lighthouse church

What Does God Think About Voluntary Assisted Dying - VAD (Euthanasia)?

Sermon Handout · Sunday 19 July 2026 · Connan O'Shea

Job 38:1–18 · John 5:16–27

Setting the Scene

Imagine your mother, or your grandfather, becomes very sick. The doctors say there's no cure — perhaps only six months to live. Family members start talking about VAD: Voluntary Assisted Dying, or euthanasia. The word "euthanasia" literally means "a good death." Your sick relative isn't sure what to do. They're scared of future pain. They may feel they're becoming a burden. But they may also be afraid of death itself.

This is deeply distressing territory. If you've watched someone you love go through a chronic, painful illness, or walked with someone who is dying, you know how emotional this subject can be. Some of us are in the middle of this right now, and parts of what follows may be hard to hear. For others, it's wise to think clearly about these things before the suffering comes — to think well ahead of time.

If you already believe VAD is the compassionate choice, it can be hard to understand why anyone would be against it. So we're going to look at three things: why some people believe VAD is good, what God says about it, and what other voices — including doctors — say about it.

What Euthanasia Is (and Isn't)

Voluntary Assisted Dying is when a doctor ends a person's life by lethal injection, at that person's voluntary and competent request. The person must have a terminal illness expected to cause death within six months (or twelve months for a neurodegenerative disease).

Euthanasia is not the same as stopping a treatment that isn't working and allowing an illness to take its natural course — for example, stopping cancer treatment with little benefit, or switching off life support for someone who is brain dead. Nor is it the same as giving strong pain relief such as morphine to a patient in great distress: pain relief's purpose is to ease suffering, not end life — and it can even improve comfort and survival.

This has become a much bigger issue to think through, because VAD became legal in NSW on 28 November 2023. For more than 2,000 years, euthanasia was a prohibited medical practice. Why the change now? We need to hear from God on this, so we're ready — whether it touches our own life or the life of someone we love.

1. Why Some People Think VAD Is Good

It's genuinely hard to watch someone in pain — and that's part of the argument: when pain gets so bad that it outweighs the pleasure of life, doesn't medicine have a moral obligation to provide a good, painless death? Underneath that argument sit some significant assumptions:

- The good we're chasing is the avoidance of pain.
- This life is all there is — when we die, that's it.
- God doesn't exist, so we're free to decide for ourselves whether to live or die.
- A person's value is found in what they can do or achieve — once they can't, they're worth less.

So the reasoning runs: avoiding pain is the highest good, this life is all there is, and God doesn't exist — so we're free to do as we please. That's the thinking behind the push for euthanasia. However, God says euthanasia is not good.

2. God Says That VAD Is Not Good

God is the source of life

The first thing to say is that God exists. If you're new to church and still working out what you think about God and eternity — we're really glad you're here, and we'd love to keep talking with you. God existed before anything else did, and has life in himself.

> *"For as the Father has life in himself, so he has granted the Son also to have life in himself."* **— John 5:26**

Life is God-given, not ours to take

God doesn't depend on anything else for his life — he always has been, and always will be — and he is the one who creates life. Colossians 1:16–17 says he created all things, and that in him all things hold together. He gave life to Adam and Eve, and he is the one who takes life away.

> *"See now that I myself am he! There is no god besides me. I put to death and I bring to life, I have wounded and I will heal, and no one can deliver out of my hand."* **— Deuteronomy 32:39**
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> *"Naked I came from my mother's womb, and naked I will depart. The LORD gave and the LORD has taken away; may the name of the LORD be praised."* **— Job 1:21**

We are not independent beings. We make real choices and carry real responsibility, but we don't have total control over our lives — we can't fly unaided, breathe underwater, or live forever. We can work with the cause-and-effect God has built into the world, but there are no guarantees. We are not in control of our life, or our death. God gives, and God takes away.

We live within the created order God has set up, and he defines what is good — the question isn't simply "how do we avoid pain?" but "how do we obey him?" It isn't our universe, and it isn't our life. That changes everything. To take someone's life is to take something God has given — that's why murder is wrong (Exodus 20:13; Matthew 5). To end a life is rebellion against God, and it removes a person's opportunity to know him and enjoy his blessing.

Life is not about achieving or doing

Some who support VAD argue that once someone can no longer achieve things, they become less worthy. But God says our worth isn't based on what we can do. Life is a gift from God, seen most clearly in people living with disability — whether from birth or acquired later in life. A child or an adult with additional needs is not less valuable in God's eyes. Our worth doesn't come from our achievements — when someone is older and can't contribute as much as they once did, they are not less valuable.

This is something our culture especially needs to hear, given how highly we prize youth. We don't honour older people the way we should, and we need to repent of that.

> *"The glory of young men is their strength, and the honour of old men is their grey hair."* — **Proverbs 20:29**
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> *"In the same way, you who are younger, submit yourselves to your elders. All of you, clothe yourselves with humility toward one another, because, 'God opposes the proud but shows favour to the humble.'"* — **1 Peter 5:5**

God says every person is valuable, worthy of love and respect, no matter what they can or can't do. He doesn't want older people, those with additional needs, or people who are sick to feel like a burden — because they aren't. Every one of us is made in his image, and Jesus was willing to die for all of us.

Life is not about avoiding pain

God also says that life isn't primarily about avoiding pain and maximising pleasure. Life is about relationships — with God and with each other — in both the easy times and the hard ones. Even in pain, we can give and receive love. Pain is horrible, and a result of the fall into sin, but it is not wasted. Some of the deepest experiences of being loved come in seasons of pain — when others sit with you, listen, and encourage you. Pain and suffering can even strengthen a Christian's faith (2 Corinthians 1:9; Romans 5; James 1:3–4; Hebrews 12:10–11) — teaching us to rely on God, building perseverance and character, and producing "a harvest of righteousness."

Christians often say their deepest pain brought the richest fellowship with Christ — a fuller sense of what Jesus suffered for us, and a deeper experience of his love. Denise Williams was part of our church family. She had cancer and was dying, during COVID — a genuinely hard season. She would tell me about the conversations she kept having with people about Jesus, in part because the medical staff around her saw how she trusted him and held onto a sure hope. Pain is not wasted, even though it's genuinely horrible.

This life is not the end

If this life is all there is, and we're in a lot of pain, death can look like an escape. But God exists, and he says clearly that after this life, every one of us will be judged for how we've responded to him.

> *"He will punish those who do not know God and do not obey the gospel of our Lord Jesus. They will be punished with everlasting destruction and shut out from the presence of the Lord and from the glory of his might."* — **2 Thessalonians 1:8–9**

Hell is real, and that's a massive factor to weigh when considering VAD. If you leave this life expecting to escape pain, but you don't know and love Jesus, you will step into an eternity of pain — under the judgment of God. The most important thing for anyone considering these questions is to get right with God. Nothing matters more than that.

3. Other Voices Say VAD Is Not Good

Medicine is a gift God has given us to help restore health. But medicine isn't meant to control or determine when life ends — it has more of a caretaker role, helping us look after a broken world until Christ returns. It's worth hearing from medical professionals here, particularly on palliative care: specialised care for people who are dying, aimed at helping them live well until they die.

Two doctors — Haydn Walters (emeritus professor of medicine, University of Tasmania, and former president of AMA Tasmania) and Marion Harris (a Melbourne oncologist and associate professor) — offer valuable insight into how the push for euthanasia has unfolded, and why it concerns them.

Misunderstanding the dying process

Those pushing hardest for VAD often tell very emotional stories about a terminally ill person's suffering — but these extreme cases are rare, and rare situations are being used to drive changes in the law. Part of the fear around dying comes from misunderstanding what actually happens: people often pant as they die, but that isn't pain — it's a brainstem reflex. Gurgling sounds aren't choking, but a result of reduced consciousness. With good palliative care, almost everyone can be well cared for.

Sick people are often depressed

People who are very unwell are often also depressed, or even suicidal — not a stable place from which to make a decision. When people who chose euthanasia are counted, they're often reported as having “all wanted” it — but many were depressed, and treating the depression removes the desire for VAD. Depression can come on gradually and be hard to detect, and around 60% of people with depression report suicidal thoughts.

My own dad developed Alzheimer's, and over about six months our family went through an exhausting, guilt-inducing process of moving him into a locked dementia care facility. Mum had been trying to care for him at home; he escaped the house late one night and caught a train, ending up miles away. Mum couldn't sleep, and became suicidal — she said to me, “I'd like to take a pill and never wake up.” She had never experienced depression before in her life.

Once Dad was settled into care, and Mum was in respite, on antidepressants, and getting rest, her suicidal feelings lifted. She didn't need VAD — she needed medication, rest, and encouragement. Later, after a brain tumour diagnosis and a broken arm, she became suicidal again — but a week or two later, once her pain had eased, she was joyful again. One study of cancer patients in Victoria found that only 13% actually wanted VAD once depression was properly accounted for.

Political pressure

There's also significant political pressure at play. Well-resourced “right to die” lobby groups push politicians to support VAD, framing opposition as old-fashioned, and VAD as compassionate and a basic right.

The vulnerable will be mistreated

Advocates argue people don't have to choose VAD if they don't want to — but a royal commission found that elderly and disabled people are often powerless and voiceless, and can be made to feel like a burden, or pressured toward VAD. In Canada, where VAD is legal, 40% of people cite “being a burden” as a reason for choosing it, and 13% cite loneliness and isolation.

VAD crosses a line

Supporters argue that safeguards prevent mistreatment — but in Western Australia, only two GPs need to sign off, with no requirement to consult a psychiatrist or palliative care specialist. Doctors who carry out VAD have often never met the patient before, making it hard to detect depression or coercion, and their assessments aren't reviewed afterward.

A six-month prognosis is notoriously unreliable — Stephen Hawking lived roughly 50 years beyond when he might first have been considered eligible. Once approved, VAD can proceed within days, and the drugs can be taken home and used months or years later, by which point it's impossible to assess whether a person has been pressured.

And once a law like this passes, it tends to expand. Overseas, VAD laws typically start with the terminally ill, and the eligible group grows over time. In Canada, within four years of legalising VAD, the law was expanded to those with “years to live,” and again to include people with mental health conditions. In the Netherlands and Belgium, children can now be euthanised, and adolescents aged 12–18 with parental consent. In Victoria, those in favour of euthanasia are now pushing to have existing safeguards relaxed.

VAD is not good.

Responding Faithfully

1. Honour and obey the good God. Let him tell us how the universe he made works, and what is good — let his word shape our thinking on VAD, rather than only emotional stories.
2. Care for vulnerable people. If we or someone we love faces a painful terminal illness, seek out good palliative care.
3. Recognise that changing legislation changes culture. Our priority as a church isn't politics — it's people knowing Jesus and finding a full life in him. But love for our neighbour means we can still speak into what laws are good for our society.
4. Pray — for family, for friends, and for an opportunity for the gospel to shape this conversation.
5. Be ready to speak clearly and lovingly with family and friends about VAD when it comes up.

This is a summary of the sermon to be found at www.lighthouse.net.au given on 19 July 2026 with the heading **‘What Does God Think About Voluntary Assisted Dying -VAD (Euthanasia)?’**

If this has stirred up grief, fear, or difficult memories — including thoughts of suicide — please don't carry that alone. Talk to one of the leaders at Lighthouse, your GP, or call Lifeline any time on 13 11 14.

Appendix: A Doctor's Perspective on Dying Well

Palliative care specialists note that adequate symptom control — such as careful sedation in a patient's final days, or the use of morphine — is often confused with euthanasia, but isn't: its purpose is to relieve distress, not to end life.

Doctors working in this field have observed that our society has lost confidence in how to die well. Facing our own mortality raises real questions of meaning, and our youth-focused, death-avoidant culture leaves people unprepared and afraid, since so few of us ever witness a natural death anymore. Yet those working closely with dying patients often see the opposite of what the public imagines: a terminal diagnosis can become a season of real growth, where families resolve old conflicts and find reconciliation, and where a natural death — surrounded by family — is usually peaceful.

Doctors who have studied this closely point to a genuine tension: between an individual's autonomy to choose the timing of their own death, and the wider community's responsibility to protect vulnerable people from being pressured toward death against their will. Having weighed the evidence from official inquiries in the UK, the US, and Australia, some conclude that no safeguard can reliably prevent abuse — and that a society must be willing to say “no” to the few who want euthanasia, in order to protect the far larger number of vulnerable people who wish to keep living. Legalising euthanasia changes one of the most basic agreements within a society: that we do not kill one another, even out of professed mercy or compassion. A society, ultimately, is measured by how it treats its most helpless members.