love ways of being in response to our crisis of health is far worse than the crisis itself. Far more life-giving it is to renew and rise up in ourselves in love no matter when it is that our time to suffer and die may be.

Does this make sense? Whatever our situation and whatever the situation of someone we care about considering the option to choose death, we need to ask ourselves: how much is love and care a part of their lives and what role to we have to play in that? What choices are available within the specific circumstances, illness and personality of the person in question? How may they be invited to rise up in grace and love in the face of their suffering and loss of control? How may letting go and letting be in acceptance be the better choice than clinging on to the right to die?

As the Protestant Reformer Martin Luther wrote long ago: Each of us must do our own living as we must do our own dying. And yet, we are part of each other and we live in a time and a place where new choices are being made available in how we may live and how we may die. We should be careful in our judgements with people and always choose the way of compassion. At the same time, we need to challenge our society with this presumption that choosing to die is increasingly the more humane option when convenience, cost and lack of support are very much factors.

God calls us to care ever more deeply. Jesus calls us to follow him in the care, compassion, attention and love we have to offer others. How may we continue to find the right ways to value the gift of life we have been given? … There is no ultimate right or wrong answer when it comes to MAID. But we must do far more and better as a society in caring for each other than we do so that people are empowered to make the best choices for themselves.
Amen.