

# Perpetual Perishing, Perpetuating Life

---

by Darcy Baxter, M.Div

**Keynote Speech delivered at BC Women's Hospital and Health Centre  
September 19, 2011**

Words from poet Nicole Hardy in her NY Times piece entitled "Single, Female, Mormon, Alone" about her experience getting an abortion in her mid-30's.

Oddly, my trip to the women's health clinic provided much that the church had not in recent years. During my exam, the clinician explained every move before she made it, asked permission to touch me during the most routine procedures. I was mystified: by her compassion, by the level of attention paid to my body — as if it were fragile, or sacred. Only then did it occur to me how many terrified and abused women they must treat every day.

And that brought me to tears, sorrowful for the ways in which we all suffer, in whatever ways we do, and grateful for the unlikely refuge of this place. Grateful also for the safety granted my own tears, prompted by the delicate weight of a hand on my shoulder, the warmth of her palm against my back.

How unprepared I was to experience tenderness in the place I had been warned so vehemently against. How unprepared for the flood of relief, the bud of hope, after a life devoted to keeping myself separate from my body. Here was a path, an opening; here was empathy.<sup>1</sup>

If asked what is a place that you would call spiritual, I doubt that most people would name a hospital or medical clinic. When a woman comes to you, when you are working with and treating her, treating her pregnancy, or treating her child, what you find yourself in is a spiritual experience.

Now what do I mean by spiritual. Spirituality has to do with the issues and questions that all humans address in some way. It has to do with the deep feelings and beliefs we have about meaning and purpose, priorities and values, justice and goodness, our relationships and connections to others and the world. Common spiritual themes include forgiveness, reconciliation, suffering, healing, recovery, community, relationships, love, life, death, birth.

---

<sup>1</sup> Nicole Hardy. "Single, Female, Mormon, Alone." New York Times, January 7, 2011.

In contrast, religion is a set of texts and traditions that can be used to address spiritual questions and needs. Everyone has inherent spirituality, whether they call it that or not, but not everyone uses specific religion to address their spiritual needs.

Anencephaly, spina bifida, congenital heart defects, Trisomy 21, fetal demise, selective reduction. Most likely, such experiences will invoke crises of meaning for patients. What does recovery look like for a 25-week preemie? Why does healing require such pain? When does our use of technology cross over into that brave new world that sacrifices humanity for perfection?

Spiritual work is not easy work. And often, it is not fun or pleasant. It requires bearing witness to suffering, to how hard living can be, and ask yourself the difficult question about what is in your capacity, your always-limited power to truly address such suffering.

Hopefully the work is meaningful, profound, and rewarding but I believe it can be more so when we have a sense of clarity and connectedness to this thing we call morality.

Good or bad. That's what morality has to do with on a basic level. But what constitutes good and what constitutes bad and for whom?

Childress and Beauchamp's classic four principles, respect for autonomy, promote well-being, do no harm, and justice, have served as an ethical map, though they have proved inadequate for addressing the complexities of human living, ethical uses of power, and the differences we encounter in people and their own moral priorities and understandings.

When I was working as a chaplain in the NICU, I participated in many joyous celebrations when a baby "graduated" from the nursery. But the longer I worked there, the more complicated those celebrations got.

It got more complicated when I would see families with their NICU graduate camping out in the PICU, some exhausted and worn, some fierce and hopeful.

It got more complicated when a mother returned to the NICU and sat down with her child's primary neonatologist. Dr. Smith, 8 years earlier, had recommended withdrawing artificial support from the mother's premature infant. He saw very low probability that the child would have reasonable quality of life. The mother had refused. Who wants to end the life of their child? But eight years later, she returned to the NICU to apologize to Dr. Smith. He had been right.

It got more complicated as I saw some of the nurses and residents choose to deliver their children at small local hospitals instead of their research-medical-center. “I do not want all of the choices that the technology here would give Me.” they would say quietly.

It got more complicated as time revealed that often the families that the medical team disagreed with the most regarding care and treatment were often darker skinned, less formally educated, and poorer.

And as I participated in more NICU celebrations, I wondered when we would honor all the efforts that did not result in a graduation.

I wanted to honor the moral courage it took to advocate for and provide palliative care--that hopefully prevented intense suffering and pain, but which also meant the ending of a life.

From Albert Einstein:

A human being is part of a whole, called by us the Universe, a part limited in time and space. She experiences herself, her thoughts and feelings, as something separated from the rest a kind of optical delusion of the consciousness. This delusion is a kind of prison for us, restricting us to our personal desires and to affection for a few persons nearest us. Our task must be to free ourselves from this prison by widening our circles of compassion to embrace all living creatures and the whole of nature in its beauty.<sup>2</sup>

–Albert Einstein

When I first walked into a NICU, I came in with a couple of years’ experience working as an abortion counselor. I kind of wondered what my reaction would be. I peered in the isolette boxes, taking in these fragile bodies with all the various tubes and devices attached to them. And then I came to the smallest preemie in the unit—a 24 weeker. So I looked at this 24-week preemie. And this is what came to me. “How would I feel if this preemie was dismembered in a dish?”

As Einstein said, our separateness is a delusion. Life is always so much more than a beating heart and some pumping lungs. All the women I have counseled have taught me this too, that to nurture life requires endings, requires choices. “To live, we must die every instant. We must perish again and again in the storms that make life possible.” ~ Thich Nhat Hanh.<sup>3</sup> Looking at that preemie, I actually felt a sense of grace. I felt a

---

<sup>2</sup> Albert Einstein. Letter of 1950, as quoted in the New York Times, March 29, 1972.

<sup>3</sup> Thich Nhat Hanh. *Fragrant palm leaves: journals, 1962-1966*, trans. Mobi Warren. (New York: Riverhead Books) 1999.

sense of grace and harmony because that 24 week preemie embodied for me just how complex, heart-rending, and full life is; how connected and not-separate life and death are. Life is always more than the delusional prison of separateness we find ourselves in.

So how do we gain clarity and connectedness to this thing of morality? First we must define it. And yes, there are many definitions of morality. But difference should not deter us from painstakingly discerning our moral convictions and claiming them firmly and humbly.

The definition of morality that I would like to offer to you today, then, is the following: morality is a set of beliefs and practices that allow life to flourish, where life is understood to be inherently interdependent and relational. There are no separate individuals existing outside of interconnected web of existence.

“To live, we must die every instant. We must perish again and again in the storms that make life possible.” ~ Thich Nhat Hanh.

Now, if you free yourself from delusional prison of separateness, if you refuse what I would consider overly simplistic understandings of life, you will encounter some difficulties.

Foremost, popular culture does not exactly affirm, or acknowledge the gritty details and moral quandaries of your work, of living.

I am hoping many of you are familiar with the American sitcom *Married with Children*? Katey Sagal played Peggy Bundy. She got pregnant in 1991, an unexpected twist for the writers of the show. So they incorporated the pregnancy into the storyline. In the 7th month of her pregnancy, she had an emergency C-section resulting in a stillbirth.

So what did the producers do with the already-aired pregnancy episodes? Nope, there wasn't a miscarriage or stillbirth in the show. The producers turned those pregnancy episodes into a dream sequence referred to only once in subsequent episodes.

What television producers disappear into a dream can be the real stuff your living.

A lack of popular or widespread acknowledgment of your work may make it difficult to fully embrace this thing of morality.

For folks of liberal persuasions, claiming moral authority may be particularly rough because of what religious ethicist Dr. Beverly Harrison calls the “myth of moral superiority.” The myth is this: those who espouse conservative and traditionalist perspectives have morality, spirituality, religion, even God on their side. Liberals, because of a tendency towards secularism, an appreciation for change and for diversity, have lost the ability to articulate compelling moral narratives; failed to use the language of reverence and morality that taps into our deep-seated cultural stories of good and bad, justice, and healing.<sup>4</sup>

The sacred liberal values of tolerance, openness, and freedom can sometimes lead to a mind that is simply “open at both ends” and can lead to a people who in the face of suffering and injustice lack the power and character to act.<sup>5</sup>

And so you find yourselves in a cultural no-person’s land, a kind of moral demilitarized zone where a lot of living, dying, and choosing is going on. You find too few tools, too few words, and stories to convey the meaning, the moral dimensions of your work.

You are wedged in-between.

On one side of you, you find the dominant ethical traditions of the past and present, ones essentially built on Einstein’s delusional prison of separateness. Here, individualism, freedom from the constraints of relationship, directive-controlling power, and paternalism reign. There should be one right answer. This is familiar and thus comfortable. However, you also know such ethics have caused deep harm, disenfranchisement, and sometimes, outright abuse.

On the other side, you have an unfolding, complex, and interconnected now and future. This terrain feels unfamiliar and fuzzy. The different details of each situation require care and consideration, not mere application of an ethical principle. There are no easy, straightforward answer of rightness and wrongness. There are a lot different people, different beliefs with which you have to contend. In this land, you are certainly not in a world of separateness. But we do not know how to function, what it mean to operate, in a world oriented towards relationship, difference, and interconnectedness.

And in this in-between, demilitarized moral zone, there is the present you find yourself in. In the present, the ideals of healing, doing no harm, of patient autonomy melt into the woman, the fetus, the baby, the child, the family you are working with. The “right” path,

---

<sup>4</sup> Dr. Beverly Wildung Harrison. *Our Right to Choose: Toward a New Ethic of Abortion*. (Boston: Beacon Press). 1983

<sup>5</sup> Adams, James Luther. *On Being Human Religiously: Selected Essays in Religion and Society* ed. Max L. Stackhouse. (Boston: Beacon Press) 1976

right relationships are figured out and made on the fly in middle of emergencies, family anxiety, scope of practice politics, and bureaucratic shenanigans.

Life can be full of joy, challenges, love, loss, and triumph. It can also be one of hardship after hardship, suffering, poverty, violence, and degradation. Birth can be the beginning of living and the end living.

Can we honor such complexity? Can we know if we are doing the right thing? Can we be at peace?

Well, first off I want to make sure that you all have an appreciation for the long tradition of these questions and anxieties, for the ancientness of your struggles in relation to pregnancy, birth, and motherhood.

Now, I recently heard on the radio a discussion on public speaking. They said that there are 3 words that when used in public speaking, audience members lose focus and tune out for a brief period of time, like 10 seconds or something. The words are God, Sex, and F\*ck. Guess which one I'm going to use...

In the classic influential text, entitled *The Bible*, we find the story of Hagar, an Egyptian girl enslaved to Abraham's wife Sarah. Now, in case you are not familiar, a brief summary.

In Christianity, Judaism, and Islam, Abraham is considered the first Patriarch, who follows God's commands and fathers many tribes, including the Israelites who later become called the Jewish people. According to Christian story and belief, Jesus is a descendent of Abraham. Muhammad is a descendent of Abraham as well, through Hagar's son Ishmael. Hagar was an Egyptian girl enslaved to Abraham's wife Sarah. Sarah, unable to bear a child, gives Abraham Hagar as a wife in hopes that Hagar would bear a son that Sarah could raise as her own. Once pregnant, Hagar acts a little uppity and Sarah treats her harshly. Rather than submit to harsh treatment, Hagar runs away into the desert, where she meets a messenger from God, who tells her to return and submit to Sarah's abuses, for she will bear a son who will be the ancestor of great nations.

We can sense anxiety about motherhood, about who gets to control birth and the procreation of ancestors. We see a power struggle between an aged infertile woman and a fertile servant-slave.

In the book of Genesis, in this telling of the creation of the world, in this text from which, for better and worse, so many of our cultures have been formed, there is a reproductive ethics case.

Heck, Hagar very likely might show up in your labor and delivery unit, perhaps with preterm premature ruptured membranes and live on the unit for 5 weeks. Perhaps you cannot help overhearing odd conversations, hushed arguments, harsh words between the gestational carrier and the couple. Un-ease nags at your gut a bit about the 'rightness' of the situation.

In the beginning, there was reproduction, and in the beginning, there was conflict over how and who controlled the creating of us human beings.

In the very beginnings, there were reproductive ethics cases.

So please remember that the discomfort and unease you may feel, the advice you give, the care you provide, the comfort you offer, the decisions you make, or the decisions you want to make but can't, are both new and not new. You are playing the part in an ancient drama that will continue long after us.

May a sense of history, a sense of community with all those who have come before you, bring you some peace and a sense of humility. The moral decisions you make are not the end all be all-- they are part of a complex tapestry of human decisions, of human lives. Your decisions matter not because they are final and ultimate, but because they can contribute to the shrinking or widening of our circles of compassion, healing, and justice.

So then, how do you know what you are doing is right?

What is right has to do with how we understand power.

Are there times when you wish you could have the power of God in Hagar's story?

Like when a pregnant woman continues to abuse methamphetamines?

Like when a wealthy woman with no children terminates a down-syndrome's pregnancy because she does not want to live with the challenges a disabled child.

Like when a pregnant woman choosing an abortion because, you suspect, she does not want to have a female-child?

Or how about when you disagree with the lead-clinician's approach in a case?

Imagine. You could say the command and snap your fingers and all that you see as wrong would change.

In the realms of liberal religion and philosophy, it has often been observed that our images of God (the God you believe in or the God you don't) quite often correlate to the society's ideal of a powerful human being, to the society's dominant beliefs about what power looks and feels like in that political period-- a displeased father, a warrior, a feudal lord, a loving father, the Invisible Hand of the Market.

A doctor who provided second trimester abortions once asked me if I knew what an M.D. actually stood for. He said "medical deity." I think there is a truth in this Medical Deity thing-- medical professionals are often required to have the divine-like confidence. In the past, the power of healing, of saving the soul/body was generally ascribed to gods and priests. In the medical field, technology allows us to accomplish what would have been only magic 100 years ago.

For the past century, particularly in the past few decades, that image of God with wizardry skills controlling our lives, well it's fallen out of favor for many. Old Christian notions of an unchanging male God that is all-powerful, all-loving, and all-knowing are one among many images. One of the more popular alternative images is that of no God of all. Now what does that say about how we understand power? That there is none?

Or, if some kind of divinity could exist, maybe the kind of power 'it' has was and never could be so controlling, so directive, so ultimate.

Maybe effective, ethical power is more persuasion than coercion, more about confident humility than arrogant certainty.

It's more about compassionate relations than dominating rule, more about resisting the wrong than conquering it.

God and Hagar? Well, Hagar could have continued on in the desert and faced likely death? Perhaps God was just giving her a heads-up that if she wanted to live, unfortunately there was only one way to do it. Living meant going back to harsh, if not abusive, circumstances. It meant spending time being in between that rock and a hard place. We have seemed to imagine that if God wanted to, God could have simply given Hagar an abortion, a picnic basket, and a camel.

But God with such ultimate wizardry-like skills may be the imaginative luxury of people with far more political power in their own lives. Because you bet that power and the possibilities of living look pretty different to a poor enslaved pregnant woman than it does to the First Patriarch.<sup>6</sup>

Maybe God never had the power that people over the ages have so wanted God to have.

Maybe you never have the power that you or your patients so desperately want you to have.

Limits and constraints are things we can challenge, and they may also be guides to when we should humble ourselves, and make peace with the fact neither you or God are wizards, nor should you be.

In this complexity, diverse and interconnected world, I do not believe we ever have absolutely certainty that we are doing the right thing. You live on the shifty fault lines of life and death. Much of what you say or do, or don't say, don't do, are moral actions, influencing people's lives in small and profound ways. In your line of work, there is just no 'neutral stance.'

When a parent asks you what you would do in their situation? No neutral stance.

When you sit with a family as they grapple with what a 'reasonable quality of life' actually means for their family? No neutral stance.

We can suspect we are doing **A** right thing when we can openly share our discomforts and questions with the other members of the care-team. Hiding and secrets and silenced voices suggest wrong and harm.

We can suspect we are doing **A** right thing when you understand where you come from and how your experiences and your communities shape your moral priorities.

We can suspect we are doing **A** right thing when we try to enter the patient's world and understand where they are coming from. When we accept there are some things we can never understand.

---

<sup>6</sup> Ideas regarding new understandings of divine power, see: Monica A. Coleman. *Making a Way Out of No Way.: A Womanist Theology*. (Minneapolis: Fortress Press) 2008; Delores S. Williams. *Sisters in the Wilderness: The Challenge of Womanist God-Talk*. (Maryknoll, NY: Orbis Books) 1993.

We are limited human beings, exercising our moral power in big ways and small, but always exercising it.

We will face differences and conflicts will arise. These are not signs of wrongness. Our task is not to make differences or conflict disappear. Our task is to make sure those difference and conflicts work for, rather than against, life.

When we leave behind overly individualistic, heroic images of power, making peace with the inherent interconnected, vulnerable, and precarious nature of living, then perhaps, we can proudly claim the power we do and should use.

Beyond abstract, political and religious arguments about what life is and when it begins, there are all of you--the ones shaping, advising, defining and deciding life in all of its ambiguous fleshiness.

Our world needs more of you, people who can immerse themselves in the messy moral realities and confusions of life. We need more brave people who will live in the murky moral grey zone, people who, instead of perfection, strive for humaneness, care, humility, and compassion.

Thank you for doing what you do.

May be I so bold as to offer you blessings in this spiritual work, in claiming your moral powers with humility and confidence.

May you have courage, love, and endurance as you navigate the storms that make life possible.