

Unitarian Universalist Church of Wakefield
Reverend Maddie Sifantus
Memorial Day Sunday, May 24, 2009

OPENING WORDS

Life is a gift for which we are grateful.
We gather in community
to celebrate the glories and the
Mysteries of this great gift.
May we in this hour find peace like a river.
On this Sunday of Memorial Day Weekend, m
May we care for each other in our sorrows and concerns
And in our remembrance of those who we have lost.
And may we, if we may be so blessed, find joy like a fountain.
Joy in sharing the load, joy in coming together and
Joy going back out into the world. May we find peace together.

FIRST READING – from “On Natural Death” by Lewis Thomas

There are so many new books about dying that there are now special shelves set aside for them in book shops, along with the health-diet and home-repair paperbacks and the sex manuals. Some of these are so packed with detailed information and step-by-step instructions for performing the function that you’d think this was a new sort of skill which all of us are now required to learn. The strongest impression the casual reader gets, leafing through, is that proper dying has become an extraordinary, even an exotic experience, something only the specially trained get to do.

From the essay “On Natural Death”, Lewis Thomas¹

SECOND READING

Medical Science Is My Shepherd, anon.

Medical science is my shepherd;
I shall not want,
It maketh me to lie down in hospital beds;
It leadeth me beside the marvels of technology.
It restoreth my brain waves;
It maintains me in a persistent vegetative state for its name’s sake.
Yea, though I walk through the valley of the shadow of death,
I will find no end to life;
Thy respirator and heart machine they sustain me.
Thou preparest intravenous feeding for me
In the presence of irreversible disability;
Thou anointest my head with oil;
My cup runneth on and on and on and on.

¹ Beis, Sally B. and Donald E. Messer (1997). *How Shall We Die?* Nashville: Abingdon, 13.

Surely coma and unconsciousness shall follow me all the
days of my continued breathing;
And I will dwell in the intensive care unit forever.²

SERMON “There is a Time”
Unitarian Universalist Church of Wakefield
Sunday, May 24, 2009

There is a time. There are times like these when we are here together in beloved community. There are times when we are each alone with our thoughts, our hopes, and our dreams, as well as our problems and our despair. There are times of joy and of sorrow. Times of hope and times when hope seems hard to find. There are times of amazing grace and times of awkwardness and clumsy searching. There are times of war, as we are especially aware this Memorial Day Weekend, when we recognize those who have made the ultimate sacrifice. And, of course, there are the times of birthing and times of illness and death. There is a time, a time for all manner of things.

The writer of the book of Ecclesiastes in the Hebrew Bible was named Qoheleth, which means teacher. I think that Qoheleth must have been very wise indeed. But, then again, perhaps he (or she) is just naming in those verses we heard earlier in the anthem the choir sang what we come to know by living as human beings. We come to know, just by living, that there is an ebb and a flow. Things change. Nothing remains the same. As the Buddhists say, all is impermanence. When you get to be a certain age and have lived, you know it is so. On the other hand, as Qoheleth says earlier in Ecclesiastes (1.9c), “there is nothing new under the sun.”

But we, we like to think we can count on things. And, of course, there are certain things we can count on: the sun does go down at night and rise in the morning. The seasons come and go in their turning ways, seemingly faster each year. Babies are born and people die. There is a time for all of that and more.

There is a poem I love by Jane Kenyon. Perhaps you know it:

Otherwise Jane Kenyon

I got out of bed
on two strong legs.
It might have been
otherwise. I ate
cereal, sweet

² Ibid., 152-153.

milk, ripe, flawless
peach. It might
have been otherwise.
I took the dog uphill
to the birch wood.
All morning I did
The work I love.

At noon I lay down
with my mate. It might
have been otherwise.
We ate dinner together
at a table with silver
candlesticks. It might
have been otherwise.
I slept in a bed
In a room with paintings
on the walls, and
planned another day
just like this day.
But one day, I know,
it will be otherwise.

Yes, there is a time for eating cereal and flawless peaches. A time for walks in the birch woods with a beloved pet and doing work that we love. There is a time for dinner with silver candlesticks and planning for the future...but one day it will be otherwise. One day we may be dealing with serious illness or disability. One day the time will come when we are planning for the death of a loved one or perhaps our own death. One day it will be otherwise, just as it eventually was for Jane Kenyon, who died too young of leukemia in 1995. For this time together this morning of Memorial Day weekend, I want to think with you gently about this time of otherwise and what it might mean for us in a beloved faith community, as Unitarian Universalists.

You know, we don't like to think about death or illness in our culture. We don't even like to think about getting older. That we live in an ageist society is plain from how the media and the advertisers court us and make decisions about what we might want to watch on television or at the movies. Yet even from the moment we are born, we are heading towards death. This is a fact of life. There is not a darn thing any one of us can do about it, no matter how much we are in denial about it. No matter if we have planned ahead for it or not. No matter if we attend church or not. That time is going to come.

I assume I am not telling you anything you don't already know here this morning. What I **am** wanting to do with you is to say it out loud, to name it, and hopefully give you some ways to think about what it may mean to us here together, thoughts you may be able to take home to your family and friends for further discussion. And to let you know that this time is not just a time of sadness, but rather a time when reconciliation's can take place, new understandings can occur. A time of taking stock and of giving great gifts.

As you may remember, for twenty years the ministry I was called to was the Golden Tones elder chorus. Doing that work brought up close and personal with end-of-life issues, death and dying. For the unavoidable fact of working with the age group I did is that loss and death comes to each and every one of us. The elder years are made up of multiple losses for all, if you live long enough. Besides experiencing loss due to the death of a beloved family member or friend, there are losses of community, losses due to changes in health or work life, losses of treasured pets, loss of independence when one has to give up driving, and all the changes that result in the sense of loss one can experience as one ages, this sense of this world we live in spinning on into the future leaving us feeling out of it and unable to understand the new ways of doing things.

A couple of years ago I was an outreach worker for the Bill Moyers' series, *On Our Own Terms*. This series did a good job at looking at the many issues we may confront at the end of life in our current medical system and how we might take our deaths back from being a 911 call medical event to being, rather, on *our* own terms: being the spiritual event it actually is. As one part of the series, it also came to terms with the challenge brought to our thinking by the topic of physician assisted suicide, which is one area where we can practice discernment, when trying to come to grips with the solution that some take or consider. However, I think it is important to name that "dying well, to many, means control over the choices to be made as we die. We fear dying in pain; we fear that too much will be done to keep us alive, or we fear that not enough will be done."³

We all need to learn better how to be with those dealing with grief and loss. We all need to learn how to be with those who will need us in new ways. And we feel at a loss at dealing with loss! No one trains most of us. Seminaries don't require courses in it; ministers rarely preach on

³ *On Our Own Terms Discussion Guide*, 12.

it. Even most doctors have no training in working with the dying, although there are people working to change that now. Indeed, there is a growing movement to respond to the new situation created by the wondrous improvements in medical treatment and breakthroughs in understanding of how our bodies work which took place in the last century. The downside of these positives is the situation referred to in our reading, *Medical Science Is My Shepherd*. All these medical advances have brought us to a whole new ethical arena as the landscape of dying has completely changed from that of our grandparents. Living much older can mean we may be much sicker at the end of life. The various technologies can extend life, as it said in the reading: “my cup runneth on and on and on and on.” Is this what we want, any of us? And how do we make decisions with or sit by our loved ones if this is the situation we find ourselves in?

First of all, I would like to give my own strong recommendation that you begin the conversation with your family and friends about what your wishes for your own life may be long before it is a necessity. We don't know what can happen to us in a blink of an eye, as the horrific auto accident that took place Friday morning on Route 128 reminds us. Many people seem to think this a morbid topic, or even are superstitious that talking about it may somehow bring it sooner! Yes, even us rational Unitarian Universalists can be superstitious, I've found! Through my work, however, I have found that the contrary is true: that families who can talk about these subjects are brought into greater intimacy with each other. Furthermore, those of you who give advance directives about your end of life wishes and care to your family, clergy, and medical professionals are really giving a tremendous gift to those who care about you. It takes the guesswork out of decisions that will have to be made. Nothing could give more peace of mind to a son or daughter, wife or husband, brother or sister or friend than to know how you want to live on your own terms. Because the other thing to keep in mind is that life continues until the time of death. And the gift of each life continues to be given.

I would like to recommend a document put out by the organization Aging With Dignity called *Five Wishes*, which is not only an advance directive which is legal in Massachusetts, as well as 32 other states, but a wonderful vehicle for planning. I will be giving a workshop on using this document on Sunday evening, June 7th at 7:00 PM, following our weekly Meditation Practice Group. This document is written in easy to understand language and is simple to use. The five wishes cover five areas- your wish for:

- The person you want to make care decisions when you can't. This is the assigning of a health care agent or proxy.
- The kind of medical treatment you want or don't want. This deals with what used to be covered in living wills, such as your desire for life support treatments. And the document gets very specific about different situations which can occur.
- How comfortable you want to be. This section gives your wishes about anything from favorite music you may wish to have played to wishes about pain medications.
- How you want other people to treat you. Do you wish to have people with you? Do you wish to stay at home, if that is possible.
- And, lastly, what you want your loved ones to know. This covers a multitude of things from how you might want to be remembered, to funeral wishes to the expressions of feelings for loved ones.

The whole point is the desire for people take back the dying process from a being a medical event. To reclaim it as a spiritual event, somewhat as advocates for better birthing situations have changed the way babies are born these last years. Currently, "people are experiencing intensive care, instead of intensive caring."⁴

Intensive caring. How can we provide intensive caring, as individuals or as a church? How do we help with those who are grieving or live with our own grief? These are big questions, and, again, despite the fact that none of us in this life can avoid loss and grief, we are ill prepared to deal with it in ourselves or with others. We don't know the right thing to say or the right thing to do, often. Whatever the "right" thing is! Because I do this work, I often have people ask me what they should say. Well, of course, there is no magic formula, no incantation that will make someone feel better or "snap out of it". And avoiding the grieving person is more hurtful than saying the wrong thing. Then they are not only dealing with the loss they are grieving, but they are also losing friends and community.

My number one piece of advice is to LISTEN. A minister I once worked with, a wonderful caring man named Doug Manning, used to say, "You gotta lay ears on 'em!" There's something else we are not great at in our culture: listening. Just being with a person who is ill, or dying, or grieving is enough. There are no magic words, no perfect philosophical turns of

⁴ Beis, *Ibid.*, 153.

phrases. What is more to the point is to bring the person to whom you are giving intensive caring the gift of your listening- to get them talking about the loved one they have lost; to get them talking about what their faith may be which is getting them through this time; to have them spell out their fears or their anger. Because this time is a time when anger is a natural part of the process.

And this time is a time that takes time. Doug Manning tells the story of something that happened to him early on in his ministry: a couple “suffered the sudden death of a child. The child had the croup, the condition worsened and the child was admitted to the hospital. The doctor saw nothing serious, put the child under oxygen, and sent [the father] home to care for [their] other child. In thirty minutes the child was dead. [The wife] was hysterical. Everyone was trying to get her to calm down and ‘get hold of herself’. She stopped suddenly and said some of the most profound words [Manning had] ever heard. She said, ‘Don’t take my grief away from me. I deserve it, and I am going to have it.’”⁵

Grief is a natural process. There is no correct time table. We need to feel what we feel and have a place to explore those feelings. What better place than the faith community. What better place to be there with each other in times of joy, yes, and in times of sorrow. Just be there. Just listen. As Manning says, “Our task is not to explain. Our task is to be there. All we have to do is just be there. We do not need to say anything at all. Our presence and a hug go farther than all the explaining in the world.”⁶

This is no easy subject and not one that every one wants to think about. Let me tell you, when I started my elder chorus, a large part of which was all about the joy of being together making music, I had no idea that I would be spending so much of my time thinking and talking about the end of life. I am sure some of you here this morning got up and came here to church not knowing what I was going to talk about. Perhaps you wouldn’t have come if you knew! But I need to say to you that I don’t find this depressing in the least. Sad at times, yes. Angry at times, yes. But, all in all, I find aging and dying a rich time of great possibility. The end of life can be a time of taking a spiritual inventory. Of asking questions like, “Who have I been all this time?” “How have I used my gift of a human life?” “What gives my life meaning?” “What and who

⁵ Manning, Doug (1985). *Comforting Those Who Grieve*. HarperSanFrancisco, 12.

⁶ *Ibid.*, 53.

have I learned to love and how well have I learned to love?” What better questions to ask in a church and why wait to the end of life to ask them?

Bill Bartholome called his period of dying in *On Our Own Terms* “living in the light of death.” He said, “To live in the bright light of death is to live a life in which colors and sounds and smells are all more intense, in which smiles and laughs are irresistibly infectious, in which touches and hugs are warm and tender almost beyond belief. To live in this awareness of who, what, and where I am is to live more fully than I ever dreamed possible.”⁷ There is a time even for this. May each one of us be able to be present in all the times of our lives. May we take the time to remember those servicemen and servicewomen who died to soon this weekend—and all those who are gone. And may we be there with each other in our times of joy. May be we be there in the times of *Otherwise*.

⁷ Bartholome, William G. (1995) from *Meditations* in Bulletin 45(2): 52, University of Kansas, April 1995; and in UPDATE, Midwest Bioethics Center, June 1995.