

From Rev'd Wendy Robertson and the team at NCH:

In my role at NCH I am present where medicine meets mystery. At the bedside, I witness not only physical decline, but the deep spiritual and existential work that often unfolds as a person approaches death. Dying is not only a medical event; it is a profoundly spiritual process that touches identity, meaning, relationship, fear, hope, and surrender.

In my experience, many discussions and requests for Voluntary Assisted Dying (VAD) are driven less by unmanaged physical pain and more by existential and spiritual distress. People speak of loss of dignity, fear of being a burden, loss of control, loss of meaning, and loss of identity. These are not merely clinical concerns, they are soul-level questions, expressing a longing for belonging, reassurance, love, and companionship in the face of mortality.

In my 25 years working in hospitals as either a nurse or Chaplain I have come to understand that the dying process itself often invites important inner work: the unravelling of long-held roles, the finishing of unfinished business, reconciliation, gratitude, forgiveness, and the gradual letting go of identity. Many people experience shifts in consciousness, vivid dreams, or a deep sense of presence as death approaches. When these experiences are gently supported, fear can soften and a sense of peace can emerge.

The request for VAD can reflect a desire for control at a time when life feels profoundly out of control. While understandable, this can unintentionally bypass the spiritual work of dying; the vulnerable process of dependence, grief, and surrender to God (or as the secular world might say - mystery). Our culture, uncomfortable with these realities, often lacks shared language and rituals for dying well.

Pastoral care exists to hold this space. I am not primarily there to fix or rush the process, but to accompany: to listen deeply, to honour stories, to name fears, and to offer compassionate presence. Time and again, I see how belonging, love, and being truly heard can ease terror and restore a sense of dignity and meaning.

For this reason, I believe that any expression of a desire to hasten death should prompt strong spiritual care support. Not to argue or impose beliefs, but to create a sanctuary where people can explore their fears, reconnect with what matters most, and be accompanied with compassion. I suspect that many people, when held in this way, might find that their desire for VAD changes as they experience being supported, not only medically, but spiritually and relationally. And I've checked with the VAD team - there are no spiritual carers/pastoral carers/chaplains within it.

To sit with the dying is to stand on holy ground. Time after time I witness sorrow and grace side by side. I know that Christ is present in the room: the one who shared our humanity, knew suffering, and walked the road of death before us. I think of my role as holy companionship, understanding that what people need most at the end of life is not simply control over death, but presence, meaning, love and the courage to be met fully as they are in their weakness and belovedness.