

I'm sure that many of you are familiar with the famous story about two Jews who are stranded together on a desert island. When a ship finally arrives to bring them home, they insist on first showing their rescuers what they have built: three synagogues!

"Three synagogues?" the rescuers ask. "There are only two of you on this island."

"Yes," one of the stranded Jews replies, "One is for me and the other is for him."

"And the third?" the puzzled rescuers ask, "What about the third one?"

"Oh that one," the two reply together, "that is the synagogue that neither one of us will ever set foot in!"

Often, when I am asked, "What does Judaism say about ... ?" Well, about anything really, I often reply with this story. You know, two Jews, three opinions. I have had the opportunity to tell the story many times in recent weeks as the nation, and in fact, the world, has watched the tragic events surrounding the death of Terry Schiavo in Pinellas Park, Florida.

So, what does our tradition have to say about Terry Schiavo, and more importantly about the circumstances surrounding her life and death? Well many things really, and, not surprisingly, sometimes things that seem contradictory.

If you, by chance, happened to turn on a television set in the past two weeks, you may have seen signs outside the hospice declaring: "Jews for Terry" and "Jews for Life." (As if we were not all for Terry and all for life ...but the coopting of morality is really the subject for another night.)

So yesterday, as the media searched for every angle they could find you may have seen one of many interviews with clergy of different faiths. In which case you may have heard different rabbis saying different things about What Judaism's position is on this issue. And maybe this has left you confused, so that you're sitting here tonight saying to yourself, "Rabbi, what is the Jewish position?" "One says this and another says that ... and I'm confused." To which I, only half jokingly say, "Yep, *that* is the Jewish position."

Joking aside... where one falls as a Jew on the issues that have confronted us all during these weeks very much depends on how you interpret some key teachings of our tradition. That being said, let me share with you my understanding of our tradition and therefore, my perspective on the events surrounding Terry Schiavo:

First, of course, Judaism holds life to be absolutely precious. We all know that the primary message of our High Holy Days is to choose life. And we are familiar as well that our tradition teaches that the principal of *pickuach nefesh* - of saving a life, takes precedence over almost all other demands of Jewish law. Therefore, one can violate the laws of Shabbat to save a life, one can even eat on Yom Kippur to save a life. Life is seen as a gift from God. and our bodies, as the vessel that contains that life, as most sacred, and therefore, not ours to do with as we wish. We are created *betzelem elohim* - in God's image. And so the strong injunctions against doing anything destructive to our bodies ... which are only on loan to us.

But, on the other hand, (as the Rabbis of the Talmud say ...) What about an individual whose death is imminent? Must we take all measures to keep him alive? Even to the extreme and to the very end? Well, yes ... and no. Here we venture into the realm of what is often called "the right to die," where almost all Jewish discussion begins with this story from the Talmud:

The dying of Rabbi Judah ha-Nasi was painful and prolonged. His disciples gathered in the courtyard, where they prayed incessantly that he might live. Moved by the anguish of her master, his maidservant shattered a jug in the courtyard, thus disrupting the prayers of the disciples that the rabbi would not die and allowing his soul to depart.

In this story, the great Rabbi Judah ha Nasi is being kept alive by the incessant prayers of his followers. His maid servant, who our tradition depicts with great respect and honor, witnessing the agony of her master, goes to the roof and throws down a large clay pot, surprising the Rabbi's followers. In their shock, they stop praying momentarily. In that instant, the Rabbi dies.

From this story our tradition has evolved several important principles about the end of life: Rabbi Judah is in a condition our tradition identifies as *goses*, that is, one whose death is imminent. Our sages teach from this story that in this case, any external means that are being used to keep him alive, in this case prayer, may be removed.

In response to this story Nissim Gerondi, a medieval Spanish scholar, taught that while it is our duty to pray for a sick person that he may recover, as we have in our *mi shebeyrach* prayer tonight, there comes a time when we should pray for God's mercy that he should die. [Commentary to Nedarim 40a]

This is an act classified as passive euthanasia. That is, discontinuing any extraordinary measures that are being used to keep an individual alive.

Let me share another Talmudic story which is used by our teachers in order to illustrate the distinction between passive and active euthanasia:

Convicted of teaching Torah during the Hadrianic persecutions, Rabbi Hananiah ben Teradyon was condemned to be wrapped in a Sefer Torah and burned at the stake. Seeing his torment, his disciples urged him to open his mouth, breathe in the smoke, and thus die more quickly. He refused, saying, "It is better that God who gave life should take it and that I do not kill myself." To prolong his suffering, the Romans placed water-soaked packets on his chest lest he die too quickly. Upon seeing his agony, the executioner offered to remove the wet cotton if the rabbi promised him eternal life. Hananiah promised, and the executioner complied. As Hananiah died, the executioner jumped into the flames. A heavenly voice announced that both of them had a place in the world to come.

Here again, is a circumstance where death is imminent. If the Rabbi were to open his

mouth as his disciples urge, he would accelerate his death. In essence he would be killing himself. And so he replies, 'It is better that God who gave life should take it.' And so he refuses. But, when his executioner, witnessing his prolonged agony, caused by the wet packets that have been placed on his chest, offers to remove them ... the Rabbi agrees. While he will do nothing to actively accelerate his own death, he will allow the removal of artificial impediments that are delaying the process.

Passive euthenasia is removing any impediments to death, such as prayer, wet clothes or mechanical respirators. This is distinguished among most Jewish thinkers from active euthenasia such as opening ones mouth to breath in smoke and fire or the injection of potassium chloride in order to produce cardiac arrest.

Indeed, our tradition teaches that we need not take extraordinary measures to keep one alive, we must be cautious never to act in a way that might artificially accelerate one's time to die. We are instructed that even a *goses* "must be regarded as a living person in all respects. One may not move him until he dies. One may not close his eyes ... [Such a person] can be compared to a flickering flame. As soon as a person touches it, it goes out. So too, whoever closes the eyes of the dying is considered to have taken his life." [Mishnah, *Semachot*, 1-4]

It is quite a fine line to be sure, and some protest that this distinction between passive and active euthenasia is simply a semantic splitting of hairs. In their opinion, whether you allow someone to die or are more active in helping them to die, you have killed them if you do not do everything in your power, no matter the circumstances, to preserve their life. Those who take this position accuse Michael Schiavo and his supporters of murder.

However, most bio-ethicists agree with the Jewish perspective as expressed in these two stories that there is a distinction to be made that hinges primarily on the difficult distinction between prolonging life and delaying death.

As difficult as that distinction is, the miracles of modern medicine have made it only more so. We don't have to go back to our ancient sages to find a time when someone like Terry Schiavo would have simply died. Most of us can remember when there was no such thing as PVS, a persistent vegetative state. Here, on the dark side of the miracles of modern medicine are a vast array of difficult and perplexing questions about the boundaries between prolonging life and delaying death.

The Jewish questions surrounding Terry Schiavo derived from our Talmudic stories are: Was she, suffering? Unlike the Rabbis in our stories, clearly in her vegetative state she was not. And so, purely from that perspective there was no need to do anything.

But, was Terry Schiavo a *goses*? That is, was her death imminent? Well that depends, to some extent, on your answer to the next question:

Was she being kept alive by extraordinary measures?

And on these last two questions there is a great deal of disagreement. There is time here just to lay out two of the more basic positions:

The first, that of the Orthodox movement is that:

A patient who suffers from an inexorable terminal condition with no possibility of cure is nevertheless entitled to all basic life support maintenance and therapy such as food, liquid, and intravenous infusion when necessary..." [Jewish Answers to Medical Ethics Questions, p.190]

Here the value place on life itself, no matter the form is central. Orthodox Rabbi and physician Dr. Moshe Tendler cautions that to do other than preserve life is to walk a slippery slope where the definition of extraordinary treatment becomes one of personal choice.

He writes;

I do not know of any way to justify the removal of water and food from a patient totally in your care. ... I believe [that to do so] is 'active' euthanasia, ... "Active" is whether you intervene unnecessarily or do not intervene when you must. If you have an obligation to intervene and fail to do so, that is "active" euthanasia. [Jewish Answers ... p.191]

And so, in the context of this perspective, the ethical responsibility was to continue to prolong life and Terry Schiavo's death was murder.

On the other side of this argument is the voice of Rabbi Elliot Dorff, Vice-Chair of the Conservative Movement's Committee on Jewish Law and Standards. He argues that given the fact that an individual in a persistent vegetative state can not feed themselves, medical procedures must be initiated in order to provide nutrition and hydration. Therefore, nutrition and hydration can appropriately be classified as artificial and externally administered medical interventions.

After an appropriate amount of time in which it becomes clear that this treatment has no possibility of curing the patient Rabbi Dorff argues that this treatment can be stopped so as not to further delay the process of dying.

The Reform movement, in principle, agrees with the position of Rabbi Dorff noting additionally that the U.S. Supreme Court and medical codes of ethics consider feeding tubes to be medical treatment, like surgery or antibiotics.

From this point of view, certainly my own position, given the amount of time that Terry Schiavo had remained in this state and that there was clearly no chance of recovery it was both appropriate and right that the process of dying no longer be delayed.

Of course, at its core the issue here is one of choice regarding the quality of one's life. Our Sages could not have, in their wildest imagination anticipate the circumstances caused by modern medical technology, where not only can physical life be artificially

extended but, where, existence and consciousness can be separated one from the other. Where the question becomes one of redefining just what is "life" itself.

Dr. Samuel Atlas, in discussing the issue of euthanasia (1969) offered the following:

The question actually depends upon our attitude towards life: What is life? Can life be measured from the point of view of suffering and balancing the suffering with pleasure-- the suffering of the patient and the suffering of those nearest to the patient against the amount of pleasure they had seeing their dearest one still living?

David DeGrazia, associate professor of philosophy at George Washington University writes that:

Human persons value consciousness as necessary for any meaningful existence. When we permanently lose consciousness, we lose all possibility of such an existence: We can no longer think or feel, enjoy relationships with loved ones, pursue projects, or act at all. When we no longer know we exist, there is no point to existing; when we are not aware of life, life has no meaning for us. Because human beings regard consciousness as a precondition for all meaning and value, the permanent loss of the capacity for consciousness is rightly regarded as human death.

[http://www.puaf.umd.edu/IPPP/winter98/biology_consciousness.htm]

This, indeed, is a very slippery slope and one which Jewish ethicists from all movements agree must be approached most cautiously -- if at all. For who can possibly be the final arbiter of meaning and purpose and desire in one's own life? Issues regarding the quality of life are issues of personal choice and personal conscience as much as they are about medical and religious ethics.

In such decisions, as has been the case with Terry Schiavo, as many of us have experienced with our own loved ones context is everything. And context is best and most importantly determined by the one most affected. "How will I live?" "Under what conditions?" "For how long?" We all know that had there been no question of Terry Schiavo's wishes ... none of us would know about Terry Schiavo.

Of course the unfortunate reality at the end of Terry Schiavo's life is that her wishes were not entirely clear. We can assume, given the courts continual upholding of Michael Schiavo's position, that there was some foundation to his claim that he was expressing his wife's desires.

What has become crystal clear, therefore, is how important it is for us to anticipate the possibilities and to make known our wishes for our lives. Some of us might choose to have every heroic measure taken to keep us living ... as long as there is any possibility of recovery. Others would choose just the opposite.

The choice is a very personal one; and, as we have seen, could be supported by our tradition in either case. But, such decisions should never be left to guess left to our loved ones to decipher. The consequences of that, as we have seen over the last weeks and even years, are too destructive and too painful. I know that, for me, the pain tragedy of a family torn apart at the seams was as painful and discomfiting as Terry's death itself.

So, I hope that we each have learn a most important lesson. Let Terry Schiavo's legacy be that we each take the time to prepare a living will. On the table outside the Sanctuary is a sheet on which you can order a workbook called a Time to Prepare from the URJ to begin this process. I will gladly order a copy for anyone who gives me their name.

No matter your position on the events surrounding Terry Schiavo's death whether your consideration of the positions I have discussed - or your own personal ethics leads you to believe the correct decision was made - or not, I know that we all join together in praying that her grieving family Shindlers and Schiavos alike find a place of compassion and forgiveness from which they can bless and honor their daughter, their sister and wife's memory.

May she rest in peace.