

Clergy Reference Guide

May our faith fill us with the compassion to Donate Life.

Lifeline
of **Ohio**





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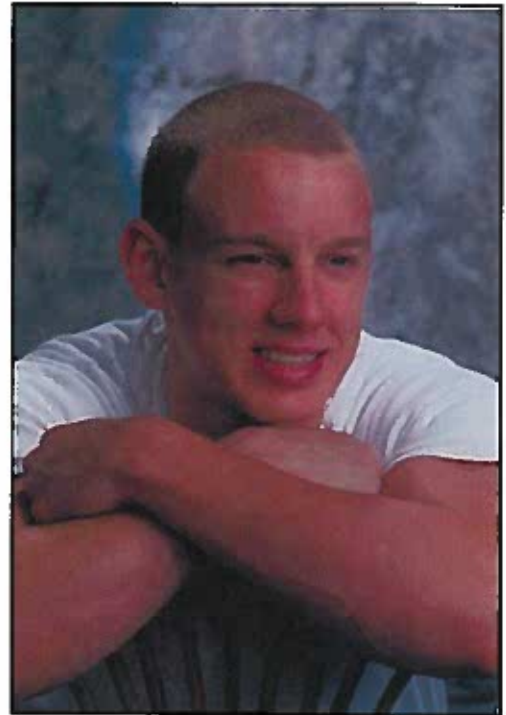
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Bob and Jeri Price with their son's liver recipient, Joseph and his son, named after his donor, Paul Geoffrey (right).



On April 7, 2003, just a few days after getting married, Joseph was in a car accident in Columbus. He was sitting at a red light when a huge truck ran through the traffic light and crashed into five different cars, including his.

He was sent home from the emergency room with pain pills and he thought he would be okay. Even after physical therapy and treatment for his injuries, he still felt weak and by October he was admitted to the hospital where learned he was in acute liver failure.

Joseph had Hepatitis B since childhood, but never required major treatment. Unfortunately, the medicine he was taking to manage his pain from the car accident sped up the deterioration of his liver. He was sicker than he had ever had been in his life. In early February, doctors told his wife, Korlu, that he had less than a week to live if he didn't receive a transplant.

On February 23, 2004 Joseph received his second chance at life. When he later communicated with and met his donor family, the Price family, he learned that his donor, Paul, was just 21 years old when he died. Immensely grateful for his "Gift of Life," Joseph and his wife decided to name their son Paul Geoffrey, in honor of their hero, Joseph's donor. It's a small way he can show appreciation and a way he and Korlu can always remember Paul Geoffrey Price.

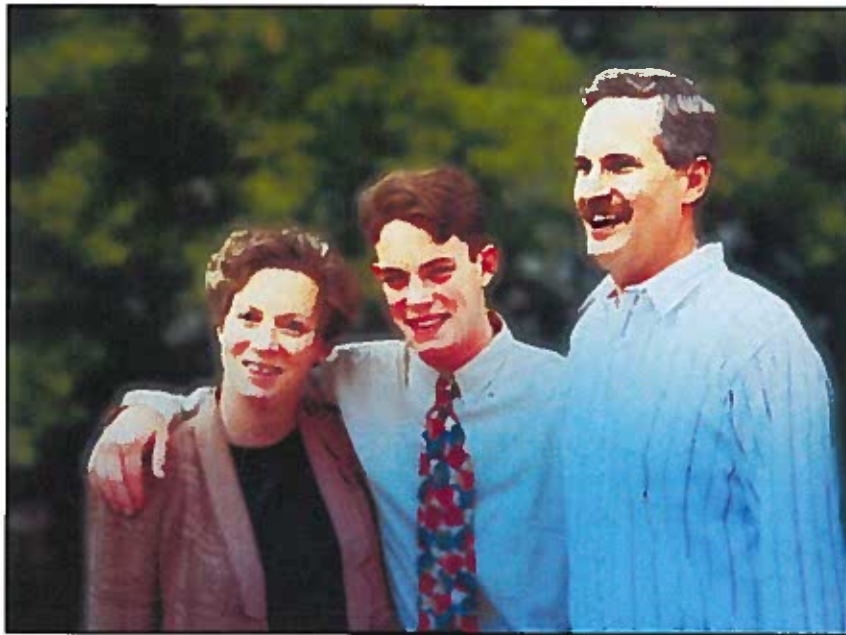


Photo courtesy of the Newark Advocate

In September 2008, Miriam Schreck was one of the more than 100,000 people waiting for a second chance at life. Miriam had lived with Autoimmune Hepatitis for more than 10 years, but in 2008, she was told she needed to have a liver transplant to continue to live.

As a pastor at Holy Trinity Lutheran Church, her parishioners touched and inspired her with their unwavering support and prayers while she waited on a transplant. She was also touched by the medical professionals that spoke with her about God.

On October 7, 2011, Miriam received the call that would change her life. Thanks to the generosity of her donor and the skill of her surgeon, she was given new life. She now feels like a walking miracle.



Donor parents, Bege and Denny, with their son, Luke.

Luke Wiegman never knew a stranger. The eldest of three boys, Luke was a scholar, an athlete and always had a smile on his face. "He was dearly loved," said Bege Wiegman, his mother.

The Wiegman family often discussed organ and tissue donation, as Bege was a Chaplain at a local hospital and worked with families contemplating donation. When Luke got his driver license he showed his mother he was a registered donor and was very proud of his decision.

That day made it easier for the Wiegmans to donate Luke's organs and tissues after he died as a result of a motorcycle accident in 1994. Luke's heart, liver, pancreas and kidney saved the lives of people in need.

"We think about the things Luke isn't here for," said Bege. "He's missing neat things and that's really hard." Yet Bege says donation brings some sense to Luke's death. "It's a glimmer of the light he used to bring to our lives."



Lifeline of Ohio Mission Statement:

Lifeline of Ohio's mission is to empower our community to save and heal lives through organ, eye and tissue donation.

Lifeline of Ohio Vision Statement:

Our vision is a community where every individual embraces organ, eye and tissue donation.

Lifeline of Ohio Services:

As an independent, non-profit organization, Lifeline of Ohio (LOOP), promotes and coordinates the donation of human organs, eyes and tissue for transplantation.

Lifeline of Ohio, a Donate Life Organization, has been approved by the Centers for Medicare and Medicaid Services (CMS) as the designated organ procurement organization (OPO) serving 37 Ohio counties along with Wood and Hancock counties in West Virginia. Accredited by both the Association of Organ Procurement Organizations (AOPO) and the American Association of Tissue Banks (AATB), Lifeline of Ohio provides services to more than 70 hospitals and the communities they serve through its procurement and tissue coordinators, and other professional staff.

Lifeline of Ohio Provides:

1. **Notification:** Hospitals are required by the Centers for Medicare and Medicaid Services (CMS) to notify Lifeline of Ohio, or their local organ procurement organization, when a death occurs. This allows organ procurement organization referral center staff to screen for potential donors.
2. **Evaluation:** Lifeline of Ohio's referral center, donor family services and procurement coordinator staff will evaluate each potential donor for medical suitability. This screening occurs during the initial referral call with the hospital staff and during a medical social history discussion with the family of the potential donor.
3. **Authorization:** Lifeline of Ohio obtains authorization as prescribed by Ohio Law and all industry standards. In the event that the patient is a candidate for organ, eye or tissue donation, Lifeline of Ohio checks the Donor Registry and if the individual is listed they work with the family so that they may support their loved one's decision to be a donor. If the individual is not on the Registry or is a minor Lifeline of Ohio approaches the family for authorization and to facilitate the donation.
4. **Management:** Once brain death has been declared and documented, the procurement coordinator is responsible for the medical management of the donor and writing orders to optimize the viability of each organ, under the direction of the donor surgeon.
5. **Surgical Recovery:** The procurement coordinator arranges for the appropriate incoming surgical teams to recover the donated organs and tissues. Cosmetic reconstruction of the donor is completed following surgery.
6. **Preservation:** Trained perfusionists are provided to ensure that all organs, eyes and tissues are preserved and stored properly until transplantation.
7. **Financial Aspects:** Once death has been declared and authorization is secured, all costs associated with organ, eye and tissue donation will be assumed by Lifeline of Ohio.

8. **Quality Assurance:** All required immunological tests recommended by the United Network for Organ Sharing (UNOS) and the American Association of Tissue Banks (AATB) are performed. A thorough medical history, blood cultures and tissue cultures are obtained on all organ, eye and tissue donors. In addition, an autopsy may be necessary if the circumstances surrounding the death warrant further explanation.
9. **Professional Education:** Educational programs are available to medical, administrative, nursing, pastoral-care, social-worker, and other hospital staff to increase awareness and knowledge about organ, eye and tissue donation. Lifeline of Ohio is an approved provider of nursing continuing education CEU's through the Ohio Nurses Association. Lifeline of Ohio also sponsors specialized educational offerings, such as Designated Requestor training (in collaboration with other recovery agencies in Central Ohio).
10. **Community Education:** Lifeline of Ohio is dedicated to increasing the community's awareness of the drastic need for organ, eye and tissue donation. By working in partnership with schools, businesses, religious leaders, BMV staff and other individuals committed to the cause, they can educate the community about the Gift of Life. Lifeline of Ohio staff and volunteers provide free speakers, displays, and information for community programs, events, and health fairs.
11. **Community Relations:** Throughout the year, Lifeline of Ohio sponsors a combination of special events, broadcast and print interviews, and media campaigns in an effort to promote public awareness about organ, eye and tissue donation.



The Need for Organ, Eye and Tissue Donation

Last year, more than 34,000 Americans received a life-saving organ transplant and more than 1.75 million Americans received a life-changing tissue transplant.

When just one individual makes the decision to donate, they can change the lives of more than 50 others. And while more than 90 percent of American adults approve of donation as a viable, life-giving practice, only approximately 59 percent of Ohioans and 34 percent of West Virginians are registered donors.

By encouraging your members to learn the facts about organ, eye and tissue donation and to register their donation decision you are helping to make an impact on this growing health crisis.

- The national waiting list for organ transplants is rising at an alarming rate, with nearly 115,000 individuals currently on the list.
- In Ohio, nearly 3,000 people are waiting for an organ transplant at any time, and hundreds more await tissue transplants.
- In West Virginia, more than 500 individuals are waiting for an organ transplant and hundreds more await tissue transplants.
- Approximately 20 times each day a man, woman or child dies for lack of an available organ.
- Once every 48 hours, an Ohioan dies waiting. In the last 10 years more than 2,000 Ohioans have died waiting for a transplant. In West Virginia more than 460 individuals have died waiting.
- More than 34,000 organ transplants were performed in the United States last year
- Each year more than 1.75 million Americans receive a donated tissue transplant.
- **A single donor can save the lives of eight people and enhance the lives of up to 50 more by donating vital organs (heart, two lungs, two kidneys, liver, pancreas and small intestine) and tissue (corneas, bone, fascia, skin, veins, nerves, tendons, ligaments and heart valves).**

Disclaimer: These numbers change daily. Please contact Lifeline of Ohio for the most current statistics prior to using them in a sermon or written piece.



The Truth About Organ, Eye and Tissue Donation

Fact:

If you are sick or injured and taken to the hospital, their number one priority is to save your life. Doctors and nurses do NOT have access to Donor Registries and organ, eye and tissue donation is only considered after an individual has died.

Fact:

Anyone of any age can register to be a donor. You are never too old to be considered for donation.

Fact:

There is no cost for organ, eye and tissue donation.

Fact:

All major religions in the United States support organ, eye and tissue donation. We encourage individuals to speak with their religious leader to learn more about their religion's support of organ, eye and tissue donation.

Fact:

People who have been sick lately or in the past can register as a donor. Medical professionals determine at the time of death what can be donated. Even people who have had cancer in the past or have a current disease, such as diabetes, can still be considered.

Fact:

When you are on the transplant waiting list, what really counts is the severity of your illness, time spent waiting, blood type and other medical information.

Fact:

If an open casket funeral was possible before the donation, it will be possible after donation.



Answers to Frequently Asked Questions

How do I sign up to be an organ, eye and tissue donor in Ohio?

There are several ways to register your decision in the Ohio Donor Registry:

- When receiving or renewing your driver license or state I.D. card at the BMV;
- By going on-line at www.lifelineofohio.org and following the link to the BMV's confidential on-line registration;
- Or by completing a mail-in Donor Registry Enrollment Form

Once you have registered your decision, it is important to discuss your wishes about organ, eye and tissue donation with your family so that they are aware of the choice you have made.

How do I sign up to be an organ, eye and tissue donor in West Virginia?

There are several ways to register your decision in the West Virginia Donor Registry:

- When receiving or renewing your driver license or state I.D. card at the DMV;
- By going on-line at www.donatelifewv.org and registering your decision

Once you have registered your decision, it is important to discuss your wishes about organ, eye and tissue donation with your family so that they are aware of the choice you have made.

Is it necessary to enter my decision in the Donor Registry?

Yes. The Ohio and West Virginia Donor Registries ensure that a person's desire to be a donor is honored after death. Organ, tissue and eye recovery agencies are directed by law to inform the next-of-kin of the decision to donate and to work with the donor's family to honor their wishes, thus eliminating the need for a family to make a major decision about donation during their time of grief and when they may not know or be able to recall clearly what their loved one had wanted.

What if you change your mind about donating?

If at any point you change your mind, you can remove yourself from the Registry using the same steps available for adding yourself to the Registry.

Can you still choose to donate if you are younger than 18 years of age?

Yes, you may register your decision in the Donor Registry, so long as you have a driver license, state I.D. card or driver permit. Although parental consent is not needed for individuals 15½-18, the designation may be revoked or amended by a parent or guardian if the minor dies before they turn 18.

What if members of your family are opposed to donation?

If you are 18 or older, you may register your decision in the Registry as an advanced directive, but you should still inform your family of your decision. Organ, tissue and eye recovery agencies will inform them of your decision to be a donor and will involve them in the donation process, but will not ask them to make a decision concerning donation.

Is it possible to deny organ donation and not allow my family to revoke the decision?

For an individual to ensure that they are not considered a possible donor at the time of their death they should put their decision in writing and make sure the individual(s) responsible for medical decisions and care for the body after death are aware of the location of the document.

What is the maximum age for organ donation?

Organs, eyes and tissues may be donated by a senior citizen or someone as young as a newborn baby.

I've been sick lately or in the past. Can I be a donor?

Yes. At the time of death, trained recovery coordinators will review your medical history to determine what organs, eyes and tissue can be donated. Recent advances in transplantation have allowed more people to become eligible donors. We encourage every person who supports donation to join their states Registry regardless of their medical history.

Can smokers be donors?

Yes, organ function, including lungs, is assessed at the time of death and if the organs are healthy, they can be used.

Does the family have to pay for the cost of organ, eye and/or tissue donation?

No. There is no cost to a donor's family for donation. Hospital expenses incurred prior to donation, as well as funeral expenses, remain the responsibility of the donor's family. All costs related to donation are paid by the organ, eye and/or tissue recovery agency.

Can rich or famous people "jump" the waiting list to get a transplant faster than others on the list?

No. It's a federal crime to buy or sell organs, eyes and tissue in the United States. Factors such as income or celebrity status are never considered in the placement of organs. The determination of who gets an organ is based on many factors including blood type, severity of illness, length of time on the waiting list and geographic location. There is no way to buy a place on the United Network for Organ Sharing waiting list.

Does organ donation leave the body disfigured?

Donated organs and tissues are removed surgically in a routine and respectful operation. If an open casket funeral was possible before donation it will be possible after donation.

Is organ donation against my religion?

Every major religion in the U.S. supports organ donation as a life-saving charitable act. Many consider donation the ultimate act of charity. If you have questions, consult your church, synagogue or religious organization.

Is it permissible to sell human organs?

No. The National Organ Transplant Act (Public Law 98-507) prohibits the sale of human organs. Violators are subject to fines and imprisonment. Among the many reasons for this rule is the concern of Congress that buying and selling organs might lead to inequitable access to donor organs with the wealthy having an unfair advantage over others.

Would presumed consent or financial reimbursement to donor families decrease the shortage of organs for transplant?

There are valid concerns regarding presumed consent, including the possibility of alienating the community as a whole and negatively impacting donation. Financial reimbursement for donation has been proposed in some areas of the country, but federal law has prevented its implementation. Lifeline of Ohio believes that educating the public about donation is the most important step we can take toward increasing donation.

Do popular television shows correctly portray organ donation and transplantation as it really happens?

No. Organ donation offers compelling stories of life and death and thus is often used in fictional programs. Unfortunately, in an effort to tell dramatic stories, the actual donation and transplantation process is often misrepresented. In some cases these stories perpetuate some of the myths surrounding donation. It is up to the medical community to dispel these myths and to provide the facts concerning organ, eye and tissue donation.

Why should you consider becoming an organ and tissue donor?

Advances in medical science have made transplant surgery extremely successful. Transplantation is no longer considered experimental, but rather a desirable treatment option. The major problem is the shortage of organs for the growing number of Americans needing them. There are thousands of Americans waiting for organs to become available so that they can have a second chance at life. Sadly, there are not enough organ donors to meet the growing need, resulting in the deaths of 20 men, women, or children each day. By signing up to be an organ, eye and tissue donor, individuals can help maximize each opportunity that becomes available for organ and tissue donation, therefore, providing those who are waiting for a transplant with the Gift of Life.

Why wouldn't someone donate?

The best way to answer this question is to attribute some of the reluctance to prevailing misconceptions about donation. Many people also may not know how to register and should be directed to their states Registry. Additionally, it must be stressed that for some people, approximately 10 percent of the population, donation just isn't right for them and that decision has to be honored.



Answers to Eye and Tissue Donation Frequently Asked Questions

The eye donation information has been compiled from the web sites: www.cornea.org and www.restoresight.org.

What is a bone or tissue allograft?

The bones or tissues that are transplanted from the body of one person to another person are called allografts. Tissue allografts can include: bones, heart valves, blood vessels, skin, nerves, ligaments and tendons.

What laws and regulations govern the recovery, processing and distribution of tissues in the United States?

Human tissues intended for transplantation have been regulated by Food and Drug Administration (FDA) since 1993. In May of 2005, three new, comprehensive regulations went into effect that address manufacturing activities associated with human cells, tissues and cellular and tissue-based products (HCT/Ps). The first requires that companies that produce and distribute HCT/Ps register with the FDA. The second provides criteria that must be met for donors to be eligible to donate tissues and is referred to as the "Donor Eligibility" rule. The third rule governs the processing and distribution of the tissues and is often referred to as the "Current Good Tissue Practices" rule. Together they are designed to ensure that sound, high quality practices are followed to reduce the risk of tissue contamination and of communicable disease transmission to recipients. These rules are available at: www.fda.gov/cber/tissue/docs.htm.

Who removes tissues from donors?

Tissues are removed by personnel working for tissue recovery agencies. Under federal law, these agencies must be registered with the Food and Drug Administration and must adhere to applicable FDA regulations that govern tissue recovery. These regulations are found in the Current Good Tissue Practices rule.

Where are tissues sent once they are removed (recovered)?

Tissues are sent to tissue banks for processing and distribution. Tissue banks are establishments that are regulated by the Food and Drug Administration (FDA). By law, any company that wishes to receive, process, or distribute tissues must register with the FDA and must adhere to all FDA regulations governing tissue banking. These establishments are subject to regular inspection by the FDA.

What is done with tissues from eligible donors once they are removed?

After they are removed, tissues are subjected to one or more disinfection processes that are designed to kill or remove any bacteria, fungi or viruses that might be present. Different companies use different methods to accomplish this goal, including rinsing with antimicrobial chemicals, sometimes under pressure, as well as irradiation. In some instances, multiple methods might be used. Various methods have different levels of effectiveness in killing or removing infectious organisms.

Who can be an eye donor?

Anyone can. Cataracts, poor eyesight, or age do not prevent you from being a donor.

Is the whole eye transplanted?

No. Only the cornea can be transplanted. The entire eye may be used for research and education.

How soon after a donation must a cornea be transplanted?

A corneal transplant is usually performed within 3 to 7 days after donation, depending upon the method of corneal preservation used.

How prevalent is corneal transplantation?

Corneal transplants are one of the most frequently performed human transplant procedures. Since 1961, more than 1 million corneal transplants have been performed, restoring sight to men, women, and children ranging in age from nine days to 103 years.

How successful is corneal transplantation?

More than 90% of all corneal transplant operations successfully restore the corneal recipient's vision.

How great is the need for corneas?

Although more than 50,000 corneal transplants were performed in North America last year, the need for corneal tissue is never satisfied. To date, the use of artificial tissue for transplantation has been unsuccessful.



Answers to Frequently Asked Questions About the Donation Process

Will the quality of medical treatments and the efforts to save your life be lessened if emergency or medical personnel know you are willing to be a donor?

No. Donation professionals do not become involved until independent physicians involved in the patient's care have determined that all possible efforts to save the patient's life have failed.

What is brain death, and can you recover from it?

Death occurs in two ways: 1) from cessation of cardio-pulmonary (heart-lung) function [cardiac death] or 2) from the cessation of brain function [brain death].

After cardiac death an individual has the potential to be an eye and tissue donor and on occasion, an organ donor.

Brain death occurs when a person has an irreversible, catastrophic brain injury, which causes all brain activity to permanently stop. You can never recover from brain death. The public often confuses brain death, with brain damage. Brain damage means there are some portions of the brain still functioning and people can continue to live. In the case of brain death, the heart and lungs can continue to function if artificial-support machines are used. However, these functions will also cease when the machines are discontinued. The standards for determining that someone is brain dead are strict. After brain death, an individual has the potential to be an organ, eye and/or a tissue donor.

What can be donated and how many lives can be changed?

Organs that can be donated include: Kidneys, Heart, Liver, Lungs, Pancreas, and Small Intestine. Tissues that can be donated include: Heart Valves, Corneas, Skin, Bone, Ligaments, Tendons, Fascia, Nerves and Veins. One organ donor can save 8 lives. One tissue donor can heal up to 50 or more lives.

How are recipients matched to donor organs?

Persons waiting for transplants are listed at the transplant center where they plan to have surgery, and on a national computerized waiting list of potential transplant patients in the United States. Under contract with the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services, the United Network for Organ Sharing (UNOS) maintains the national waiting list. UNOS operates the Organ Procurement and Transplantation Network and maintains a 24-hour telephone/online service to aid in matching donor organs with patients on the national waiting list and to coordinate the efforts with transplant centers.

When donor organs become available, several factors are taken into consideration in identifying the best-matched recipient(s). These include medical compatibility of the donor and potential recipient(s) on such characteristics as blood type, weight and age. Urgency of need and length of time on the waiting list are also factors in the allocation process. In general, preference is given to recipients from the same geographic area as the donor because timing is a critical element in the organ procurement process.

How do they get organs from the donor to the recipient?

The type of organ and the distance it has to travel determines how the organ is transported.

How long will people have to wait for a transplant?

There is no way to know how long an individual will wait. The wait for a transplant is determined by many factors and varies widely among patients.

Can organ transplant recipients be organ donors?

Yes, organ transplant recipients can be and have been organ, eye and tissue donors. The recipient would be screened at the time of death like any other potential donor, and if they are medically suitable to be an organ, eye and/or tissue donor, they can donate. In fact, in a small number of cases, their transplanted organs have been transplanted again.

Can organs from animals be used in humans?

No, not at this time, currently a lot of research is taking place to try to make this possible. We have, however, for years used valves from pig and bovine hearts for human heart valve replacements. Tissues like heart valves don't present the same problems with rejection as organs.

Can you transplant a brain?

No, we don't have the technology to do that. We couldn't transplant a brain from one body to another without all of the brain cells dying, nor would that brain be able to work with the new body because we cannot successfully attach the brain to the spinal cord.

Can reproductive organs be donated?

While some research has been done on removing and preserving ovaries, this type of donation is still extremely experimental.

Can you donate an organ while you are still alive?

Certain kinds of transplants can be done through the generosity of living donors. Almost 42 percent of all kidney transplants are performed with living donors, who are often related to the person needing the transplant. People can live normal lives with just one healthy kidney. Also, there are new methods of transplanting a part of a living adult's liver to a child or even another adult who needs a liver transplant. Parts of a lung from two living donors can also be transplanted into one person. Living donation is facilitated through transplant centers and local organ procurement organizations are not involved in the living donor process.

Can people specify who they want an organ to go to?

Yes, the process is called directed donation. If a donor's family knows an individual who is listed for a transplant with UNOS and the candidate is compatible with the donor's organs they can direct their loved one's organs to that person.



Recovery of Organs, Eyes and Tissues

The hospital contacts Lifeline of Ohio to provide notification of every death.

Initial screening takes place for possible suitability for organ, eye and/or tissue donation.

Coordinator on call receives necessary information about the patient and determines if the patient is medically acceptable to become a donor.

If the patient is medically acceptable, the coordinator obtains the decedent's wishes from the Donor Registry, if available, and works with the family to carry out the donation. If the decedent's wishes are not available, the coordinator offers the option of donation to the family in accordance with the hospital protocols.

If the patient is not medically acceptable the process ends.

If the decision is made for donation, the individual's history, blood tests, and other medical evaluations are conducted to determine which organs, eyes and tissues meet the medical requirements for donation and to determine the match for the organs.

If the individual's wishes are unknown and the legal next of kin declines the option to donate, they are thanked and the process ends.

Once the recipients of the organs are identified, the coordinator makes arrangements for the surgical recovery of the organs, eyes and/or tissue. This includes coordinating the recovery doctors and Lifeline of Ohio procurement staff, scheduling the operating room, and arranging for transportation of the organs if needed.

If organs are donated, they are recovered first. Eyes and tissue being donated will be recovered next. Lifeline of Ohio's procurement technicians do the recovery and reconstruction of the tissues.

Once the recovery is complete, the body is prepared to be sent to the funeral home.



Currently more than 138 million people are now registered as organ, eye and tissue donors in the United States! Though we are grateful to every person who is registered, the organ transplant waiting list continues to grow and hundreds of thousands more are in need of tissue and cornea transplants to restore their mobility and sight. As you know, the faith community has an opportunity to make a significant and lasting difference in the lives of many. Each additional person that registers provides hope to these individuals still waiting—hope that soon they will be back to their lives and loved ones. Faith leaders like you can help spread this message of hope by encouraging your congregation to consider giving the gift of organ, eye and tissue donation. Each person inspired to take action by registering to become a donor, has the potential of saving or improving the lives of more than 50 people.

You may ask yourself why learning more about donation is important to you and your congregation. Many people don't think about or discuss donation until it personally impacts their lives. When they are faced with a crisis, such as losing a loved one, they often reach out to their faith leader for support and spiritual guidance, often because they aren't sure about their religion's specific viewpoint on donation. By encouraging your members to learn the facts about organ, eye and tissue donation and to register their decision before their family is faced with the death of a loved one, you can affirm your religion's support for donation. As a member of a support team working with a family after the death of a loved one, you can also provide accurate information on donation to help them make an informed decision concerning donation, if that is necessary. Finally, you have the opportunity to help make an impact on a growing health crisis, the need for more organ, eye and tissue donors that is rapidly affecting more individuals each and every day.

Lifeline of Ohio can provide you with **free resources**, such as bulletin inserts, posters, brochures and promotional materials. For your convenience, we have included a variety of resources on donation, including sample sermons, sample hymns, religious views, scripture references, donation FAQ's, statistics and much more to help guide you and your congregation on making the decision to register as an organ, eye and tissue donor. Additionally, Lifeline of Ohio can provide a speaker, **free of charge**, for your worship service, men's or women's group, Sunday school class or religious group gathering.

We encourage you to set aside a time for you to discuss organ, eye and tissue donation with your congregation. Materials, display boards and speakers are available year-round and can be requested at any time. If you would like to share information on donation with your congregation please contact us at 800-525-5667 or visit our website, www.lifelineofohio.org/donationsaves to request materials. To help you begin planning we have included a list of ways your religious organization can begin the donation discussion:

- **Bulletin Insert:** Include Lifeline of Ohio bulletin inserts in your church bulletin or include a supportive statement about donation in your printed bulletin.*
- **Display Materials:** Display a Donor Memorial Quilt or Education Display Board, show a message on your projection screen or include a donation message on your house of worship's outdoor message board. You could also display donation awareness posters on your bulletin boards.*

- **Prayer:** Include a prayer for all of the individuals currently awaiting a transplant and all of the donors who have so generously shared the Gift of Life with others. You could also devote a sermon or scripture reading to this current health issue and share your religion's views concerning organ, eye and tissue donation with your members.*
- **Testimony:** Allow a testimonial from someone whose life has been touched by organ, eye and tissue donation, either from your congregation or a Lifeline of Ohio volunteer or staff member. Include the topic of organ, eye and tissue donation in adult or youth education classes, Sunday School classes or at your next blood drive or health fair.*
- **Write An Article:** Write a letter to the editor of your local paper about your support for donation. Include an article in your newsletter about donation.*
- **Distribute Materials:** Make informational brochures available and/or distribute awareness lapel pins or other promotional items to congregation members.*
- **Organize an activity:** Ring the bell at your house of worship 20 times in honor of those who die each day in the U.S. for lack of an available organ. Organize a prayer breakfast or lunch to educate congregants about donation.

****Lifeline of Ohio has these resources available and will provide them free of charge.***



Summary of Statements of Various Theological Groups

AME & AME ZION (African Methodist Episcopal)

Organ and tissue donation is viewed as an act of neighborly love and charity by these denominations. They encourage all members to support donation as a way of helping others.

Amish

The Amish will consent to transplantation if they believe it is for the well-being of the transplant recipient. John Hostetler,¹ a world-renowned authority on the Amish religion, wrote in his book, *Amish Society*, "The Amish believe that since God created the human body, it is God who heals. However, nothing in the Amish understanding of the Bible forbids them from using modern medical services, including surgery, hospitalization, dental work, anesthesia, blood transfusions, or immunization."

Assembly of God

The answer to the question of organ donation, according to the General Council of the Assemblies of God, is rooted in one's understanding of the doctrine of resurrection, Article 13, "The Blessed Hope," in the council's *Statement of Fundamental Truths*. The council's response is as follows (Office of Public Relations, General Council of the Assemblies of God, November 2, 2005):

The apostle Paul makes it very clear that the mortal bodies we now have cannot inherit the kingdom of God (1 Corinthians 15:35-58; 2 Corinthians 5:1-10). The Bible also makes it clear that to be absent from this body is to be at home with the Lord (2 Corinthians 5:6-10).

When we go to be with the Lord to await the rapture and resurrection of those left alive until the coming of the Lord (1 Thessalonians 4:15), our bodies return to dust (Genesis 2:7, 3:19; 1 Corinthians 15:45-50). We have no more need of the fallen mortal bodies we now bear.

Donating our organs may give the "gift of life" to someone else long after we have gone home to be with the Lord. If the recipient is a Christian, the resource of the organ has the potential to facilitate continued Christian service and the living witness of a fellow believer here on earth. If the recipient is not a Christian, it may allow the individual additional time and opportunity to accept Christ. A fascinating possibility is to imagine the impact if Christian donors were to stipulate that their donated organs be accompanied by a handwritten letter telling of the donor's life, testimony, and relationship with Christ.

The alternative is to keep our organs even in death. This also is a valid choice for the Christian. This was the practice for all until recent years when transplant procedures have proven viable.

Ultimately, the question comes down to whether or not we view it right for our organs to be candidates for resource.

The realization that organ donations save lives and provide for a continuing witness of God's love and grace does not mean that failure to donate organs would be sinful. All of us should seek God's will for our choices in this matter. It should be discussed fully with one's entire family.

Many considering organ donation will have theological concerns and questions. If we donate our organs to others, will that have any effect on our resurrection? But we must also ask, "Does God need any given molecule or atom from our bodies in order to resurrect us to life?" The apostle Paul said, "No." That which is perishable does not inherit the imperishable (1 Corinthians 15:49-50). The resurrection brings a new spiritual body.

Bahá'í

There is no prohibition in the Bahá'í Faith on organ donation. It is a matter left to the individual conscience (Office of Public Information, Bahá'í International Community, November 10, 2005).

Buddhism

Buddhists believe that organ and tissue donation is a matter of individual conscience, and they place high value on acts of compassion. The Rev. Gyomay Masao,³ president and founder of the Buddhist Temple of Chicago, said, "We honor those people who donate their bodies and organs to the advancement of medical science and to saving lives." The importance of letting loved ones know your wishes is stressed.

There are no injunctions in Buddhism for or against organ donation. The death process of an individual is viewed as a very important time that should be treated with the greatest care and respect. In some traditions, the moment of death is defined according to criteria which differ from those of modern Western medicine, and there are differing views as to the acceptability of organ transplantation. The needs and wishes of the dying person must not be compromised by the wish to save a life. Each decision will depend on individual circumstances.⁴

Central to Buddhism is a wish to relieve suffering and there may be circumstances where organ donation may be seen as an act of generosity. Where it is truly the wish of the dying person, it would be seen in that light.⁴

If there is doubt as to the teachings within the particular tradition to which a person belongs, expert guidance should be sought from a senior teacher within the tradition concerned.⁴

When he discovered a monk sick and uncared for, the Buddha said to the other monks, "Whoever would care for me, let him care for those who are sick." Mahavagga VIII.26.1-8 (Kucchivikara-vatthu - The Monk with Dysentery, translated from the Pali by Thanissaro Bhikkhu)

Church of the Brethren

The Church of the Brethren² commits itself and urges its congregations, institutions, and members to:

- Inform and educate themselves by taking advantage of resources within their region as to organ and tissue donation.
- Support and encourage individuals to be in discussion with clergy and family as to their wishes regarding the use of their organs and/or tissues for transplantation upon death.
- Encourage and support individuals to include within their advance medical directives instructions as to their wishes for organ and tissue donation.
- Support those living donors who, with prayerful consideration, make an organ or tissue gift, provided that such a gift does not deprive the donor of life itself nor the functional integrity of his or her body.
- Encourage our clergy to prepare themselves to respond to the special needs of family and friends at the time of organ and tissue procurement.

Catholicism

Roman Catholics view organ and tissue donation as an act of charity and love, as reported in the Catholic publication *Origins* in 1994.⁵

Transplants are morally and ethically acceptable to the Vatican. According to Father Leroy Wickowski, Director of the Office of Health Affairs of the Archdiocese of Chicago, "We encourage donation as an act of charity. It is something good that can result from tragedy and a way for families to find comfort by helping others." Pope John Paul II has stated, "The Catholic Church would promote the fact that there is a need for organ donors and that Christians should accept this as a 'challenge to their generosity and fraternal love' so long as ethical principles are followed."

Pope Francis described the act of organ donation as a "testimony of love for our neighbor" when he met with the Transplantation Committee for the Council of Europe (CD-P –TO) who gathered in Rome on October 9, 2014.

The Most Rev Peter Smith, Archbishop of Southwark, said: "The Catholic Church is clear that, in itself it is a good and meritorious thing freely to donate our organs after we are dead. Even while we are alive, actions such as giving blood can be a powerful expression of human solidarity and of Christian charity. Such actions can help build a culture of life, a culture in which life is cherished."

Catholic health care institutions should encourage and provide the means whereby those who wish to do so may arrange for the donation of the organs and bodily tissues for the ethically legitimate purposes, so that they may be used for donation and research after death. The following is taken from the New York Organ Donor Network:⁶

In 1956, Pope Pius XII declared that: "A person may will to dispose of his body and to destine it to ends that are useful, morally irreproachable and even noble, among them the desire to aid the sick and suffering....This decision should not be condemned but positively justified."

In August 2000, Pope John Paul II told attendees at the International Congress on Transplants in Rome: "Transplants are a great step forward in science's service of man, and not a few people today owe their lives to an organ transplant. Increasingly, the technique of transplants has proven to be a valid means of attaining the primary goal of all medicine—the service of human life....There is a need to instill in people's hearts, especially in the hearts of the young, a genuine and deep appreciation of the need for brotherly love, a love that can find expression in the decision to become an organ donor."

In the Summer/Fall 2001 issue of *On the Beat*, a publication of the New York Organ Donor Network, His Eminence Edward Cardinal Egan, Archbishop of New York, wrote that, "in thinking about the glorious gift of life God has given each of us, one of the greatest ways an individual can honor that gift is being an organ donor."

In his encyclical letter, *Evangelium Vitae* (On the Value and Inviolability of Human Life), His Holiness Pope John Paul II speaks of society's fascination with a "culture of death." He calls on Catholics and people of good faith everywhere to move from that culture towards a celebration and reflection of the glory of God in a "culture of life. When asked to share my thoughts on the importance of organ donation for this publication, it was *Evangelium Vitae* that immediately came to mind. In thinking about the glorious gift of life God has given each of us, it would seem that one of the greatest ways an individual can honor that gift is by making a conscious decision to be an organ donor—a decision that enables another's life to continue—and in a very real and tangible way promotes 'a culture of life. '"

Organ donation is, as His Holiness has stated, "a genuine act of love." The commitment of one person to give the "gift of life" to another person mirrors an essential foundation upon which the teachings of Christ and the theology of our Church are based. As Saint John tells us, "For God so loved the world, that he gave His only begotten Son, that whosoever believeth in Him, should not perish but have everlasting life" (John 3:16). By knowingly choosing the donations of one's bodily organs, one is acting as Christ would act—giving life to humanity.

The Catholic Church views organ donation as an act of charity. *The Ethical and Religious Directives for Catholic Health Care Services*, a set of principles that guide the healing mission of the Church, clearly explains the permissibility of organ donations. In *Directive No. 30*, we read: "The transplantation of organs from living donors is morally permissible when such a donation will not sacrifice or seriously impair any essential bodily function and the anticipated benefit to the recipient is proportionate to the harm to the donor." Similarly, *Directives No. 63-66* treat organ donation as follows: *Directive No. 63*: "Catholic health care institutions should encourage and provide the means whereby those who wish to do so may arrange for the donation of their organs and bodily tissue, for ethically legitimate purposes, so that they may be used for donation and research after death." *Directive No. 64*: "Such organs should not be removed until it has been medically determined that the patient has died. In order to prevent any conflict of interest, the physician who determines death should not be a member of the transplant team."

The donation of organs in a morally acceptable manner, at the end of life, offers the gifts of health and life to those who are most vulnerable and who are at times without hope. It is one of the many pro-life positions an individual can choose in order to foster a culture that values life in our world.

As to what criteria constitute a "morally acceptable manner," it is essential that organ transplantation occur in the context of love and respect for the dignity of the human person. There are, of course, parameters in determining when and how organs should be donated. It is the Church's position that transplanted organs never be offered for sale. They are to be given as a gift of love. Any procedure that commercializes or considers organs as items for exchange or trade is morally unacceptable. The decision as to who should have priority in regards to organ transplantation *must* be based solely on medical factors and not on such considerations as age, sex, religion, social standing or other similar standards. In addition, it is of the utmost importance that informed consent by the donor and/or donor's legitimate representatives be had and that vital organs, those that occur singly in the body, are removed only after certain death (the complete and irreversible cessation of all brain activity) has occurred.

As Pope John Paul II observes in *Evangelium Vitae*, "There is an everyday heroism, made up of gestures and sharing, big or small, which build up an authentic culture of life. A particularly praiseworthy example of such gestures is the donation of organs in a morally acceptable manner."

It is for the betterment of humanity, for the love of one's fellow human beings, that organ donation is undertaken. One of the most powerful ways for individuals to demonstrate love for their neighbor is by making an informed decision to be an organ donor.

Christianity

There is definite evidence for Christian support of organ donation.⁶

The Lord demonstrated with his own life how, even in sorrow, love enables us to embrace the needs of others. We can choose to donate our organs to save the lives of many people. The decision to donate at the end of life is the beginning of healing for many others.

Healing and saving life is a great gift. Jesus sent his 12 disciples out with the imperative to heal disease and illness: "Heal the sick ... freely ye have received, freely give." (Matthew 10:8)

"In eternity we will neither have nor need our earthly bodies: former things will pass away, all things will be made new." (Revelation 21: 4-5)

"I hope that Christian people will seriously and positively consider organ donation. The ready willingness to donate an organ is a clear sign of that sacrificial self-giving for others patterned by Jesus Christ." — David Ebor, Archbishop of York

"Every organ transplant has its source in a decision of great ethical value... Here lies the nobility of a gesture which is a genuine act of love. There is a need to instill in people's hearts a genuine and deep love that can find expression in the decision to become an organ donor." — His Holiness Pope John Paul II

"Any act that can save life, such as organ donation, is a great thing and quite acceptable within our faith." — Council of African and Afro-Caribbean Churches (UK)

"The Methodist Church has consistently supported organ donation and transplantation in appropriate circumstances, as a means through which healing and health may be made possible." — Methodist Church UK

"Christians should generally be encouraged to help others in need, and organ donation can be a very concrete and sacrificial way of helping." — The Rt Reverend Michael Nazir-Ali, Bishop of Rochester

Christian Church (Disciples of Christ)

The Christian Church encourages organ and tissue donation, stating that individuals were created for God's glory and for sharing of God's love. A 1985 resolution, adopted by the general assembly, encourages "members of the Christian Church (Disciples of Christ) to enroll as organ donors and prayerfully support those who have received an organ transplant."

Christian Science

The Church of Christ Scientist does not have a specific position regarding organ donation. According to the First Church of Christ Scientist in Boston, Christian Scientists normally rely on spiritual instead of medical means of healing. They are free, however, to choose whatever form of medical treatment they desire, including a transplant. The question of organ and tissue donation is an individual decision.

Church of the Nazarene

The Church of the Nazarene encourages members who do not object personally to support donor and recipient anatomical gifts through living wills and trusts. Further, the Church appeals for morally and ethically fair distribution of organs to those qualified to receive them (Manual, Church of the Nazarene, 1997-2001, paragraph 904.2).⁷

Episcopal

The 70th General Convention of the Episcopal Church⁸ recommends and urges "all members of this Church to consider seriously the opportunity to donate organs after death that others may live, and that such decision be clearly stated to family, friends, church and attorney."

Evangelical Covenant Church

The following regarding the Evangelical Covenant Church is from the New York Organ Donor Network:⁶ "A resolution passed at the Annual Meeting in 1982 encouraged members to sign and carry organ donor cards. The resolution also recommended 'that it becomes a policy with our pastors, teachers, and counselors to encourage awareness of organ donation in all our congregations.'

Evangelical Lutheran Church in America

The Evangelical Lutheran Church in America:⁹

- Regards the donation of deceased donor organs as an appropriate means of contributing to the health and well-being of the human family.
- Recognizes that the donation of renewable tissue (e.g., bone marrow) and live organs (e.g. kidney) can be an expression of sacrificial love for a neighbor in need.
- Encourages its members to consider the possibility of organ donation and to communicate their wishes to family members, physicians and health care institutions.
- Encourages those willing to donate to make the necessary familial and legal arrangements including the use of a signed donor card.
- Calls upon its pastors to acquaint themselves with the ethical and legal issues and clinical procedures involved in order that they may counsel persons and families considering the possibility of donation.
- Urges its pastors, congregations, synods, agencies and institutions to sponsor educational programs on organ donation.
- Calls upon government to establish public policies which will encourage voluntary donations, discourage coercive donation, assure the efficient, equitable distribution of human organs and tissues for transplants, and disallow both the sale and purchase of human organs.

Greek Orthodox

The Rev. Stanley S. Harakas, former professor of ethics at Holy Cross Greek Orthodox School of Theology, wrote the following about donation:¹⁰

"In the case of organ transplants, the crucial ethical considerations are two-fold; the potential harm inflicted upon the donor and the need of the recipient. Historically, the Orthodox Church has not objected to similar, though not identical, procedures, such as

blood transfusions and skin grafts. In both cases, no radical threat to the life of the donor is perceived, and the lifesaving consequences for the recipient are substantial. Similar considerations affect the Orthodox Christian judgment of organ transplants. In no case should a person ignore or make light of the ethical implications of organ donation. Donating an organ whose loss will impair or threaten the life of the potential donor is never required and is never a moral obligation of any person. If the condition of health and the physical well-being of the donor permits, some transplants are not objectionable. Kidney transplants are a case in point. A healthy person may consent to donate a kidney knowing that his or her health is not thereby impaired. The recipient of an organ transplant should be in otherwise good health, with the expectation of restoring to normal living in order to warrant the risk to the donor."

Gypsies (Roma)

Gypsies are a people of different ethnic groups without a formalized religion. They share common folk beliefs and tend to be opposed to organ donation. Their opposition is connected with their beliefs about the afterlife. Traditional belief contends that for 1 year after death the soul retraces its steps. Thus, the body must remain intact because the soul maintains its physical shape.⁶

Hinduism

According to the Hindu Temple Society of North America, Hindus are not prohibited by religious law from donating their organs. This act is an individual's decision.

H. L. Trivedi, in *Transplantation Proceedings*, stated that "Hindu mythology has stories in which the parts of the human body are used for the benefit of other humans and society. There is nothing in the Hindu religion indicating that parts of humans, dead or alive, cannot be used to alleviate the suffering of other humans."¹¹

The Swamis were universal in their approval of organ donation. They did not accept the concept sometimes heard in India that if one donated [his or her] eyes in this life, they would be blind in the next. Shri Mahant Krishan Nath Ji, based in Haryana, explained, "If someone donates an organ willingly, then there is nothing wrong in that. And it is wrong to say that if you donate eyes in this birth, that in your next birth you would be born without eyes. We have the story of Baba Sheel Nath of Nath Sampradaya who transferred the sight of one of his eyes to that of a blind lady by his yogic powers. So our Nath Sampradaya has had such realized saints who even made people immortal. To them, eye donation was a very small thing."¹¹

Another source reports: "Hindu methodology contains traditions in which human body parts were used for the benefit of other humans and society. There is nothing in the Hindu religion which would prevent living or cadaveric donation to alleviate suffering."³

There are many references that support the concept of organ donation in Hindu scriptures. These include the following:¹²

Daan is the original word in Sanskrit for donation meaning selfless giving. In the list of the 10 *Niyamas* (virtuous acts) *Daan* comes third.

"Of all the things that it is possible to donate, to donate your own body is infinitely more worthwhile." — The Manusmriti

Life after death is a strong belief of Hindus and is an ongoing process of rebirth. The law of Karma decides which way the soul will go in the next life. The Bhagavad Gita describes the mortal body and the immortal soul in a simple way like the relationship of clothes to a body:

"vasamsi jirnani yatha vihaya
navani grhnati naro 'parani

tatha sarirani vihaya jirnany
anyani samyati navandi dehi."
("As a person puts on new garments
giving up the old ones
the soul similarly accepts new material bodies
giving up the old and useless ones.")

— Bhagavad Gita chapter 2:22

Scientific and medical treatises (*Charaka* and *Sushruta Samhita*) form an important part of the *Vedas*. *Sage Charaka* deals with internal medicine while *Sage Sushruta* includes features of organ and limb transplants.

"The important issue for a Hindu is that which sustains life should be accepted and promoted as Dharma (righteous living). Organ donation is an integral part of our living."
— Hasmukh Velji Shah, International Trustee, World Council of Hindus

"Organ donation is in keeping with Hindu beliefs as it can help to save the life of others."
— Mr Om Parkash Sharma MBE, President, National Council of Hindu Temples

"I always carry my donor card with me. It says that my whole body can be used for organ donation and medical purposes after my death. I would like to encourage as many people as possible to do the same."
— Dr Bal Mukund Bhala, Co-ordinator Hindu International Medical Mission,
Former President Hindu Council UK

Independent Conservative Evangelical

Generally, Evangelical Christians have no opposition to organ and tissue donation. Each church is autonomous and leaves the decision to donate up to the individual.

Islam

Based on the principles and the foregoing attributes of a Muslim, the majority of Islamic legal scholars have concluded that transplantation of organs as treatment for otherwise lethal end stage organ failure is a good thing. Donation by living donors and by cadaveric donors is not only permitted but encouraged.³

Organ donation should be considered as an expression of the believer's altruism and Islam encourages the virtuous qualities which are supportive of organ donation: generosity, duty, charity, co-operation, etc. Accordingly, the Islamic Code of Medical Ethics stresses that human life is sacred and it must be preserved by all possible means. It is permissible within the Shariat to remove the organ from one person and transplant it into another person's body in order to save the life of that person on the condition that such a procedure does in no way violate the dignity of the person from whose body the organ was removed.¹³

One of the basic aims of the Muslim faith is the saving of life: This is a fundamental aim of the Shariah and muslims believe that Allah greatly rewards those who save others from death. Violating the human body, whether living or dead, is normally forbidden in Islam.

The Shariah, however, waives this prohibition in a number of instances: firstly in cases of necessity; and secondly in saving another person's life. It is this Islamic legal maxim *al-darurat tubih al-mahzurat* (necessities overrule prohibition) that has great relevance to organ donation.

"Whosoever saves the life of one person it would be as if he saved the life of all mankind."— Holy Qur'an, chapter 5 vs. 32

"If you happened to be ill and in need of a transplant, you certainly would wish that someone would help you by providing the needed organ." — Sheikh Dr MA Zaki Badawi, Principal, Muslim College, London

UK Transplant¹⁴ also gives this summary of the lifesaving Fatwa (a religious edict):

The Muslim Law (Shariah) Council of Great Britain resolved that:

- The medical profession is the proper authority to define signs of death.
- Current medical knowledge considers brain stem death to be a proper definition of death.
- The council accepts brain stem death as constituting the end of life for the purpose of organ transplantation.
- The council supports organ transplantation as a means of alleviating pain or saving life on the basis of the rules of the Shariah.
- Muslims may carry donor cards.
- The next of kin of a dead person, in the absence of a donor card or an expressed wish to donate their organs, may give permission to obtain organs from the body to save other people's lives.
- Organ donation must be given freely without reward.
- Trading in organs is prohibited.

"Whosoever helps another will be granted help from Allah."

— Prophet Muhammed (pbuh)

Muslim scholars of the most prestigious academies are unanimous in declaring that organ donation is an act of merit and in certain circumstances can be an obligation.

These institutes all call upon Muslims to donate organs for transplantation:

- The Shariah Academy of the Organisation of Islamic Conference (representing all Muslim countries).
- The Grand Ulema Council of Saudi Arabia.
- The Iranian Religious Authority.
- The Al-Azhar Academy of Egypt.

Gatrad and Sheikh¹⁵ write this about the Fatwa in 1995 by the Muslim Law Council in support of organ donation: "Organ transplantation is now encouraged in many Arab Muslim countries, and considered by some as a 'perpetual' charitable act."¹⁴

Jehovah's Witnesses

Jehovah's Witnesses do not believe that the Bible comments directly on organ transplants; hence: decisions made regarding cornea, kidney, or other tissue transplants must be made by the individual. The same is true regarding bone transplants.

Jehovah's Witnesses are often assumed to be opposed to donation because of their belief against blood transfusion. However, this merely means that all blood must be removed from the organs and tissues before being transplanted. (Office of Public Information for Jehovah's Witnesses, October 20, 2005.)

Judaism

According to Solomon,¹⁶ three Jewish principles govern the treatment of the body after death: respect and dignity to a cadaver, not benefiting from a corpse, and immediate burial.

Rabbi Elliott N. Dorff writes that saving a life through organ donation supersedes the rules concerning treatment of a dead body. Transplantation does not desecrate a body or show lack of respect for the dead, and any delay in burial to facilitate organ donation is respectful of the decedent. Organ donation saves lives and honors the deceased.¹⁶

The Conservative Movement's Committee on Jewish Laws and Standards has stated that organ donations after death represent not only an act of kindness, but are also a "commanded obligation" which saves

human lives. Refusal to participate in organ donation violates the commandment: "Do not stand idly by your neighbor's blood (Leviticus 19:16) which directs we use any resource possible to save a life.¹⁶

UK Transplant¹⁷ reports:

In principle Judaism sanctions and encourages organ donation in order to save lives (pikuach nefesh).

This principle can sometimes override the strong objections to any unnecessary interference with the body after death, and the requirement for immediate burial of the complete body.

It is understandable that there will be worries about organ donation. At a time of stress and grief, linked to sudden unexpected illness and death, reaching a decision about donation can be difficult for a family. It is at this time that halachic guidance is so important.

Judaism insists that no organ may be removed from a donor until death—as defined in Jewish law—has definitely occurred. This can cause problems concerning heart, lung and similar transplants where time is of the essence. Judaism insists that honor and respect are due to the dead (kavod hamet). After donation, the avoidance of unnecessary further interference with the body, and the need for immediate interment, are again of prime concern.

Lutheran Missouri Synod

The Lutheran Church—Missouri Synod encourages organ donation as an act of Christian love, but this choice is entirely up to the individual and/or his or her family, and should not be a cause of guilt or regret no matter what decision is made. The Bible has nothing specific to say regarding this issue. Therefore, it is a matter of Christian freedom and personal (or family) discretion.

In 1981, the Synod adopted the following resolution: To Encourage Donation of Kidneys and Other Organs Resolution 8-05:

Whereas, we accept and believe that our Lord Jesus came to give life and to give it abundantly (John 10:10); and

Whereas, through advances in medical science we are aware that at the time of death some of our organs can be transplanted to alleviate pain and suffering of afflicted human beings (see Galatians 6:10); and

Whereas, our heavenly Father has created us so that we can adequately and safely live with one kidney and can express our love and relieve the unnecessary prolonged suffering of our relative; and

Whereas, we have an opportunity to help others out of love for Christ, through the donation of organs; therefore be it

Resolved, that our pastors, teachers, and Directors of Christian Education be encouraged to inform the members of The Lutheran Church—Missouri Synod of the opportunity to sign a Universal Donor Card (which is to authorize the use of our needed organs at the time of death in order to relieve the suffering of individuals requiring organ transplants); and be it further

Resolved, that we encourage family members to become living kidney donors; and be it further Resolved, that the program committees of pastors and teachers conferences be encouraged to include "organ and tissue transplants" as a topic on their agendas; and be it finally

Resolved, that the Board of Social Ministry and World Relief seek ways to implement this program so that the entire Synod may join in this opportunity to express Christian concern.¹⁸

Mennonite

Mennonites have no formal position on donation but are not opposed to it. They believe the decision to donate is up to the individual and/or his or her family.⁶

Moravians

The Moravian Church has made no statement addressing organ and tissue donation or transplantation. Robert E. Sawyer, president, Provincial Elders Conference, Moravian Church of America, Southern Province, states, "There is nothing in our doctrine or policy that would prevent a Moravian pastor from

assisting a family in making a decision to donate or not to donate an organ." It is, therefore, a matter of individual choice.

Mormon (Church of Jesus Christ of Latter-day Saints)

The donation of organs and tissues is a selfless act that often results in great benefit to individuals with medical conditions. The decision to will or donate one's own body organs or tissues for medical purposes, or the decisions to authorize the transplant of organs or tissue from a deceased family member, is made by the individual or the deceased member's family.

The decision to receive a donated organ should be made after receiving competent medical counsel and confirmation through prayer.⁶

Pentecostals

Pentecostals believe that the decision to donate should be left up to the individual.

Presbyterians

Therefore, be it resolved that the Presbyterian Church (U.S.A.) recognize the life-giving benefits of organ and tissue donation, and thereby encourage all Christians to become organ and tissue donors as a part of their ministry to others in the name of Christ, who gave life that we might have life in its fullness;

Whereas selfless consideration for the health and welfare of our fellows is at the heart of Christian ethic; and

Whereas organ and tissue donation is a life-giving act since transplantation of organs and tissues is scientifically proven to save the lives of persons with terminal disease and improve the quality of life for the blind, the deaf, and the crippled; and

Whereas organ donation may be perceived as a positive outcome of a seemingly senseless death and is for maintaining the dignity of the deceased; is conducted with respect and with the highest consideration for maintaining the dignity of the deceased and his or her family; and

Whereas moral leaders the world over recognize organ and tissue donation as a[n] expression of humanitarian ideals in giving life to another; and

Whereas thousands of people who could benefit from organ and tissue donation continue to suffer and die due to lack of consent for donation due primarily, to poor public awareness and lack of an official direction for the church.

Protestantism

Because of the many different Protestant denominations, a generalized statement on their attitudes toward organ and tissue donation cannot be made. However, the denominations share a common belief in the New Testament. (Luke 6:38: "Give to others and God will give to you") The Protestant faith respects individual conscience and a person's right to make decisions regarding his or her own body. In addition, it is generally not believed that resurrection involves making the physical body whole again.⁶

In the Winter/Spring 2002 issue of *On the Beat*, a publication of the New York Organ Donor Network,⁶ the Rev. Dr. James A. Forbes Jr, senior minister, The Riverside Church of New York City, wrote:

Medical technology which has made organ and tissue transplantation possible opens up new opportunities for human beings to become partners with God in sustaining and extending the precious "gift of life." The fact that we can donate an organ while we live without compromising our health should lead us to exclaim: "I praise you, for I am fearfully and wonderfully made." (Psalm 139:14 New Revised Standard Version) Even death cannot prevent us from making a magnanimous offering of new hope for those desperately clinging to life until an appropriate donor has been identified. Some of the most touching moments of human compassion are associated with organ and tissue transplantation: a mother to a child, a sister to a brother, a neighbor to a neighbor, and stranger to a stranger. Dr. Wyatt T. Walker, Pastor of the Canaan Baptist Church of New York City and former Chief of Staff for Dr. Martin Luther King, Jr., loves to preach about such an event, which for him became a moment of revelation. He tells of an

interview he saw on national TV following a fatal mass shooting at a school in Paducah, Kentucky. The reporter asked the mother of one of the slain students what her first thoughts were after being informed of the shootings. The mother said she rushed to the hospital hoping that her daughter had survived. "And after you were told that she had passed, what was your next thought?" The mother said, "I hoped that it would be possible for someone to receive the "gift of life" from her through an organ donation." The little girl was white. Interestingly, the best friend of the little white girl was a black girl. They called each other "my twin sister." It turns out that the little girl's heart was donated to a black man. When the mother was finally able to visit the gentleman who had received her daughter's heart, she had one request: "May I place my ear on your chest so that I can hear the heart of my wonderful daughter?" Perhaps heaven was also monitoring that episode of sublime human love.

As wonderful as such moments are, some persons are still not sure if offering an organ is compatible with the demands of their faith. Is it pleasing to God to give part of oneself in this way? Shouldn't we strive at any cost to keep intact all of the parts of the body God gave us? Will we be less whole if a part of us is missing in the "great getting up morning"? Is it mutilation of the flesh to allow someone to take one kidney when the Lord gave us two?

It may be surprising to some to learn that with only a few exceptions all of the major religions affirm and celebrate the godliness of organ and tissue transplantation. Words like caring, sharing, compassion, and sacrifice are at the heart of true religion. The cross, a central Christian symbol, is about Jesus giving himself for the salvation of the world. John 3:16 says, "God so loved the world that God gave his only son..." With this understanding, becoming a donor takes on sacramental meaning. Organ and tissue donation is considered to be the ultimate humanitarian act of benevolence.

As a Protestant minister, I think of the following perspectives as I respond to questions regarding organ and tissue donation:

1. Each person of faith needs to order his or her behavior to confirm to a spirit-guided and biblically nurtured conscience. "Whatsoever is not of faith is sin." (Romans 14:23) It is helpful for members of our congregations to discuss the issue with their leaders and to form a solid sense of what is appropriate. Theological discussions in our communities of faith tend to lead to a strong encouragement of organ and tissue donation.
2. One should not expect proof text from the Bible on this issue. Transplantation was not even a possibility at the time the gospels were being written. There were many things Jesus did not address directly. It is the Holy Spirit who leads us into the ways of enlightenment on matters which have surfaced in our time. The spirit of generosity and sacrifice are encouraged in all seasons. Our bodies are the temples of the Holy Spirit. Holy deeds of generosity are to be commended.
3. The opportunity to donate organs and tissue may be one of the most effective ways to counteract the pervasive selfishness of these modern times. The golden rule urges us to think and act from the perspective of what we would desire of others if we were similarly situated.
4. Christian commitment calls us to show respect for the sanctity of the body. A loving sacrificial offering of the "gift of life" is a holy honoring of our flesh and blood. To be able to live as good stewards of our bodies, then to extend the lives of others reveals something of the nature of our heavenly parent and our Lord, Jesus Christ.
5. Romans 8:28 reminds us that in everything God is at work to bring good out of whatever happens. It is not appropriate to claim that God wills all the tragic events, which result in the death of any of us. Nevertheless, in such tragic circumstances, there is the good of organ and tissue donation, which upstages the evil, which has occurred. Finally, so much of life is lived as if our own individual well-being is of ultimate significance. Before God, each life is precious and deserving of respect and care. But we are not only individuals before God. We are a family bound by love and mutual care.

Organ and tissue donation gives dramatic witness to our interconnectedness. The first citizens of our nation, Native Americans, understood this [interconnectedness]. Perhaps we will be willing to sign a donor card and make an organ and tissue donation when we recover the spirit of Chief Seattle who inspired Ted Perry to write:

*This we know.
All things are connected
Like the blood
Which unites one family...
Whatever befalls the earth,
Befalls the sons and daughters of the earth.
Man did not weave the web of life;
He is merely a strand in it.
Whatever he does to the web,
He does to himself.*

Salvation Army

The Salvation Army finds organ donation and transplantation acceptable.⁶

Seventh-day Adventist Church

The Seventh-day Adventist Church does not have an official statement on organ donation. However, the church does have a statement on the care of the dying, which includes the following excerpts:²⁰

1. God's plan is for people to be nourished within a family and a faith community.
2. Decisions about human life are best made within the context of healthy family relationships after considering medical advice (Genesis 2:18; Mark 10:6-9; Exodus 20:12; Ephesians 5-6). When a dying person is unable to give consent or express preferences regarding medical intervention, such decisions should be made by someone chosen by the dying person. If no one has been chosen, someone close to the dying person should make the determination.
3. Christian love is practical and responsible (Romans 13:8-10; 1 Corinthians 13; James 1:27, 2:14-17). Such love does not deny faith nor obligate us to offer or to accept medical interventions whose burdens outweigh the probable benefits. For example, when medical care merely preserves bodily functions, without hope of returning a patient to mental awareness, it is futile and may, in good conscience, be withheld or withdrawn. Similarly, life-extending medical treatments may be omitted or stopped if they only add to the patient's suffering or needlessly prolong the process of dying.

Additionally, Loma Linda University Medical Center, a Seventh-day Adventist institution, described as "integrating health, science and Christian faith" and specializes in organ transplantation. Loma Linda's Transplant Institute provides adult and pediatric heart, kidney, liver, and pancreas programs, and performed a combined total of 138 deceased and living donor transplants in 2005.

Shinto

In Shinto, the deceased's body is considered to be impure and dangerous, and thus quite powerful. "In folk belief context, injuring a dead body is a serious crime," according to E. Namihira in his article, "Shinto Concept Concerning the Dead Human Body." "To this day it is difficult to obtain consent from bereaved families for organ donation or dissection for medical education or pathological anatomy ... the Japanese regard them all in the sense of injuring a dead body." Families are often concerned that they not injure the *itai*, the relationship between the dead person and the bereaved people.⁶

Sikhs

The Sikh philosophy and teachings place great emphasis on the importance of giving and putting others before oneself.²¹

"Where self exists, there is no God
Where God exists, there is no self."

— Guru Nanak, Guru Granth Sahib

The Sikh faith stresses the importance of performing noble deeds. There are many examples of selfless giving and sacrifice in Sikh teachings by the 10 Gurus and other Sikhs.

"The dead sustain their bond with the living through virtuous deeds."

— Guru Nanak, Guru Granth Sahib

"The Sikh religion teaches that life continues after death in the soul, and not the physical body. The last act of giving and helping others through organ donation is both consistent with and in the spirit of Sikh teachings."

—Dr. Indarjit Singh OBE, Director of the Network of Sikh Organisations (UK)

"The true servants of God are those who serve Him through helping others."
Guru Nanak, Guru Granth Sahib

Sikhs believe life after death is a continuous cycle of rebirth but the physical body is not needed in this cycle—a person's soul is [the] real essence.

"In my family we all carry donor cards and would encourage all Sikhs to do so"
— Dr. Indarjit Singh OBE, Director, Network of Sikh Organisations (UK)

Southern Baptist Convention

The Southern Baptist Convention (SBC) has no official position on organ donation. Such decisions are a matter of personal conscience, writes Dr. Steve Lemke, provost of the New Orleans Baptist Theological Seminary and fellow of the Research Institute of The Ethics and Religious Liberty Commission (January 20, 2006). Dr. Lemke further writes:

However, the SBC did pass a nonbinding resolution in its 1988 convention that endorsed organ donation in certain situations. Citing the positive, lifesaving contribution of organ donation, the resolution encouraged "physicians to request organ donation in appropriate circumstances." The resolution denied that the bodily resurrection required the wholeness of the body at death, and praised the selflessness, stewardship, and compassion, and alleviation of suffering associated with organ donation. The resolution also recognized the validity of living wills and organ donation cards, and the right of next-of-kin to make organ donation decisions in some circumstances and as allowed by statute. The SBC resolution on organ donation emphasizes that such action be life-affirming; for that reason the convention does not condone euthanasia, infanticide, abortion, or harvesting of fetal tissue for procurement of organs. While Southern Baptists entrust the ultimate decision about organ donation to individual conscience, biblical principles such as the sanctity of human life, sacrificial and selfless Christ-like love, and the compassionate alleviation of suffering would appear to justify organ donation.

Society of Friends (Quakers)

Organ and tissue donation is believed to be an individual decision. The Society of Friends does not have an official position on donation.

Unitarian Universalist

Organ and tissue donation is widely supported by Unitarian Universalists. They view it as an act of love and selfless giving, according to the Unitarian Universalist Association, or UUA (Erika Nonken, public information assistant, UUA, October 26, 2005).

The UUA has no official position on organ and tissue donation. It is up to each person to decide what is appropriate for [him or her]. Unitarian Universalist are free to make their own decisions about their bodies and their end-of-life arrangements. There are no spiritual or theological beliefs in Unitarian Universalism that would prevent an individual from choosing to donate [his or her] organs, as Unitarian Universalism is a creedless religion.

One of the principles of Unitarian Universalism is respect for the interdependent web of all existence of which we are a part. This principle often encourages Unitarian Universalists to choose have their organs donated after their death, and to otherwise use their bodies, lives, and deaths to help others whenever possible.

United Church of Christ

"United Church of Christ people, churches, and agencies are extremely and overwhelmingly supportive of organ sharing," writes the Rev. Jay Lintner, director, Washington Office of the United Church of Christ Office for Church in Society. He adds:

The General Synod has never spoken to this issue because, in general, the Synod speaks on more controversial issues, and there is no controversy about organ sharing, just as there is no controversy about blood donation in the denomination. While the General Synod has never spoken about blood donation, blood donation rooms have been set up at several General Synods. Similarly, any organized effort to get the General Synod delegates or individual churches to sign organ donation cards would meet with generally positive responses.

United Methodist Church

The United Methodist Church issued a policy statement regarding organ and tissue donation. It states, "The United Methodist Church recognizes the life-giving benefits of organ and tissue donation, and thereby encourages all Christians to become organ and tissue donors by signing and carrying cards or driver's licenses, attesting to their commitment of such organs upon their death, to those in need, as a part of their ministry to others in the name of Christ, who gave his life that we might have life in its fullness."

A 1992 resolution states, "Donation is to be encouraged, assuming appropriate safeguards against hastening death and determination of death by reliable criteria." The resolution further states, "Pastoral-care persons should be willing to explore these options as a normal part of conversation with patients and their families."

"We are pro-organ donation," said the Rev. Blaine Bluebaugh of the Graham United Methodist Church in Falls Church, Virginia. "It's a major thing for us. It's one of our official days in the calendar. We just believe in it. God has given us the ability to do this, and we should share."²²

The United Methodists, as with several religions, believe that organ and tissue donation is an act of charity and that preserving life takes precedence over any beliefs that govern the treatment of the dead.²²

Acknowledgement

The summary of general religious views was originally compiled by Christine Gallagher, MAR, while the public education consultant/religious community liaison at Colorado Organ Recovery Systems. Some church position statements from various religious denominations were collected by the Rev. Charles H. Chandler, DMin, UNOS clergy consultant.

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References

1. Hostetler JA. Amish Society. 3rd ed. Baltimore, Md: Johns Hopkins Press; 1980.
2. Church of the Brethren Annual Conference, Indianapolis, Ind., June 22-27, 1993.
3. Quoted by Collins GM, Dubernard JM, Land W, Persijn GG, eds. *Procurement, Preservation and Allocation of Vascularized Organs*. New York, NY: Springer; 1997:337.
4. UK Transplant. Buddhism and organ donation. Available at: http://www.uktransplant.org.uk/ukt/how_to_become_a_donor/religious_perspectives/leaflets/buddhism_and_organ_donation.jsp. Accessed November 2, 2006.
5. Catholic News Service. *Origins*. December 15, 1994:459.
6. UK Transplant. Christianity and organ donation. Available at: http://www.uktransplant.org.uk/ukt/how_to_become_a_donor/religious_perspectives/leaflets/christianity_and_organ_donation.jsp. Accessed November 2, 2006.
7. New York Organ Donor Network. Religious viewpoints. Reprinted by permission of the New York Organ Donor Network, the organ procurement organization serving the Greater New York metropolitan area, from its Web site, www.donatelifeny.org.
8. Journal of the General Convention of the Episcopal Church, Phoenix, Ariz., 1991 (New York: General Convention, 1992), p. 251. Available at: http://www.episcopalarchives.org/cgi-bin/acts/acts_generate_pdf.pl?resolution=1991-A097. Accessed November 2, 2006.
9. Evangelical Lutheran Church in America. Organ donation: a resolution of the Lutheran Church in America. Available at: <http://www.elca.org/jle/article.asp?k=341>. Accessed September 19, 2006.
10. Harakas SS. For the health of body and soul: an eastern orthodox introduction to bioethics. Available at: <http://www.goarch.org/en/ourfaith/articles/article8076.asp>. Accessed November 15, 2005.
11. Hinduism Today magazine, December 2005. Available at: http://www.hinduismtoday.com/past_issues.shtml.
12. UK Transplant. Hindu Dharma and organ donation. Available at: http://www.uktransplant.org.uk/ukt/how_to_become_a_donor/religious_perspectives/leaflets/hindu_dharma_and_organ_donation.jsp. Accessed November 2, 2006.
13. Todorova B, Kolev V. Theological and moral aspects of cadaverous donation—heart transplantation from the point of view of Islam. *Formosan J Med Humanities*. 2004;5(12):29-36.
14. UK Transplant. Islam and organ donation. Available at: http://www.uktransplant.org.uk/ukt/how_to_become_a_donor/religious_perspectives/leaflets/islam_and_organ_donation.jsp. Accessed November 2, 2006.
15. Gatrad AR, Sheikh A. Medical ethics and Islam: principles and practice. *Arch Dis Child*. 2001;84:72-75.
16. Solomon LD. *The Jewish Tradition and Choices at the End of Life: A New Judaic Approach to Illness and Dying*. Lanham, MD: University Press of America; 2001.
17. UK Transplant. Judaism and organ donation. Available at: http://www.uktransplant.org.uk/ukt/how_to_become_a_donor/religious_perspectives/leaflets/judaism_and_organ_donation.jsp. Accessed November 2, 2006.
18. Lutheran Church—Missouri Synod. Available at: <http://www.lcms.org/pages/internal.asp?NavID=2118>. Accessed November 7, 2006.
19. Presbyterian Church (U.S.A.). Commissioners' Resolution R-5-38. Presented at the General Assembly.
20. Conference of Seventh-day Adventists Executive Committee. A statement of consensus on care for the dying. October 9, 1992. Available at: http://www.adventist.org/beliefs/statements/main_stat6.html. Accessed November 2, 2006.
21. UK Transplant. Sikhism and organ donation. Available at: http://www.uktransplant.org.uk/ukt/how_to_become_a_donor/religious_perspectives/leaflets/sikhism_and_organ_donation.jsp. Accessed November 2, 2006.
22. Quoted by Lesinski J. Most religions support organ donation. *Connection Newspapers*. January 24, 2002. Available at: <http://www.connectionnewspapers.com/article.asp?archive=true&article=328&paper=61&cat=112>. Accessed September 19, 2006.



Sermon Ideas

Clergy have their own unique way of sermon preparation and delivery. With that understanding and appreciation, the following suggestions are given as ideas. The following scripture references are available as starting points and ideas:

John 11:25: "I am the resurrection and the life."

1 Corinthians 15:35-58: The spiritual body

These verses could be used to teach about the resurrection, emphasizing that in the resurrection the physical body is transformed into a spiritual body. Therefore, the gift of organs, eyes and tissues does not affect the ability of one to be resurrected.

Luke 6:31-38: Give to others and God will give to you

This verse could be explored as to the command to give to others and various ways that we can give, including the giving of our bodies.

Romans 8:28-29: Seeking the good

This verse could be used to show how, in the midst of tragic circumstances of sudden death, God is seeking with us to find good. Donation may be one sign of good in an otherwise senseless death.

John 3:16-17: God gave His Son

God gave His Son to us so that we might live in eternal life. Can we not give of our organs and tissues when we no longer have need of them so that others may live in this temporary world?

Luke 14:12-14: Giving without reward

In this verse we are told to give to those who are in need without thought of reward from them. The need for organ, eye and tissue donation is great.

Genesis 2:26-31: Responsible power

In the moment of our creation we were given power over all things. Responsible use of this power would include using our own bodies to give life.

11 Corinthians 5:8: "To be absent from the body is to be present with the Lord"

This verse confirms the disconnect between the flesh and the spirit when we die.

***Sample sermon ideas were contributed by Tennessee Donor Services**



Scripture Reference

Transplants are **not** specifically mentioned in sacred texts because they are a very recent development. However, there is also nothing that would specifically prevent them. The timeless content of the texts speaks to donation in principle. The following references can guide our thinking and actions on organ, eye and tissue donation.

Genesis 2:20-30	Matthew 22:39
Genesis 2:22	Matthew 25:31-46
Genesis 2:26-31	Mark 3:1-5
Genesis 3:19	Mark 9:47
Leviticus 1:7	Mark 14: 3-9
Deuteronomy 30:15-20	Luke 3:10-11
Psalms 8	Luke 4:16-21
Psalms 23	Luke 6:31-38
Psalms 34	Luke 6:37-38
Psalms 41	Luke 6:43a
Psalms 82	Luke 10:25-37
Psalms 100	Luke 10:27
Psalms 103	Luke 12:4
Psalms 107	Luke 14:12-14
Psalms 111	John 3:16-17
Psalms 113	John 8:32
Psalms 116	John 10:10
Psalms 121	John 11:25
Psalms 145	John 14:12
Psalms 146	John 15:12-17
Psalms 147	John 15: 12-13
Ecclesiastes 3:1-17	Acts 3:1-10
Isaiah 35:1-6	Acts 5
Isaiah 40-31	Romans 12:1-2
Ezekiel 37	Romans 8:28-29
Matthew 5:7	Romans 8:28-39
Matthew 6:25	I Corinthians 1:45-58
Matthew 7:7	I Corinthians 15:35-58
Matthew 7:12	I Corinthians 15:50
Matthew 7:1-12	II Corinthians 4: 7-15
Matthew 10:1-8	II Corinthians 9:6-8
Matthew 10:8	James 5:13-16
Matthew 10:28	I John 4:11
Matthew 11:15	I John 4: 7-8
Matthew 14:19	I John 4:7 -12
Matthew 15:36	Revelation 21:4-5

*These scriptures references were compiled as suggestions from our colleagues in the donation and transplantation community from across the United States.



Closing Comments For a Funeral

The legacy of _____ will live on in a number of different ways. Those memories of _____ will bring us some joy and maybe some laughter as the pain of our loss begins to fade. And we can find further comfort in the fact that _____'s life, in a sense, did not end, but rather his/her life changed. We believe he/she has joined his/her Creator and Father and his/her Savior because he/she has been faithful to the request of Jesus to love Jesus and to love his/her fellow man and woman. Jesus promised us that salvation would come on Easter as a result of the sadness and tragedy of Good Friday. New Life did come to us out of the death of the crucifixion. And if we continue to follow the covenant we have with God, we, too, can experience the joy of redemption.

Another very beautiful way in which the legacy of _____ will continue is through a decision that his/her family (or the donor) made when he/she died. I am pleased that the family has permitted and encouraged me to mention to you, his/her friends and acquaintances, that _____ was an organ, eye and tissue donor (select as appropriate). As you know, the hospital does support the transplantation program, and through the family's (or donor's) generosity, _____'s _____ (list as appropriate) were used to save and heal the lives of several other people. Through the tragedy of _____'s death, more than _____ other human beings will have a longer life, and for some, a richer and fuller life. The recipients may never know who the donor was, but they can again experience laughter, joy, hope, and happiness through his miracle of transplantation. I compliment _____'s family (or donor) for their choice and reaffirm that we are proud to have known him/her and will all miss him/her for what he/she did for us when he/she was alive, as well as what he/she has done for others after his/her death.

Eternal rest, grant unto him/her, O Lord, and let perpetual light shine upon him. May his/her soul and the soul of all the faithfully departed rest in peace. Amen.

-Father Michael J. Lynch, DMin



Inspirational Writings
To Remember Me

The day will come when my body will lie upon a white sheet neatly tucked under four corners of a mattress located in a hospital busily occupied with the living and the dying. At a certain moment a doctor will determine that my brain has ceased to function and that, for all intents and purposes, my life has stopped.

When that happens, do not attempt to instill artificial life into my body by the use of a machine. And don't call this my deathbed. Let it be called the Bed of Life, and let my body be taken from it to help others lead fuller lives.

Give my sight to the man who has never seen a sunrise, a baby's face or love in the eyes of a woman.

Give my heart to a person whose own heart has caused nothing but endless days of pain.

Give my blood to the teenager who was pulled from the wreckage of his car, so that he might live to see his grandchildren play.

Give my kidneys to one who depends on a machine to exist from week to week.

Take my bones, every muscle, every fiber and nerve in my body and find a way to make a crippled child walk.

Explore every corner of my brain. Take my cells, if necessary, and let them grow so that, someday, a speechless body will shout at the crack of a bat and a deaf girl will hear the sound of rain against her window.

Burn what is left of me and scatter the ashes to the winds to help the flowers grow.

If you must bury something, let it be my faults, my weaknesses and all prejudice against my fellow man.

Give my sins to the devil.

Give my soul to God.

If, by chance, you wish to remember me, do it with a kind deed or word to someone who needs you.

If you do all I have asked, I will live forever.

-Robert N. Test



Bequest

So white.
Now I lay me down upon a sheet so white.

No more.
My brain can hear your voice no more.

But wait.
These eyes,
This heart,
This kidney,
These bones, skin, blood, nerve
Still can serve.
As Christ gave His body and His blood for me,
Now let me give this gift to thee.
Take these eyes and let them see.
Let this skin feel again and be.
Accept this organ to make her whole,
This blood to speed him on his way,
Then Blessed Lord, receive my soul.

-Herbert Nelson

*Contributed by Tennessee Donor Services



Suggested Hymns

The following list of hymns is a start in your efforts to locate appropriate hymns from your own religious tradition that bring the message of hope and giving that organ, eye and tissue donation and transplantation provide.

- "I'll Praise My Maker While I've Breath"
- "Amazing Grace"
- "Bless Me Now"
- "Come, Sinners, To the Gospel Feast"
- "Jesus, Lover of My Soul"
- "Have Thine Own Way, Lord"

*These hymns were compiled as suggestions from our colleagues in the donation and transplantation community from across the United States.



Sample Bulletin Statements

Individuals living in both Ohio and West Virginia can register their donation decision via the Lifeline of Ohio website

We have dedicated this weekend to recognizing the importance of giving the Gift of Life through organ, eye and tissue donation. By signing up you will have the opportunity to save countless lives through donation. "Heal the sick...freely ye have received, freely give" (Matthew 10:8). Please consider the difference you can make by becoming a donor. For more information about registering as donor please visit www.lifelineofohio.org or contact Lifeline of Ohio at 800-525-5667.

Give the Gift of Life. This weekend we are celebrating our religion's support for organ, eye and tissue donation. To learn more about the many lives you can save and heal, we encourage you to visit www.lifelineofohio.org or to call Lifeline of Ohio at 800-525-5667.

Donate Life. Take a moment to discuss organ, eye and tissue donation with your family. Please consider making this wonderful gift in God's name. You can register online at www.lifelineofohio.org.

Today, our goal is to come together and recognize our religion's support for organ, eye and tissue donation. By registering as a donor, you are offering hope to the growing list of Americans waiting for a transplant. For more information on donation or to join the Donor Registry visit www.lifelineofohio.org.

Our congregation supports organ, eye and tissue donation and recognizes the life-giving benefits it provides for others. Please consider how the simple act of registering will change the lives of others who have a great need. Help others live a full life by registering at www.lifelineofohio.org.

Seeing the face of every transplant recipient is a testament to the impact of organ, eye and tissue donation. One organ donor can save up to eight people and one tissue donor can heal up to 50 lives. "Give life that others may live more abundantly" (John 10:10). For more information contact Lifeline of Ohio at 800-525-5667 or visit their website at www.lifelineofohio.org.

Today we are showing our support for organ, eye and tissue donation. Every year thousands die because the Gift of Life is too seldom given. The Gift of Life is free to give, and can literally mean life or death to someone in need. So Donate Life! For more information, visit www.lifelineofohio.org.

Help others find a chance to live a full life. Share your life, share your decision. Register today to be an organ, eye and tissue donor at www.lifelineofohio.org or call Lifeline of Ohio at 800-525-5667.



Prayer

Here is a sample prayer that clergy members may like to incorporate in a service. It can also be included as a written prayer in a weekly bulletin.

O God,

We thank Thee for the gift of life. May we always cherish this gift and protect it in the cradle of responsibility.

May we understand that our bodies are the houses of Thy infinite spirit.

The mortal house is a temporary abode, but within is the brilliant light of eternity.

Every chamber is a repository of vitality. Each is a place of life. Together, they form a temple of God.

Amen.

Benediction

Here is a sample benediction a clergy member may like to include at the end of a service.

As we go from this House of Worship, may we take with us the words and the spirit that our faith offers us.

Here, we learn of and sing praises for the gift of life. We declare that while we live, our bodily form is the vessel that receives God's light. May we be worthy bearers of that light in bodies which are strong and healthy.

From our eyes, may the light shine brightly so that in the darkness we may see the needs of others.

Through our ears, may we hear beyond the noise of self-interest to the calls for help from those in need.

May our hearts beat with compassion and our arms be strong in reaching out to lift up those who stumble.

And after life has gone from us, may we still remain the messengers of Thy light. May the sparks housed within us, because of our offering of love, become the flame of life for others.

Amen.

***Contributed by Tennessee Donor Services**



Sample Sermon - Baptist

"Organ Donation: A Biblical Perspective"

An act of redemption

This world has not turned out as God intended. God, the creator, suffers at the condition of His handiwork. The world as we see it today hardly resembles the perfect creation that God spoke into existence. Crime, hunger, death, and disease were not present at creation, but due to man's fall in the garden, adversity has found a home in every human soul.

God the creator invites all those who would be His to suffer with Him. We are compelled to bear our burdens with the purifying hope that suffering will not have the last word. Even the most timid Christian must stand on the promise that ultimate and unconditional triumph awaits those that love the Lord. Our faith must fasten on the fact that no matter how severe the suffering, God will redeem the situation and utilize it for our good.

Since suffering is inevitable for both God and man, God has created a redeeming value for suffering. The goodness of God will allow something positive to come out of a negative situation. God's greatest demonstration of this redemptive process is realized in His son. The death of Jesus Christ resulted in the redemption of the world. His finished work at Calvary restored the broken fellowship between God and His most precious creation, man. God had rescued creation and mankind from hopelessness with His redeeming love. Christ suffered the loss of His life, but it became the seed of the world's hope and joy.

Sooner or later suffering and sorrow comes to every home. No conditions of wealth, culture, or even religion can prevent it. But the losses and griefs of life have been intended to leave behind an abundance of character and blessings that will make eternity richer. In a Christian home, sorrow should always leave a benediction. It should be received as God's messenger, and when it is, it will always leave a blessing.

Some treasures must be mined. They have to be discovered, realized. Blessings are often shrouded behind the veil of overwhelming grief. There are some tough places in this world, but nothing compares to the intensive care waiting room, where high levels of emotion and active grief can barricade any offer of redemption. Unfortunately, the only time donation advocates can approach a family about organ and tissue donation is in the midst of their grief and sorrow. Many people can only see grief as an enemy to whom they will refuse to be reconciled. They feel that they can never be comforted. For many families who consent to organ donation, it is a way of redeeming the loss of a loved one. In a situation where you feel victimized, the decision to donate gives the family a feeling of being in control. It gives life to others. Organ donation has helped families deal with their grief by bringing something positive out of a seemingly negative situation.

Not everyone dies in a way that allows vital organ donation. In fact, only a small percentage of people who die can be organ donors. If the decision ever becomes ours to consent for organ donation, we should consider why God has allowed such an opportunity.

The sweetest songs that have ever been sung have come out of fire. Sorrows should not be wasted. We should yield our rebellion, accept our suffering, and discover if it has some mission to perform, some gift to give, some golden fruit to enjoy, some redeeming value.

A sweet fragrance in the house

In Mark, Chapter 14, we have the marvelous account of a woman breaking an expensive alabaster vase filled with spikenard, a priceless perfumed oil, and anointing Jesus with all of it. Her extravagance was criticized by Judas Iscariot and others in the house. But our Lord praised the sacrificial giving of this woman and declared her deed a memorial. Suppose she had left the expensive oil in the unbroken vase? Would there have been any mention of it? Would her deed of careful keeping and self-preservation been told all over the world? She broke the vase, poured its contents forth, lost it, sacrificed it, and now perfumed incense has drifted into every home where this message has been heard. We may keep our life if we will, carefully preserving it from waste, but we shall have no reward. However, if we empty it out in loving service, we shall make it a lasting blessing to the world, and it shall be well spoken of forever.

By donating organs, we unselfishly pour out the fragrant gift of life upon those awaiting a second chance at life through transplantation. The sweet fragrance of sacrificial giving will flow into the homes of transplant recipients whose lives were saved and/or improved through the gift of life.

The donation of organs should not only be regarded as a medical or a secular good deed but also as a religious, sacramental extension of Christ's own life-giving sacrifice. Organ sharing is consistent with the beliefs of all major religions and is viewed as an act of charity, fraternal love, and self-sacrifice.

The cross of Christ is not only substitutionary, but it is also representative. His life of humility and unselfishness should become a prototype for those who bear His name as Christians. We should follow His example by giving the gift of life so that others may live life more abundantly.

The liberating truth

Unfamiliarity with the truth concerning the donor process will hinder the decision to choose life in the face of death. Misconceptions, myths, and mistrust of the medical community will eclipse our perspectives and leave us fearful and ignorant of the facts. God tells us that His people perish because of the lack of knowledge. People are indeed perishing, particularly African Americans. African Americans are less likely to consent to organ donation than whites, but much more likely to develop kidney failure. Another truth is that African Americans have an unidentified biological susceptibility to hypertension and diabetes, the major causes of kidney failure. If more African Americans would donate, it would provide better matches and increased chances of survival for other African Americans.

The misconception, "I need all my organs intact in order to get into heaven," is not scriptural. The Apostle Paul writes in I Corinthians 15:50 that "flesh and blood cannot inherit the kingdom of God." In eternity we will not have or need our earthly bodies. Old things will pass away and all things will be made new.

There is also some mistrust in the medical community. The myths that one could be declared dead prematurely just to gain organs or that you won't receive top medical care if you have signed donor card are flights from reality. The fact is that no one becomes a donor until all lifesaving measures have been exhausted. An open casket funeral is possible with any type of donation. There is no cost to the family for organ and tissue donation. If we would seek the truth about organ donation, the truth will liberate us not only to accept but to give the gift of life. "And ye shall know the truth, and the truth shall make you free." (John 8:32)

Through Christ's spirit we are all baptized into one body, whether we be Jew or Gentile. In sharing one body, we cannot isolate ourselves from the hurts of humanity. We are called upon to "bear ye one another's burdens." While we can't save the world, we can sign donor cards on the back of our driver's license. To become a vital organ donor is to give life to as many as eight recipients. A tissue donor can help as many as 50 people.

Should you decide to give the Gift of Life, discuss it with your family; let them know your wishes. Death, especially our own, is not something that we love to talk about, but in the last 2000 years no one has been able to escape it.

Death need not be the final comment of our lives. Instead of one stone marker at the head of our grave, there could be living memorials, real people with real families whose lives have been put back together through the Gift of Life. This is Christianity at its best: sharing one's own life for the purpose of helping someone else.

God, the creator of this world, has placed us as stewards of His creation. Being stewards, we cannot ignore the imperative to heal found in Matthew 10:8, "Heal the sick ... freely ye have received, freely give."

Give the Gift of Life; it's the chance of a lifetime.

By the Rev. Irvin Lance Peebles



Sample Sermon – Baptist

"Life Before Death"

There is as much mystery about life as there is about death. In this western world of ours, we never really treat either of these realities with the respect that each of them deserves. Our acquired habits, customs, and attitudes tend to make light of life and death; attempts are too frequently made to gloss over the only two certainties we have: life and death.

It is a painful exercise to watch generation after generation simultaneously disrespect life and death until each of them smacks us back into universal reality. It is no secret that societal painkillers blunt life, making people think all things are made possible with chemicals, legal and otherwise, in order to cope. Then, too, there is the ultimate painkiller—suicide. Neither of these choices corresponds to understanding, living, and respecting life. Both may appeal to some, but that is not an answer for many. It never has been, nor will it ever be.

Life's questions, its challenges, its pains, its hopes and triumphs reach beyond the immediate context of the individual, family, or community. We are constantly searching for answers, though at times they are just that—answers, not solutions. Answers are not solutions, only ways to them. And in order to move toward solutions, we need life. We need life even in the middle of terrible hardship and pain. Without life there can be no answers and clearly no solutions to life's problems and challenges.

Part of the social means of coping with life's hardships was the church's emphasis on "life after death." That the suffering "servants" need not worry about the here and now; pain is only for a season. It was said "the heavier the burden, the brighter the crown." Of course, we know that is nonsense in its purest form. But echoes of those words are still present. For the church it is important to live and practice the understanding of life taught by Jesus in the here and now.

In the text (John 10:10) Jesus uses a metaphor for death. A thief, thief in the night, as it were. Death is like a thief—cunning, watching for another victim, universally detested. Stealing something of value, something it will never have on its own. That is like death—approaching unaware, victims largely unprepared, unexpected in the "normal" course of things.

[Death] robs just like a thief; it robs the riches of life, health, and even youth because it robs life itself. No one knows this as sharply as those who are called upon to donate a loved one's organs after an unexpected death.

The "world" has caved in, life has been lost, the future denied, and anguish is all consuming. There is no easy way to approach people in this situation of human tragedy. In actual fact, one suspects that is a matter of case by case, family by family.

The "miracle" of transplants is one thing. Our having the vocabulary to address grieving survivors is another. We are yet to have the full language, the words to adequately convey the transplant message except on a pathway that still is not complete.

It is almost solely through confronting reality, confronting life and death with courage and sensitivity, that we can have a vocabulary that will match the progress in transplants. This science will continue to develop; it will move on. We have to see to it that our words and our actions keep it human and move with it.

Giving permission is an act that contributes to the legacy of life. It emphasizes "life *before* death." It is an act of love that gives back to others what death took away; it gives back life. [Organ] donors have been known to save [the lives of] as many as eight other people who would have been without hope had not the transplants taken place.

Such a gift is really treating life and death with the seriousness each demands. It, in a sense, is a celebration of life itself, another act of creation. We need to give thanks in the language of God because with each new day we can take it as God's personal invitation to each of us on this planet earth that we have an opportunity to try and try again until we get it right. And what is it that we need so desperately to get right? That God's will be done on earth as it is in heaven, that we as human beings have been ordained to have life and have it abundantly.

By the Rev. Archie Le Mone



Catholic Statements on Donation

Pope John Paul II

“Blood and Organ Donors”

(August 2, 1984)

The Pope Speaks, 30:no.1, 1985, pp. 1-2.

“Above all, I appreciate the purpose which has united and mobilized you: namely, to promote and encourage such a noble and meritorious act as donating your own blood or an organ to those of your brothers and sisters who have need of it. Such a gesture is the more laudable in that you are motivated, not by a desire for earthly gain or ends, but by a generous impulse of the heart, by human and Christian solidarity – the love of neighbor, which forms the inspiring motive of the Gospel message, and which has been defined, indeed, as the new commandment.

In giving blood or an organ of your body, you may always have this human and religious perspective: may your gesture be made as an offering to the Lord, who identified himself with those who suffer, either by sickness, accidents on the highway, or mishaps at work. May it be a gift made to the suffering Lord, who in his passion gave himself completely and poured out His blood for the salvation of mankind.

If you also include this supernatural intention, your humanitarian gesture, already so noble in itself, will be elevated and transformed into a splendid testimony of Christian faith, and your merit will certainly not be lost . . .”

“Many Ethical, Legal, and Social Questions Must Be Examined in Greater Depth”

(June 20, 1991)

Dolentium Hominum, Vatican Press, 1992, n. 3, pp. 12-13

“With the advent of organ transplantation, which began with blood transfusions, man has found a way to give of himself, of his blood and of his body, so that others may continue to live. Thanks to science, and to the professional training and commitment of doctors and healthcare workers, whose collaboration is less obvious but no less indispensable for the outcome of complicated surgical operations, new and wonderful challenges are presented. We are challenged to love our neighbor in new ways; in evangelical terms, to love “to the end” (John 13:1), yet within certain limits which cannot be exceeded, limits laid down by human nature itself.

Above all, this form of treatment is inseparable from a human act of donation. In effect, transplantation presupposes a prior, explicit, free and conscious decision on the part of the donor or of someone who legitimately represents the donor, generally the closest relatives. It is a decision to offer, without reward, a part of one's own body for the health and well-being of another person. In this sense, the medical action of transplantation makes possible the donor's act of self-giving, that sincere gift of self which expresses our constitutive calling to love and communion.”

Pope John Paul II
Encyclical: For a New Culture of Human Life
(Par. 86)
March 25, 1995

“Over and above such outstanding moments, there is an everyday heroism, made up of gestures of sharing, big and small, which build up an authentic culture of life. A particularly praiseworthy example of such gestures is the donation of organs, performed in an ethically acceptable manner, with a view to offering a chance of health and even life itself to the sick who sometimes have no hope.”

Summary of Published Statements on Organ Donation

From http://www.the-tidings.com/2005/0902/organ_text.htm

Organ Donation – the life-saving agreement

By Brenda Rees

Published: Friday, September 2, 2005

- Pope Benedict XVI stated, “To donate one’s organs is an act of love that is morally licit, so long as it is free and spontaneous.”
- In his 1995 encyclical *Evangelium Vitae*, Pope John Paul II described organ donations as ‘everyday heroism.’”
- “A particularly praiseworthy example of such gestures is the donation of organs, performed in an ethically acceptable manner, with a view to offering a chance of health and even life itself to the sick who sometimes have no hope.” (*Evangelium Vitae*, n. 86)

From <http://www.cwnews.com/news.viewstory.cfm?recnum=35044>

Pope encourages scientists to define “brain death”

Catholic World News

- “In a letter to the Pontifical Academy of Sciences, made public by the Vatican of February 3, the Pontiff says that the Church has consistently supported ‘the practice of transplanting organs from deceased persons.’ The Church has also ‘encouraged the free donation of organs,’ he adds, while emphasizing ‘the ethical conditions for such donation.’”



Sample Sermon - Catholic

"Eulogy of an Owl"

Scriptural texts

- A. Resurrection passages: Matthew 28:1-20; Mark 16:9-20; Luke 23:35-48; John 20:1-29
- B. Healing miracles of Jesus: John 5:19, 9:1-12; Luke 5:12-26, 6:6-11

Depending on the occasion for this sermon, your introduction and your lead into the opening story may vary. For example, for a funeral: "My eulogy today for (the deceased) will begin with a story, titled 'Eulogy of an Owl.'"

If used at Easter, one might start by saying "I wonder if anyone thought about what would have been appropriate to engrave on a tombstone for Jesus. I wonder if anyone has thought about a eulogy for Him. Maybe the best eulogy we can find for Jesus is the entire New Testament, which reveals His wisdom, His generosity and sensitivity, His strengths, and His accomplishments. This Easter morning I would like to begin by reading an interesting eulogy that relates to today's celebration. It is titled "Eulogy of an Owl" and is taken from [the book] *Paul Harvey's The Rest of the Story*".

His name was Walter Elias, a city boy by birth, the son of a building contractor.

Before Walter was five, his parents moved from Chicago to a farm near Marceline, Missouri. And it was there on the farm that Walter would have his first encounter with death.

Walter was only seven that particular lazy summer afternoon, not much different from other afternoons. Dad was tending to farm chores; Mother was in the house.

It was the perfect day for a young fellow to go exploring.

Now just beyond a grove of graceful willows lay an apple orchard. There Walter could make believe to his heart's content that he was lost, which he never was, or that he had captured a wild animal, which he never had. But today was different. Directly in front of him, about thirty feet away, perched in the low-drooping branch of an apple tree and apparently sound asleep--was an owl.

The boy froze. He remembered his father telling him that owls rested during the day so they could hunt by night. What a wonderful pet that funny little bird would make. If only Walter could approach it without awakening it and snatch it from the tree.

With each step, the lad winced to hear dry leaves and twigs crackle beneath his feet. The owl did not stir. Closer...closer...and at last young Walter was standing under the limb just within range of his quarry. Slowly he reached up with one hand and grabbed the bird by its legs. He had captured it! But the owl, waking suddenly, came alive like no other animal Walter had ever seen. In a flurry of beating wings, wild eyes and frightened cries, it struggled against the boy's grasp. Walter, stunned, held on.

Now it's difficult to imagine how what happened next, happened. Perhaps the response was sparked by gouging talons or by fear itself. But at some point the terrified boy, still clinging to the terrified bird, flung it to the ground and stomped it to death.

When it was over, a disbelieving Walter gazed down at the broken heap of bronze feathers and blood. And he cried. Walter ran from the orchard but later returned to bury the owl, the little pet he would never know. Each shovelful of earth from the shallow grave was moistened with tears of deep regret. And for months thereafter, the owl visited Walter's dreams.

Ashamed, he would tell no one of the incident until many years later. By then, the world forgave him. For that sad and lonely summer's day in the early spring of Walter Elias' life brought with it an awakening of the meaning of life. Walter never, ever again, killed a living creature. Although all the

boyhood promises could not bring that one little owl back to life, through its death a whole world of animals came into being.

For it was then that a grieving seven-year-old boy, attempting to atone for a thoughtless misdeed, first sought to possess the animals of the forest while allowing them to run free—by drawing them.

Now the boy, too, is gone, but his drawings live on in the incomparable, undying art of Walter Elias ... Disney. Walt Disney.

And now you know the rest of the story.

I'm sure that all of you recognize the name Paul Harvey, a radio commentator from Chicago who uncovers a lot of fascinating background information on famous people and uses captivating words and phrases to tell us "the rest of the story." I'm sure you all recognize the name Walt Disney. You probably all have a favorite movie of Walt Disney's and probably a favorite Walt Disney character. Mine happens to be Peter Pan. I dream a lot about flying. Flying with my arms outstretched, not in front of me, like Superman, but to the sides, like Peter Pan. I think I fantasize about being eternally youthful and always taking care of those who are in need. I have to be careful though, especially lately, because of that new book *The Peter Pan Syndrome*. But I do enjoy Walt Disney and his work. As Paul Harvey wrote, "All the boyhood promises could not bring that one little owl back to life, through its death a whole world of animals came into being." From a tragic event in the early days of Walt Disney came life, and Walt Disney left a legacy of fantasy, laughter and joy."



Statement on Donation – Reform Judaism

Union of American Hebrew Congregations
Department of Jewish Family Concerns
Rabbi Richard F. Address, Director
Committee on Bioethics – June 3, 1997

The Union of American Hebrew Congregations (UAHC), through its Committee on Bioethics, is committed to the concept of Organ Donation and Transplantation as a positive example of the traditional Jewish value of P'kuach nefesh (the saving of a life).

Through the development of the UAHC's Matan Chaim (The Gift of Life) program, the UAHC has been able to develop programmatic and educational material for use in its member congregations which illustrate and promulgate involvement in issues of Organ Donation and Transplantation.

The mood of Reform Judaism, through its rabbinical (Central Conference of American Rabbis) and congregational (Union of American Hebrew Congregations) arms reflects the idea, based upon our understanding of Jewish tradition and values; that involvement in this issue is, in truth, a contemporary Mitzvah.



Sample Sermon – Jewish

"Don't Hang Up the Phone, it's your Covenant Calling"

It was a little over a month ago. I remember the phone call quite well. I was settling into a comfortable position at my desk, reflecting on the holidays, thinking about what message I would offer this Rosh Hashanah. What fault would I force others to confront? What issue would I use to make the congregation squirm in their seats? And then the phone rang... On the other line was a member of our congregation who works with the U.S. Department of Health and Human Services as director of the Division of Organ Transplantation. Why was she calling me?

The voice on the other end said to me, "I want to talk to you about a professional issue." Immediately I thought to myself, "Uh oh, what did I do now?" "No, no," she assured me. I wasn't in trouble. She was calling because she wanted me to give a sermon on organ donation. Had I thought at all about organ donation? And I must confess to you that only one thought went through my mind at that moment—hang up the phone. Suddenly, I didn't want to be talking about this subject at this time.

This member told me about the thousands of people across America that are waiting for transplants. About the many, many who will die because there are an insufficient number of donors to meet the need. She shared with me that Jews were among the two groups with the lowest number of organ donors, even though the strictest movements in Judaism permit donations in some cases.

She explained how there are many people who die tragically who would have wished to donate their organs to save a life but couldn't because they never shared that information with their families while alive. Well, I was feeling pretty overwhelmed now and more than a bit depressed, and then to prove her point she asked me if I knew what my wife's wishes would be if she were ever in an accident. And I quickly replied that it wasn't the type of question one liked to ask his wife over dinner at the end of a long day. And then I was overcome with an even stronger desire to hang up the phone, to leave the problem alone, to make the question go away.

Explain to me how I can sit in bed and read about thousands of people dying in Rwanda and be disturbed but not really have any trouble sleeping through the night, but I can't discuss the topic of organ transplantation in the middle of the day without wanting to jump out of my skin. Somehow this is different, isn't it? This is my life, my death, and who really wants to make decisions about that anyway? If we talk about it, then we make it real.

On Rosh Hashanah morning we read a strong and disturbing piece of liturgy, the prayer *Unatenah Tokef*, "Let us proclaim the sacred power of this day for it is awesome and full of dread.... You, O God, are judge and arbiter.... [O]n Rosh Hashanah it is written, on Yom Kippur it is sealed ... who shall live and who shall die; who shall see ripe age and who shall not; who will die by fire and who by water; who by hunger and who by thirst, who by earthquake and who by plague."

What is this prayer that tells us that God seals our fate this day? What do we make of this list of ways to die? And yet we know that we are lucky to be here. We all know people who have died in the past year. We are aware of the random nature of our lives. And the prayer *Unatenah Tokef* says yes, our lives are random. We don't know who will live and who will die, so it is time to get serious. We have been given another chance. We stand here today alive, lucky to be alive, so what are we going to do about it? Hope that we get lucky another year or face up to the sacred responsibility that awaits us. This prayer reminds us that today is a day of decision, today is a day when we face the unpleasant, but real, decisions that we avoid the rest of the year.

Now you're thinking, "Rabbi, it's Rosh Hashanah. Some of us are here with our children. What are you talking about? Organ transplants? Death? You're scaring my kids. Just tell us a nice story about the round challah and let us go eat a happy holiday meal.

There is a legend about King David, that when he was a young man he learned that he would die on a Shabbat. And what do you think his favorite ceremony was? Havdallah, the ceremony that marks the end of Shabbat. The legend tells us that David couldn't get to Havdallah quickly enough.

Isn't that a lot like us? We say to ourselves, "We made it to another year, we're alive and hopefully healthy, *Mazel Tov*, *L'chayim*, let's give thanks and go eat some brisket." But Rosh Hashanah is not thanksgiving, and we do not live only for ourselves. We live in covenant with the people around us—our spouses, our children or grandchildren, our parents and grandparents, or our brothers and sisters. We all have people we made covenants with, people who depend on us as we depend on them. Yes, *Mazel Tov*, congratulations to all of us; we've made it to another year, but now it's time to get serious. It's time to face up to some major decisions; it's time to honor our role in the covenants we have made with our many partners in life. These high holidays are called *Yamim Noraim* in Hebrew, Days of Awe. We need to use this time to successfully avoid the rest of the year.

And organ donation is a great example. Too often, when asked about this issue, we hide behind the answer that we don't think Jewish law allows that. But rather than pursue and study if this is true, we hide behind a vague answer that we think is true. In reality, there are many different opinions on this issue. But for the majority of Jews in America, there is agreement that organ transplantation is permitted to some degree when the saving of a life is involved. *Pikuach Nefesh*—the saving of a human life—is one of the most urgent *Mitzvot* in Judaism, and based on the statistics, you can rest assured that anything taken from you will be used to save a life. While organ donation makes us uncomfortable and forces us to think about what we want done to our bodies when we die, the truth is that it may be the closest thing we have to immortality. A part of us living on in the body of another person who has been given a miraculous second chance. And who knows, maybe one of us or our loved ones or friends will one day find themselves on the other end, surviving only because someone else had that conversation with a loved one in advance and said to him or her, "These are my wishes if something ever happens to me."

What about living wills? How many of us know someone who said in their lifetime, "If I were ever in a coma, I would want to die," only to later end up on a respirator, placing a burden on their family they desperately wanted to avoid. All because they didn't really discuss the issue properly with their family. It is amazing how you and I can worry about car pools and seat belts and other day-to-day safety details while we drive around with the future of our families in our hands. Because if, God forbid, something happens to us and our families don't know what to do, we will burden them financially and emotionally in ways that could ruin them for the rest of their lives. We warn our children about drinking and driving, and we beg them to behave cautiously. Then we proceed to drive around every day with unresolved issues that are just as dangerous to the security of their futures.

There are so many issues to be discussed, so many important decisions to be made. How have we managed to avoid them for so long? We put away money to help out those we love when we are gone, we take out life insurance policies, but how many of us have bought a cemetery plot? How many of us have confronted that terrifying reality of our own mortality and saved our own family thousands of dollars in the future? A future in which we will not be around to help out.

I recently read about a 22-year-old woman who had made clear to her family her intention to be an organ donor. It seemed unusual for a 22-year-old to have such a deep awareness of her own mortality and the foresight to deal with it. Little did she realize just how soon her own life would end. She was killed in an accident, and her heart was given to a man who had been waiting 4 years for lifesaving surgery. He was running out of time, and her gift kept him alive. The man who received her heart was her father.

We have the power to help the world; we have the power to help our families, but we won't help anyone if we don't talk about the decisions, if we don't make them real. When you put down the prayer book and leave this building, talk about these issues; make them real. On your way out, there are pamphlets on organ donation. Take one, read it, discuss it with your family or friends. It will offer clear answers to any of the questions you may have. There is another book printed by the Union of American Hebrew Congregations called *A Time to Prepare*. It is about living wills and funeral arrangements. It has forms and information to help you understand anything you may be unsure about writing a living will. It will make you uncomfortable now, but it will help your family later. Call us at the temple, tell us you want one, and we will order it for you.

It's time to talk about these things. It's time to make them real. Let's face it. How many of us had moments in the last few years where we were worried about our own health? Where we had a real scare? And yet what have we done about it? If I had a car that broke down in the desert and I didn't have AAA or any other protection, wouldn't you expect me to purchase some as soon as possible afterwards? And yet, you and I keep living our lives on borrowed time, and we're not purchasing the proper insurance, we're not making another year. It is time to face our destiny while we are healthy. I know that this is painful, and I'm not trying to tell you what the right decisions are in each of the cases I have mentioned, but I know that we have to start asking the questions; we have to start making the decisions.

When I came home from that eventful phone call with Judy Braslow, I was very excited. I was fascinated by my reaction to our conversation and thought I had the makings of a great Rosh Hashanah sermon. I explained all this to my wife, Mimi. And when I was done, she looked at me cautiously and said, "So, are you going to make some big decision *now*?" I quickly answered, "No, no, I have to write this sermon first. I just wanted to let you know what I was going to speak about on Rosh Hashanah."

I know that these are not the easiest things to talk about, and I do not know what my final decision will be, but I do know that the time is coming when I must ask the questions. It is a covenant I made when I agreed to marry Mimi, and I intend to honor it. On this Rosh Hashanah, may we all find the strength to fulfill the covenants that we have made with our loved ones, may we find the courage to make the hard decisions that cry out for a response. Amen.

By Rabbi Brian Zimmerman



Sample Sermon - Jewish

There is a story that God was observed in deep thought by the angels in the Heavens. They guessed that He was planning something very important, but could not guess what it was. Then, it happened! It was miraculous. Out of nothing, God created a world, the Heavens and the Earth. And, over the course of six days, or a split second in angel-time, He filled the earth with all sorts of trees, bushes, animals and birds. There were beautiful mountains, majestic oceans, jungles and winding rivers.

After watching all of this, the angels busily talked among themselves. They thought that what they had seen was very grand. Obviously, God was pleased because he repeatedly evaluated it as being "very good." But, somehow it seemed incomplete. And they said so! God, of course, heard their comments. He laughed and told them that He was not yet finished. He turned away from the angels, looked at the Earth and created man. God then said, "I am finished."

The angels stood in wonder. Again, they spoke among themselves. But who would ask the question that was on their minds? They drew lots. Gabriel would ask. "Lord of Creation, what is this creature and what shall it be called? What is its purpose?" God answered, "He is called man. His purpose is to take care of the world I have created."

This little story is instructive. God created the world and that which is in it. But, man is to watch over it, to care for it, as our Scripture states, "to have dominion over it." From the moment he breathed life, man has carried this responsibility and privilege. He has been the guardian of God's creation. God saw immediately that man, knowing that he had limitations, would need a partner because the responsibility was so immense. And God took a rib from the man and with that rib, performed the first transplant and created woman. A part of man's body made life possible for another. The first transplant!

One may conclude that man and woman are even more than guardians of the Earth. They possess the ability to preserve the lives of others, to give the precious gift of survival. All religious traditions value life. The Hebrew Scriptures and the New Testament exhort us to love one another and to be good stewards of all we are and all we possess. We are not free to place the responsibility for the condition of our world or the quality of life on God's shoulders. "I have placed before you the blessing and the curse, good and evil. Therefore choose life," scripture tells us. The key word is "choose." The condition of life in this world is our God-given responsibility. Its quality is our choice.

Through the ages, since that miraculous, creative act, we have worked with the tools which the Creator provided us to tend His garden and bring forth the beautiful bud and brilliant flower of the quality of Life. The Garden of Life lies untended and the beauty of Life remains only a possibility when we do not take the hoe and the rake in hand. Man and Woman have done well in tending the garden. We, through, our ingenuity and our own creative instincts, have gone far beyond those earlier gardeners. We have developed the tools to make the Harvest of Life more abundant. We call those tools "Technology." And technology has provided us with the ability to preserve a life which has withered.

In the world of horticulture, a portion of a hearty plant might be cut away and attached to a weaker plant to enrich the second plant and to enhance its life. Such a process is called grafting. Our creativity extends this remarkable process to human beings. We have the ability to transplant organs of the human body to sustain life in another human being. Replacing parts of the human body is an interest that dates back to the ancient Egyptians. History records that a leg of a deceased Moor was transplanted to a Christian who had lost his leg. A medical journal in 1881 discussed the first skin transplant.

But great success in transplant surgery has been rather recent. Edward Zirm, an Austrian ophthalmologist, in 1905, restored sight through corneal transplant to a workman who had been blinded by lime. Now tens of thousands of corneal transplants are performed annually across the United States. Add to this number the tens of thousands of organ transplants and the hundreds of thousands of tissue transplants that have occurred. These are impressive numbers because of the lives that have been saved and the improved quality of life they have given to the suffering.

But, lest we be complacent, we should note that many more people desperately need transplants. Organ donation is a process misunderstood by many. There is concern with the possible mutilation of the body of a deceased donor or that it might cost the donor's family a great deal of money. The facts are the donor organs are surgically removed as in an operation, and the donor is "closed." Normal funerals can be held. There is absolutely no cost to the donor's family.

Some have expressed the concern that the hospital staff might not try everything possible to save the life of a potential donor. The truth is that the transplant team is not involved at all until all life-saving efforts have failed and death has been established after the brain has ceased to function. There are compelling reasons to become an organ and tissue donor. There can be no higher response to the scriptural commands to love our neighbor and to care for each other. There is great satisfaction, perhaps a sense of peace, even in the face of sorrow, in knowing that something of yourself or something of someone you love will make life possible for someone else and live on in another.

I recently heard a story of the death of a young boy and his gift to another. A 15-year-old young man was struck on his bicycle by a car. He sustained severe head injuries and extensive brain damage. His doctor determined that there was no hope for the boy. He was declared clinically "brain dead." Naturally, the boy's parents were in shock. The doctor approached the parents and gently told them that they could donate their son's organs for transplant with the potential of their son helping others to live. The family chose to donate. Their decision was a difficult one. Both parents told the hospital chaplain that this is what their son would have wanted because he was "that kind of a boy." They found comfort in knowing that their son's eternity was of the spirit and of the body.

When one reflects on it, it seems remarkable that this tender of the Garden of Life has fulfilled so well the charge that God gave him that he has advanced to the point where, through technology and his own body, he is able to extend human life. From the ability to save a life accrues the responsibility to do so. Having the technology to save a life and not to use it is to destroy a life. In the metaphor of the garden, to allow the menacing weeds to choke the life from the flower. The ability to save a life with the donation of an organ of our own body is a God-given ability. With the miraculous act of creation, God planted the potential to do so within us. Man, the gardener, has simply realized the potential.

Back in Heaven, the angels were still talking about God's act of creation, and evaluating it. A few dissident angels felt that it was an unnecessary act. Things had been fine in Heaven without the Earth. But, after they looked down on the earth from their heavenly station and noted the progress that man had made and how well he was tending the Garden of Life, the vast array of angels joined in a chorus with God and sang, "It is good." AMEN.

- Rabbi Howard Kaplansky
United Hebrew Temple, St. Louis, Missouri



Statement on Donation - The United Methodist Church

Policy Statement on Organ and Tissue Donation - 1984

WHEREAS, selfless consideration for the health and welfare of others is at the heart of the Christian ethic; and

WHEREAS, organ and tissue donation is a life-giving act, since transplantation of organs and tissues is scientifically proven to save the lives of persons with terminal diseases and improve the quality of life for the blind, the deaf and others with life-threatening diseases; and

WHEREAS, organ donation may be perceived as a positive outcome of a seemingly senseless death and is comforting to the family of the deceased and is conducted with respect, and with the highest consideration for maintaining the dignity of the deceased and his/her family; and

WHEREAS, moral leaders the world over recognize organ and tissue donation as an expression of humanitarian ideals in giving life to another; and

WHEREAS, thousands of persons who could benefit from organ and tissue donation continue to suffer and die due to lack of consent for donation, due primarily to poor awareness and lack of an official direction from the church;

Be It Resolved, that The United Methodist Church recognizes the life-giving benefits of organ and tissue donation, and thereby encourages all Christians to become organ and tissue donors by signing and carrying cards or driver's licenses, attesting to their commitment of such organs upon their death, to those in need, as part of their ministry to others in the name of Christ, who gave his life that we might have life in its fullness.

United Methodist Church Resolution regarding National Donor Sabbath

Text of: 31774-CS-NonDis-O as downloaded from www.umc.org following the General Conference 2000 held May 2012 in Cleveland, Ohio.

National Donor Sabbath

In the interest of urging members and others to consider becoming future organ and tissue donors, the United Methodist Church encourages its congregations to join the yearly ecumenical and interfaith celebration of National Donor Sabbath. Usually held two weekends before Thanksgiving, this national event is an expression of our Christian gratitude for the gift of life.

Congregations may choose a variety of ways to educate persons about organ and tissue donation. Examples of ways churches currently participate include developing special liturgies, bulletin inserts, sermons on the subject, and church school discussions.

Waiting lists for organ and tissue transplants are long and the need is great. National Donor Sabbath provides yet another way United Methodists can help save lives.



Sample Sermon - Methodist

"The Best of Things in the Worst of Times"

Scriptural text: Romans 8:28

I read about a young man from Florida University who played in the 1995 college baseball playoffs. In a crucial game, this player homered, drove in four runs, and made a key defensive play in leading his squad to victory over a higher-ranked team. What made his personal triumph all the more remarkable is that it came less than 48 hours after a great personal tragedy. This young man's girlfriend had been killed when her Ford Bronco rolled over on Florida's turnpike, tore through a guardrail, and dropped 25 feet into a canal. The baseball player attended the funeral mass for his girlfriend on a Friday morning, then was the hero of the game that afternoon. He said, "This was the hardest day of my life. And probably the best game of my life."

On the cornerstone of an old church in England, these words are inscribed: "In the year 1653, when all things sacred in the kingdom were either profaned or demolished, this church was built by Sir Richard Shirley, whose singular praise it was to do the best of things in the worst of times."

As a pastor, I've been intrigued and inspired by individuals who respond to negative situations with positive action. They meet overwhelming adversity with amazing ingenuity. They look for ways to redeem even the most hopeless circumstances. On the "hardest days" they seem to have their "best games." Somehow they summon the courage "to do the best of things in the worst of times."

I recently served for three years as a hospital chaplain in a trauma hospital in Houston, Tex. I came to identify with one of the characters in the popular television series "M*A*S*H"—the young Army clerk, Corporal O'Reilly. Of course, no one in the medical unit addressed him by his formal name. He acquired the nickname "Radar" because even in a noisy, hectic military camp he had the uncanny ability to hear helicopters from a great distance flying in with wounded soldiers.

Well, I developed "radar" of my own while serving as a hospital chaplain. Our institution had an air ambulance service called "Life Flight." From any point in the hospital I could hear the roar of the helicopter as it approached the landing pad carrying its critically ill or wounded passenger.

My "radar" was sensitive not so much to the sound of the chopper as it was to the pain and suffering the chopper would bear. Patients transported by "Life Flight" were victims of every conceivable tragedy—natural disasters, industrial explosions and fires, gunshot wounds to the head (many of them self-inflicted), gruesome automobile accidents, dangerously premature births.

When I heard the dreaded sound of the helicopter, I knew I would be paged momentarily to the trauma unit, perhaps to offer a silent prayer for the patient in the midst of frantic emergency treatment, perhaps to keep vigil with the patient's family members as they absorbed the shock of the incident and vacillated between hope and despair.

Late one night I was asked by the trauma team to be with the mother and father of a teenage girl who was blindsided in her car by a drunk driver. She had suffered irreversible head injuries and was given little chance to survive, much less to resume a normal life. As the parents poured out their anguish to me, I wept with them—in part because I, too, had a teenage daughter and felt my own vicarious anguish. Soon the attending physician entered the waiting room and began to speak to the parents in a halting, almost apologetic, way. He explained that they had done everything that could be done, but that their daughter's injuries were too severe to overcome. She

had just been pronounced brain dead. Later the doctor added, however, that her vital organs were still functioning because she remained on a respirator. Due to this unusual combination of circumstances, it was possible for their daughter to be an organ and tissue donor. The doctor proceeded to lay out the facts about donation without applying any pressure. He then offered to address their questions and concerns and give them adequate time to reach a decision.

For the next 45 minutes, this couple, already stricken with grief, struggled to make a decision they were unprepared to make. They had never thought about organ donation, for themselves or their loved ones. Now they were asked to make a decision regarding their own beloved child in the wake of a senseless tragedy, and to make it in the crucible of crisis.

The parents were initially skeptical and suspicious. They began to raise tough, even angry questions: *Was their daughter's death being hastened so that her body could be exploited for organs?* No, the doctor replied emphatically. She was already dead by every clinical definition, and the decision to donate was entirely up to them. *Would their daughter's body be mutilated? Would it be possible for her casket to be open at her funeral?* The doctor assured them that there would be no visible signs of the surgery to remove her organs and that an open casket would indeed be possible. She would be treated with utmost dignity and respect. Even so, the mother and father recoiled at the idea that any other physical damage might be done to their daughter. "Her body has already been through so much trauma," the mother said. "I don't know if I can stand putting her through anything else." The father added, "I remember holding her as a newborn baby. I want her to go out of this world the same way she came in, with her body as intact as possible."

The girl's parents were religious people, and, not surprisingly, they also raised religious questions. *Does the Bible shed any light on their dilemma? Is it possible to discern God's will in this situation? Does their own church tradition encourage or discourage organ donation?* The mother and father happened to be United Methodists like myself. I mentioned to them that our recent church pronouncements have strongly advocated organ and tissue donation as a "life-giving act." Because the technology for transplants is a recent development, the Bible is, of course, silent about this specific issue. Christ gave us the comprehensive commandment to love one another as he has loved us, but he left it to individuals to apply the law of love in particular situations. I suggested to the couple that a decision either way could be interpreted as a *loving* decision.

The mother and father continued to struggle aloud about their options. Then they asked to have a few minutes to talk privately and come to a conclusion. The doctor and I left the room and conferred about our exchange with the couple. We both surmised that they would reject the option of organ donation. Their heads seemed to be saying, "Organ donation is a good and helpful thing to do." But their hearts seemed to be saying, "Enough already! Let our daughter rest in peace."

Soon the father signaled that they were ready to talk with us again. And to our amazement they announced that they were consenting to donate their daughter's organs and tissues! I wondered to myself what caused them to overcome their caution and fear and reach a positive verdict. It wasn't necessary to ask. The mother and father proceeded to tell us why they made this choice. They viewed their daughter's death as a cruel, needless act. Nothing could make sense of it. Nothing could make her death good, in and of itself. But something good *could come out of it*. Their daughter's death could provide the gift of life for someone else. Moreover, they decided that donating their daughter's organs would be "life-giving" not only to a needy recipient, but to *themselves* as well. As parents they would find comfort and healing in the knowledge that their daughter's death had not been a total waste, that part of her physical self would benefit someone else on the brink of death.

As a hospital chaplain, I counseled numerous families facing the option of organ donation. Many declined to donate, and I never presumed to judge their decisions. Their reasons for declining were varied. However, those who consented to donate all voiced the same reason. In each instance they saw an opportunity "to do the best of things in the worst of times." They believed that their loved one's death would not have to be useless; that their own loss would somehow be transformed into someone else's gain; that their choice to donate would bring healing and life in the midst of death.

In his epistle to the Romans, Paul makes the audacious claim that "In everything God works for good" (8:28). No matter how negative or hopeless our circumstances, says Paul, God can produce a positive result. God can always salvage something good out of something bad. For most of us, the acid test of this credo comes with *death*, especially a premature, tragic death. Can anything good possibly come from a death as unjust and untimely as the death of a teenage girl at the hands of a drunk driver? According to Paul, the potential for good is always there as long as God is present in our loss and sorrow, and God is always present!

But how is this potential realized? How, in practical terms, does God work for good even in the bleakest circumstances of life and death? Part of the answer is that God accomplishes his work *through us*. We are called to become God's partners in the salvage business. As God empowers us "to do the best of things in the worst of times," God's redemptive purposes are realized.

Herein lies the deepest significance of a decision to donate organs and tissues. When we are faced with the worst of times—our own [imminent] death or the death of a loved one—we can choose to work with God in working for good. We can embody Christlike self-giving in the most tangible way possible. We can make our own deaths purposeful. Best of all, we can choose life for someone else. And we can make these choices *now*, while we are still able to think clearly and speak for ourselves, before we are incapacitated by crisis.

Frederick Buechner once compared the God of the Bible to the old alchemists—those ancient, primitive scientists who were always trying to take an inferior, impure material and transform it into gold. The testimony of faith is that God is able to pull it off! God can take even the worst—death itself—and somehow out of it, bring the best. "In *everything* God works for good." The wonder of it is that you and I can have a hand in this great work.

By the Rev. John Thomason



Sample Sermon - Presbyterian

Prepared by
Charles M Swezey, B.D., Ph.D.
Union Theological Seminary
Richmond, Virginia

For the Giving For Life Council, Inc.
1984

Sermon Outline – Giving For Life

Each pastor composes sermons differently. The following remarks are suggestions that may be useful. The outline refers to the Background Paper for Clergy but does not repeat its exposition.

You, of course, will have your own thoughts about your sermons, but you may find the following outline of points useful in developing it:

- a) A scriptural and theological grounding for Giving For Life;
- b) A statement of the need for giving blood and donating organs and tissue;
- c) A sketch of the available programs and an explanation of how to give;
- d) A conclusion relating the biblical and theological grounding of the Giving For Life theme with the voluntary dimension of the programs and the impact of giving.

COMMENTS ON TEXTS IN SCRIPTURE

The emphases of the Giving For Life program are so central to biblical religion that a wide variety of texts in Scripture could be used theologically to ground it.

1. Many texts deal with the centrality of the love of God and neighbor. Deut. 6:5 states the love of God theme. Lev. 19:18 states the love of neighbor theme. The two themes are linked in Matt. 23:37-40, Mark 12:27-31, and Luke 10:27. Romans 13:9 summarizes the second half of the Decalogue with the love-neighbor theme. See also Galations 5:14 and James 2:8.

I John 4:7-5:12 claims a relation between God's love, human loving, and the commandment of love. Both Philippians 2:4 and I Corinthians 10:24 restate the theme of neighbor love.

2. The perception that humans are created in the image of God, e.g., Genesis 1:26-28, is properly used to refer to the human capacity to act responsibly.
3. The image of the human body as a temple of the Holy Spirit in I Corinthians 6:19 is properly cited to refer to the proper use and stewardship of the body.

4. Many other texts could be cited, e.g., those concerning the obligation to give.
5. The parable of the Good Samaritan is distinctly suited to the Giving For Life theme. A brief analysis of this parable concludes these remarks.



Sample Sermon - Presbyterian

Charles M Swezey, B.D., Ph.D.
Union Theological Seminary, Richmond, Virginia
Excerpts from a paper prepared for the Giving For Life Council

RELIGIOUS DIMENSIONS OF GIVING FOR LIFE

The transfusion of blood and the transplantation of body organs are possible because of recent developments in medical technology. However, blood transfusions and organ transplantation also depend upon the willingness of persons to give or donate for the sake of others. Only if the new medical technologies are combined with one of the oldest themes of the Judeo-Christian tradition – concern for the other as neighbor – will persons be aided.

The opportunity to “love your neighbor as yourself” is portrayed as a positive human possibility and obligation in the Scriptures of both Judaism and Christianity. In both traditions, moreover, response to the neighbor is grounded in the prior perception of the reality of God.

Giving blood and donating organs express and embody concern for the other as neighbor. Christians and Jews interpret these voluntary acts, which depend upon generosity and self-initiative, as expressions of goodwill toward fellow human beings under God. Mutuality and human interdependence are gifts of God. There is no greater symbol of our common humanity, and probably no more direct expression of our belief that we are made in the image of God, than the fact that our organs can be transplanted from one body to another and that our blood can be transfused from one person to another. Our conviction is that persons are creatures similarly endowed by the Creator. We embody and express our common humanity under God by giving to others.

The free gift of body or blood fosters and expresses a sense of community. It serves a need and evokes the profound gratitude of recipients to other in the human community whom they have never met and on whom they depend. It strengthens the social fabric of interdependence in which we are all sustained by God.

THE IMPACT OF GIVING

The powerful symbol of the gift relationship may be used to describe four distinct benefits of giving blood and donating organs. A gift does not create servitude. It expresses reciprocity. Gifts must be given and received. A genuine gift is offered freely, but an offer does not become a gift if it is refused. It must be accepted. One thinks, for example, of engagement rings or the bestowal of presents at a child's birthday. Gift-giving and gift-receiving embody human interdependence.

The first and most visible result of giving blood or organs, of course, is its impact on recipients. Persons in need are helped, frequently in dramatic ways. The recipient of blood or organs is a life-giving and life-sustaining matter.

A second result of giving is its impact on the giver. People who give these gifts have a sense of doing something worthwhile. True gifts are motivated by a concern for others, not by a sense of moral superiority. This concern for others is captured by the phrase, "It is more blessed to give than to receive."

A third result of giving is its impact on the donor's family. Signing a donor document enables a person to make known his or her thoughts to the immediate family before death occurs. This saves a distraught family from having to make a last-minute decision just after a relative has died. The mutuality of clear communication before death enables a family to say with conviction, "That is what our loved one would have wanted." Signing a donor card is a gift to one's family.

A fourth result of giving is its impact on community. People who give blood or who plan to donate an organ at death have a sense of contributing to the well-being of others. Recipients of blood or organs speak with profound gratitude of receiving a life-sustaining gift. This sense of gratitude is one reason to keep the identity of donors anonymous. Anonymity prevents an unhealthy sense of dependence upon a particular person or family. This giving and receiving fosters a sense of community because individuals are sustained and nourished through relations with others whom they have not met. It expresses and embodies interdependent relations. The resulting sense of community is captured by the phrase, "Freely have I received from others, freely will I give to others."

A CENTRAL FEATURE OF THE PROGRAMS

The voluntary dimension of the programs through which blood and organs are donated is a key feature. Indeed, the significance of Giving For Life is destroyed if it is not done freely. Voluntary giving, a condition for human survival and flourishing, requires generosity and self-initiative.

The impact of this moral requirement may be discerned in both programs. People who receive payment for donating blood are not "giving" freely; they are motivated by selfish interests as much as by a concern for others. Moreover, selfish interests provide a reason to be untruthful about medical conditions that should bar a person from donating blood. The experience of blood programs throughout the world is that the most effective and efficient screening device for securing healthy blood is to make blood programs voluntary. Generosity is the foundation for the survival and flourishing of human life together.

The Uniform Anatomical Gift Act also has a voluntary dimension. The donation of organs at death is legal when the donor makes a voluntary decision before death occurs. This program differs from proposals that organs be routinely procured from all who die. The Uniform Anatomical Gift Act depends upon a concern for others and respects the human capacity to act voluntarily: It recognizes that persons express their humanity when they exercise self-initiative. Generosity toward others is a foundation for the survival and flourishing of human life together.



Sample Sermon Outline - Protestant

John 3:16

- I. The theme throughout the Bible is God giving of His life.
- II. The principle theme of the New Testament is Jesus giving of His life so we can live.
 - A. Jesus gave His life.
 - 1. No greater love demonstrated than this.
 - 2. No greater reward than giving so others can live.
 - B. Jesus gave His body that we may be whole.
 - C. Jesus gave His blood so we need not struggle for our own cleansing.

Luke 10:25-37

- III. It is understood that we love ourselves enough to know we are worthy to give of ourselves.
 - A. The command is to love one another as ourselves.
 - B. We would certainly want others to give of their material possessions, talents, and time to improve our life.
 - C. We should do unto others as we would have them do unto us.
- IV. Many are uncomfortable about what others think if we were to give to those in need.
 - A. But the Samaritan who had every cultural reason in the world not to help, did help.
 - B. Could we not/should we not be available to give to those in need of lifesaving procedures and gifts such as organs, tissues, and blood?
 - C. We do feel uncomfortable about giving, but reality points out we shouldn't be.
 - 1. Many people throughout history have cremated their bodies, as they saw no more need for the body.
 - 2. We need to remember, as the Moravians did, that death is the great equalizer.
 - a. We may be rich or poor materially, but at death we are all equal because we don't take it with us.
 - b. We should give that which will only be left behind to decay.
 - D. We should always be reminded that we go to God with only a rich or poor soul.

In Acts 3:1-10, Peter comes across a man crippled since birth sitting at the gate called Beautiful. Peter wasn't bothered by the man's plea for alms. Instead, Peter associated with this man (supposedly unclean because of impairment). Peter didn't have gold or silver, but instead he gave the man something more precious—a new life through new legs. This nearly cost Peter his life (Acts 5), but Peter courageously gave the man the power to be whole so he could walk through the gate called Beautiful.

The gift of giving life is an eternal heritage left behind by the donor. Jesus, Peter, and many others are known for their life-giving gifts. Today, places such as Lynchburg General Hospital, Lynchburg, Va., have planted a tree in remembrance of their organ donors.

We all have the opportunity to help our suffering neighbors live improved lives. We may not even know our "neighbor's" name, but it is apparent that the giving of ourselves to help someone else certainly pleases Christ and God. It doesn't matter if we are rich or poor materially, we can all give our organs, tissues, and blood so that others can go through the gate called Beautiful.

-Adapted from "Giving for Life: Organ and Tissue Donation" memorial service
by Wayne Lanham, Director, Pastoral Care
Lynchburg General Hospital, Lynchburg, Va.



Sample Sermon - Russian Orthodox

“Life: The Treasure of God”

Life is magnificent and awesome to mankind; it is holy and divine to God. Man and woman are the crowning touch of God's creation, because He delights in the work of His hands (Genesis 1:27, “So God created man in his own image, in the image of God He created him; male and female, he created them.”). When the child is formed in the womb, he or she is the masterpiece of the Creator, the love of Jesus Christ, the hope of society, the joy of a family. We are given life to rejoice in that life.

When, through illness or some other tragedy, loved ones lose the fullness of life and the ability to function, it is God's desire that healing and our fellow human's health be restored. Jesus Christ, as He walked on the earth, could not bear to see men and women suffer, so He went about healing those who were not “whole.” It is not God's intention to see us suffer or not be whole through illness. In cooperation with Him, God has given the gift of doctors, nurses, technicians and others to use their hands and minds to help in making our fellow creation be whole (Isaiah 43:7, “Even everyone that is called by My Name: for I have created him for My Glory, I have formed him; yes, I have made him.”).

When I was a newly ordained priest, the first person I saw die was a healthy woman who had died during a simple operation. As I stood by her hospital bed, the doctors mentioned that she donated her eyes to be given to someone upon her death, so they could gaze upon the face of loved ones, see the beauty of the earth, and know the joy of sunlight. You see, this woman's mother was blind and she had yearned to give her dear mother sight; but since she could not, she always remembered. She gave that gift of sight to another when it was possible. This made a deep impression upon me as a young priest and remains with me to this day.

If a young mother or father can be saved to live, to raise their children through the gift of organ or tissue donation, this is the work of God's compassion. Let that person who has departed this life do one last great deed for humanity. Let his or her gift of organ or tissue be a source of healing and life in this world created by God. I urge everyone to consider this gift of God they can give in love to their fellow men and women. This way, God is glorified by this gift of life.

-Bishop Innocent of Anchorage, Alaska



Sample Sermon - United Church of Christ

"Stewardship: It's Organic"

Psalm 116, Matthew 25: 14-30

(Holding up a church financial pledge card and an organ donor registration form)

These are two cards of stewardship and commitment. One of them is important; the other is essential. They both are expressions of thankfulness to God for God's gifts and grace. One of these cards sustains an organization: its material necessities of life together with its opportunities for ministry and mission. The other gives, sustains, and enhances life itself.

Soon you will receive one of these church pledge cards. Filling it out is a conventional once-a-year act of stewardship, pledging the usual commitments of "time, treasure, talent" to the church. It is an important expression of gratitude and faith.

Today you can pick up one of these organ/tissue donor registration forms after worship. Filling it out is also an act of gratitude and faith, suffused with compassion. It is a commitment that re-arranges the boundaries of our understanding of stewardship. Today's Gospel lesson and our resurrection faith compel us to consider stewardship as a way of life and living, even into our dying and death.

In light of Jesus' parable of the talents, I would suggest that stewardship is more about cultivation than conservation. Usually, when we use the term "stewardship" we use it in regard to responsible use of resources. How do we not squander that which has been entrusted to us, either individually or as a community? How do we conserve our dollars, our church building, our energy use wisely? That is often the question. It extends to ourselves, our bodies. Good stewardship of ourselves is usually seen as taking care of our bodies – eating right, getting both rest and exercise, and the like – conserving our physical (and mental and emotional) well-being.

But the parable of the talents points us beyond conservation to cultivation. Those servants who are blessed, who enter into joy, are those who risked, who went beyond the safe measure. Stewardship then becomes a wise, if not sometimes risky, use of our resources and gifts for enhancement rather than hoarding. We are to create increase where there has been scarcity. Give life and growth in place of fallowness and futility. Provide hope and possibility in place of despair and desperation. To missions, to ministry, to persons unknown.

One individual donor can potentially provide organs, bone and tissue (such as corneas, tendons, ligaments) for up to 50 or more people in need. As of now, there are over 116,000 Americans registered in the United Network for Organ Sharing waiting list. A new name is added to the list every 10 minutes, and every year an estimated 7,000 people die while waiting for organ transplants.

"Ah," you say, "who would want anything from me? I'm too old, too worn out, in just plain bad shape. Let someone else do it." Consider this: there is no age limit on organ donation. In one case, the liver from a 92-year-old woman was transplanted to a 60-year-old. But of more concern is that the "someone else's" are not making donations.

(Ps. 116:11) If we “let someone else do it,” we are a vain hope to those whose lives could be saved, whose living could be enhanced through transplants.

I think of Rich. A devoted husband and father in his 30s. He was a member of my first church in Maine. An accountant of some sort, who worked with figures – very bottom line type guy. I remember being at a stewardship seminar with him, and his excitement as we explored understandings of stewardship that went beyond the bottom line to how we live our lives in faith and thankfulness. Several years later, after I had left that church, I was shocked to hear that Rich had been diagnosed with liver cancer. Word was that all other treatments had been futile and he was awaiting a transplant. It never came. Now I don't know about the medical details of a transplant for his situation, but I do know that he never even had the chance. The “someone else” whose donor decision might have helped wasn't there. We can't leave organ and tissue donation to “someone else” because each of us is called to accountability for how we use our resources, our lives, and our bodies – even beyond life itself.

If we understand stewardship as giving increase and life, hope and possibility, then signing an organ/tissue donor card is a natural act of faith and thankfulness. Even if you feel your kidneys, corneas, or whatever would not be acceptable, let the medical experts make that decision. And discuss organ/tissue donation with your friends and family.

“Oh,” you say, “I couldn't do that. It's so morbid. I don't even want to think about it.” Yet I would say to you: could you look into the face of baby Sheyanne, who received a heart transplant when she was two hours old, then into the face of her parents, and say: “Oh, it's just too morbid.” Could you look into the eyes of the parents who made the decision to give life from their baby's death and say to them, “Oh, it's just too morbid.” What is a matter of morbidness and aversion to some is a matter of hope and life to others. Consider these words from a piece by Robert Test, entitled: “To Remember Me”:

Give my sight to the man who has never seen a sunrise, a baby's face, or love in the eyes of a woman.

Give my heart to a person whose own heart has caused nothing but endless days of pain.

Give my blood to the teenager who was pulled from the wreckage of his car, so that he might live to see his grandchildren play.

Give my kidneys to one who depends on a machine to exist from week to week.

Take my bones, every muscle, every fiber and nerve in my body and find a way to make a crippled child walk.

Explore every corner of my brain. Take my cells, if necessary, and let them grow so that, someday, a speechless boy will shout at the crack of a bat and a deaf girl will hear the sound of rain against her window . . .

If you must bury something, let it be my faults, my weaknesses and all prejudice against my fellow man.

Give my sins to the devil. Give my soul to God.

If, by chance, you wish to remember me, do it with a kind deed or word to someone who needs you.

If you do all I have asked, I will live forever.

Choosing organ/tissue donation then informs our understanding of stewardship. We are entrusted with life and the means for it for others beyond ourselves. When we sign this donor card, our stewardship is an action that flows not from convention but from compassion. We no longer simply conserve ourselves but cultivate hope and life that glorifies and gives thanks to the Creator of life, the living Christ, and the renewing Spirit.

(Close with prayer.)

Reverend Wendy Ward
Community Congregation Church of Clinton Heights, Rensselaer, New York

*Statistics were updated to reflect current numbers