INTRODUCTION

Today I want to look at and other painful experience in the life of David. Many of you may have experienced or are currently experiencing pain because someone you love has a terminal illness; that’s the kind of pain that’s really hard to cope with but it is the kind of pain that just about every one of us will face during life. King David had an infant who was dying. The child lingered for a while and David grieved over him.

2 Samuel 12:15-18. “After Nathan had gone home, the LORD struck the child that Uriah’s wife had borne to David, and he became ill. David pleaded with God for the child. He fasted and went into his house and spent the nights lying on the ground. The elders of his household stood beside him to get him up from the ground, but he refused, and he would not eat any food with them. On the seventh day the child died. David’s servants were afraid to tell him that the child was dead, for they thought, “While the child was still living, we spoke to David but he would not listen to us. How can we tell him the child is dead? He may do something desperate.”

If you have a loved one who was a Christian and has died, you can’t bring them back but you can go to them. I want to use David’s experience and his grief as a launching point to talk to you about how to cope with the experience of a terminally ill family member. But I also want this message to be very personal.

This is what is called “confessional preaching.” I would like to talk to you about an experience in my own life that even 10 years after the fact is very painful for me. But you will understand where I’m coming from better in this message. In 1982, my father died of kidney cancer that metastasized into his lungs and then into his brain. He was in his mid-50s. I was a pastor of a church up in Oneonta, Alabama and he lived in Mobile, about six hours away. In the last few months of his life, I drove back and forth to try to spend as much time with him as possible. It was a very stressful experience. I spent several weeks in the hospital with him trying to take care of him, doing all the things caregivers do that many of you have experienced. In the last few weeks of my dad’s life he was not normal. The cancer had attacked his brain and he started acting irregularly, completely different than his personality. He said and did things the last few weeks of his life that were not really him. I had gone back to Oneonta not knowing how long he would live and got that phone call in the middle of the night from my mother saying my dad had died. I have to confess I felt a sense of relief that he was not suffering anymore and I was glad he was with Jesus.

Within a few months, I got a call from my mother. She told me she was going to the doctor because she had a lump in her breast. She had known the lump was there all the time she was taking care of my dad, but she didn’t want to draw attention to herself. She kept denying the fact that it could be a problem. Even months after dad’s funeral, she could not deal with it. Finally, when she got up enough courage to go to the doctor, he said he needed to operate. My older sister and I were in Mobile when the doctor came out to the waiting room after having performed a radical mastectomy, and I heard him give a message many of you have heard before. “Yes, it was malignant but we think we got it all.”
She began an aggressive cycle of radiation and chemotherapy. She was able to continue her job as a nurse for another year. But it was soon obvious the treatment was not effective; cancer was showing up in other places in her bone scans. So after a year of living alone, we brought her up to live with us in Oneonta. There were good medical facilities in Birmingham.

For the last year of her life, I was not only her son, I was her pastor. We took care of her as her condition worsened. I have bad memories of being at work and having Cindy call me because my mother had collapsed and fallen and I had to go home and take care of her, and driving back and forth to the hospital for the chemotherapy treatments. It was a tough experience. I don’t want you to think I just breezed through it praising the Lord all the way. It was terribly tough and stressful. I lost weight. Cindy can testify to you that I was a rotten husband during those days because of the added stress. Those of you who’ve gone through it know it’s not easy, even for Christians.

My mother went to stay with my sister in Muscle Shoals for awhile to visit and while there, she became progressively worse. She went into a coma for a week, not able to talk, obviously in pain. And then mercifully one night she died and went home to God. And again, I felt a sense of relief. I did not weep a great deal when my mother died—I had done all my crying before. Let’s be honest, sometimes as family members we feel a little guilty, because maybe we don’t weep and weep the way other people may think we ought to be doing. But it’s because when we go through that period of anticipatory grief, we’ve already been involved in it before the death. And when the death occurs, it’s almost a sense of relief and release. I know there are those of you who have gone through this and are may be going through this. But some of you will go through it. Let me tell you, this is one of those messages that if you don’t need it today write it down and keep it in your Bible or get this tape, because you will need this at some time or perhaps you know somebody who needs this. I want to be able to share with you from my own experience and from the Bible how to deal with a loved one who is dying. There are three suggestions I have for you. We are going to spend more than half our time on point number one.

I. ANTICIPATE THEIR FEELINGS

Number one. Anticipate their feelings. Anticipatory grief occurs when you know a loved one has an illness that could cause death, and you begin the grieving process before the fact. You go through a series of stages where death is the climax or culmination of a process, whereas when a loved one dies unexpectedly, the intense grieving process follows it. Some of the stages are the same before and after, but that anticipatory grief is totally different than what we call bereavement (grief after death). There are stages you and the dying person go through when a terminal illness is involved.

In 1966, Dr. Elisabeth Kübler-Ross conducted a now-famous study at the University of Chicago medical school. She interviewed 500 terminally ill patients; asking them “How are you feeling?” “What emotions are you experiencing?” Dying in a hospital and even terminal illness is a fairly recent phenomenon, because it’s only been perhaps in our past generation that medical science was precise enough to predict with any certainty that a person was going to die. In previous generations, people just died. They might not know they were going to die, they may be sick for a while, and very few of them died in a hospital. So it’s only during this last generation that
we’ve been able to study it. So Dr. Kübler-Ross discovered most terminally ill patients go through five specific well-defined stages.

1. Stage one: Shock or denial

Number one is the shock and denial stage. When a person learns they have cancer or a terminal illness, their first reaction is shock and denial. “You can’t be saying that I have cancer!” “Dear God no!” To start with they don’t want to even talk about it. They don’t say “cancer” or “malignancy”, it’s always “IT.” They can’t even talk about it. Shock is God’s way of sort of easing the pain a little bit. Kübler-Ross says, “The emotional shock absorber that allows us to pretend we did not hear that which we cannot emotionally accept is called shock.” God puts you in shock. To start with, you say, “I can’t believe it!” A dying person goes through the stages, but also the caregiver of a dying person goes through the same stages. And you may not be going to the same stages at the same time, chances are you’re not, you could still be in denial and somebody else could’ve already accepted it. They may be in denial and you might have already accepted it. People do not walk through these stages like a preprogrammed robot. It’s different for every person. Usually shock and denial are first.

2. Stage two: Anger

Number two is anger. Just about every one who has a terminal illness gets angry at one time or another. You may be angry at the doctor for telling you the bad news; you may be angry at the hospital for the way they are treating you; you may be angry at the disease itself; you may be angry at family members; you may be angry at God. Even C.S. Lewis, perhaps the most brilliant Christian mind of the 20th century and who wrote *Mere Christianity*, got angry. In his book *A Grief Observed*, C.S. Lewis described what happened when his wife was dying of cancer. He got angry at God. “In the midst of my pain I asked, ‘Where is God?’ I go to him when my need is desperate when all other help his vain and what do I find? A door slammed in my face and a sound of bolting in double bolting on the inside of the door and after that silence.” And here’s a man who knew God, who loved Jesus. But in this time of intense grief he said “I can’t even find you God.”

How many of you would be honest enough to admit that when you are going through the experience of the death of a loved one—or perhaps you are fighting an illness—that there was a time when you looked up and said, “God, why? Where are you God? Why are you letting this happen to me?” We had a good friend and a former church named Don Lida. When he was 43 he was diagnosed with Hodgkin’s disease. He was one of the finest Christian men I have ever known anywhere. He was a successful international businessman; gave more than a tithe of his income to the Lord’s work; had a beautiful wife, three beautiful daughters and after he got Hodgkin’s disease he went to M. D. Anderson. That was the first time I’d ever heard of this hospital. He came back and the treatment was not working. And he got with me and he said, “David, why? WHY? I’m so angry at God! I’ve tried to be a good Christian I’ve tried to love my family. I’ve tried to be a good father, a good husband and I looked and I see all of these sinners in the world, all of these criminals—why me?” I didn’t have an answer for him. And you don’t either.
It’s very natural to express anger at times like that. I got angry at my dad when he was dying of cancer. I got as angry at him as I have ever been in my whole life. Do you know why my dad died of cancer? He smoked cigarettes all of his life. It wasn’t God just picking on him; he smoked cigarettes and that was one of the consequences. When he was in the hospital, we took him down to have a CAT scan. While we were out in the hall waiting, he begins to tell me he wants to have a cigarette, has GOT to have a cigarette. “Gimme a cigarette!” I said, “No dad, I’m not going to get you cigarette.” By that time his brain was eaten up by the cancer. He got so angry at me and said terrible, awful things. “I hope when you grow up you don’t have children treat you the way you are treating me.” He was so angry. I got angry at him too! I started talking back to him. It was as bad a conversation as I ever had with my dad. God later helped me to understand that was just part of my anger and his anger coming out in the way the cancer was making him act and talk. I thank God I can remember him now and healthy before he got sick as a man who loved the Lord. But anger is expressed.

When my mother was dying of cancer, my brother was at Southwestern seminary, and I got so angry at him, I thought he ought to be over with my sister and me helping take care of our mother. He didn’t call much. He didn’t come and visit much. I got so angry at him; I called him up and told him he was neglecting his duty as a son. What I didn’t understand at the time was he in the denial stage and I was in the anger stage. He could not accept the fact that his mother was dying. People go through this stage of being angry at the disease, angry at each other. Sometimes lives get angry at their husbands who are dying, “How can you threaten to leave me?” They express their anger. That is normal and natural. Don’t think you are going crazy when it happens.

3. Stage three: Bargaining

Number three. The next stage Dr. Elisabeth Kübler-Ross said people face is bargaining. This is where you reach the stage where you say, “Okay God. I don’t want to be angry at you is dangerous to be angry at God, but let’s make a deal God. I’ll start tithing if you let me live.” Sometimes family members say, “God I know that when I was a kid you called me to the Ministry and now my spouse is sick. God I’ll quit my job and go into the ministry—just let her/him live.” And you reach the stage where you start trying to make a deal with God. By the way, is actually very significant to look and see when terminally ill patients die. It’s almost uncanny. Most of them live past a significant calendar event. Many of them may be sick in the fall, but they’ll make it through Christmas and then they’ll die. Many of them may live past their birthday and it seems like they almost given up hope after that. It’s almost like they say, “God just let me live past Christmas.” That’s a very common stage, bargaining, for the person who’s dying and for the caregiver.

4. Stage four: Depression

Stage four is depression. Depression is sometimes suppressed anger that’s turned inward. What causes depression? When we experience loss, it causes depression. When you lose your spouse in divorce, and you can become depressed because of that loss; when you move to another city and you lose your friends, that can cause depression; when you lose a job, it can cause depression. When people go through these experiences of terminal illness, they are often depressed because they lose their hair, they lose their job, they lose their income, they lose their
mobility, they lose their freedom, they lose their independence—and it causes depression. Despondency and depression is usually a very common stage people go through.

5. Stage five: Acceptance

There’s one final stage Dr. Kübler-Ross says every person needs to reach in order to have a healthy experience: Acceptance. It’s when you finally accept the reality that unless God supernaturally intervenes, chances are you or your loved one is going to die. That doesn’t mean you give up hope or stop praying, it just means you’ve realized and accepted the fact. When you reach that level of acceptance, that’s when you can begin to communicate with that person. You are no longer denying it; all the cards are on the table; the agenda is clear: Let’s talk about it. In terms of my mother, I reach that stage about a month before she did. I was praying hard for my mother to be healed, because I really believe God heals. I’ve known people who believe God healed them of cancer. And I pray, “God heal my mother.” I prayed every way I knew how. I prayed in the name Jesus, I tried to abide in him and let his word abide in me, I tried to pray according to God’s will, I tried to pray as effectual and fervently as I could, I tried to live a righteous life, I fasted and prayed and prayed and fasted—but after I had prayed for several months, it’s as if God spoke to my heart and said, “David, it is not my will to keep your mother alive. I’m going to heal her in another way.” It was as if he told me that taking her home to heaven was ultimate healing. And I began to change the way I prayed. I began to pray, “God keep her free from pain.”

We were driving to Birmingham for another cycle of chemotherapy. And how my mother hated chemotherapy! She’d lost her hair and was one of those patients who got extremely nauseated. In a cycle of about four weeks she had had about four good days. Two weeks after the chemo she was sick, then she’d have about three or four good days and then the week before the next one she’d spend it dreading it. We were driving along in the car and I can remember just like it was yesterday, she looked across the seat at me and she said, “David, the chemotherapy is not working. I think I’m probably going to die.” And I said, “Yes ma’am, that’s what I think too.” She said, “I was afraid to even admit this but I’m ready to go now.” And from point on, the last few months she was alive was probably the best relationship I ever had with my mother. We got to talk about things that really mattered. We talked about her funeral. We talked about heaven. We talked about her seeing daddy in heaven and being reunited with him. We talked about all those things. If she had stayed in denial or anger or one of these other areas, we never would have gotten to do that! It is a sad experience and I’ve seen it as a pastor, Christian couples where one of them is dying of illness and right up to the end both of them live in denial, never talking about it never addressing it, never accepting it. There are some things that need to be said. But because they don’t reach the level of acceptance, they don’t get to say it.

Anticipate their feelings. You can’t do two and three of this outline and tell you reach stage five.

II. ADDRESS THEIR FEARS

Reach stage five and then you can do the second thing, which is to address their fears. Terminally ill patients have special fears and until you reach the level of acceptance, you can’t address and alleviate their fears.
1. Pain

Number one, they are afraid of pain. Pain is a real fear. Let’s face it—we know we’re all going to die. But if each of us in this room had a chance to choose how we would die, we would all put on our pajamas one night, say goodbye to our family, and hug everybody’s neck, pray and thank God and get in bed, pull up the covers, curl up our toes and just go to sleep and wake up with Jesus. No pain. That’s the way we would all choose to do it. You and I know that very, very seldom happens. A terminally ill person fears pain. You must enter into their pain and address it, “I know you’re hurting and I care. We’re going to do everything we can to keep that pain away.”

2. Indignity

Number two. They also fear indignity, the dehumanization that often takes place when someone is terminally ill. They fear losing their hair. They fear becoming a guinea pig in hospital, being poked and probe to. They fear losing their modesty in a hospital. They fear losing their freedom. They fear the indignity that comes along with a certain kind of disease. There is something to be said for dying with dignity rather than being dehumanized.

3. Being a burden

Number three. They fear being a burden. That’s probably the number one fear of terminally ill patients. They feel guilty because you have to change your whole lifestyle on their account. You are having to miss work; spend time in the hospital with them; cater to their needs. And they don’t want to be a burden. Several months before my mother died, 12 months after she quit her job as a registered nurse for the public health department of Mobile, we got a letter saying she had lost her hospitalization insurance. It only carried over 12 months from her date of employment. She was not poor enough for Medicaid and she was not old enough for Medicare. I was in the anger stage at that time so I started writing letters to the Insurance Commissioner, to the president of the insurance company, to everybody I could think of. I got some lawyers in the church to write some ugly letters for me like that—but to no avail. No insurance. That was perhaps the biggest burden my mother carried, knowing that when she went in for chemo and went into the hospital it was going to be expensive. My dad left a little money to her from his life insurance policy and didn’t last long. My sister and I decided that whatever it took, if we had to mortgage our homes, we would pay for whatever it would take to care for her right up to the end. That was the biggest concern my mother had. She died before we had to get too deep and all that. Address that fear and let them know, “You are more important to me than money. You are more important to me than job security. You mean more to me!”

4. Death

Number four. They fear death. It is human nature to fear death. The Bible says Jesus died that he might remove the fear of death. That’s a natural reaction but when you know Jesus Christ you don’t have to fear death. Why do we fear death? It’s because we’ve never experienced it before. There is the unknown about death at the good news is Jesus has already been there and come back. He says, “I’ll walk with you through it.” Yea, though I walk through the valley of the
shadow of death I will fear no evil. Why? Because you are with me. God will walk with you through the valley of death so you don’t have to be afraid. When your loved one is dying, talk about these fears address these fears, try to alleviate these fears.

III. AFFIRM THEIR FAITH

Number three. Affirm their faith. This is when you can really help each other spiritually. Margaret Vermers was a Southern Baptist missionary to Nigeria. When she was seven months pregnant with her second child, it was discovered she had cancer. She gave birth to the child, (who is healthy today), but Margaret did not respond to the chemotherapy and began going downhill. Six months before she died, she spoke to a group of missionaries on the topic “What the dying wish you would do.”

1. Be honest

Number one. Be honest with them. I know some of you have faced this dilemma as family members: Do we tell them they’ve got cancer? Do we tell them that doctor is not giving much hope? What do we tell them? Put your self in their situation. I would want to know. I don’t want my family keeping the truth for me. Margaret Vermers said a terminally ill patient deserves to know the truth about their condition. Don’t play games.

2. Support but don’t preach

Number two. Support but don’t preach. She says more damage has been done by well-meaning Christians who come in and felt like they had to say something and preach to them, give them Bible verses and tried to make some kind of spiritual lesson out of every experience. She said that’s not what they need, they just need your support, your prayers and your love.

3. Be with them

Number three. Be with them. They need your presence. One of the greatest fears of a dying person is dying alone. Joyce Landorf has written a great book called Mourning Glory about her mother who ultimately died. Her mother was in a coma for two months and Joyce said it’s terrible how we sometimes treat patients who are in a coma. We talk about them like a third person, like an inanimate object. She said we ought to talk TO them. Joyce said they just stood around her mother and didn’t talk to her much, they talked about her. There was one nurse there who would come in and say, “Honey, are you comfortable?” No response. “Honey, does your pillow need fluffing?” No response. “Honey, let me pull your covers up.” After two months, Joyce Landorf’s mother came out of the coma and she said, “Where is that nurse who kept calling me honey?” She can hear it. So when you have a loved one who is dying, don’t talk about them like an object that’s not there. Talk TO them. Be with them.

4. Don’t lose hope

Number four. Don’t lose hope. Some of you may be wondering, “Didn’t you just say that if we accept the fact that they’re dying you’ve given up hope?” Not at all. Christians are the only ones
that have hope from that point on. In writing to the church at Thessalonica, Paul said, “I don’t want you to grieve as others who have no hope, the only hope we have is Jesus Christ.” After my mother accepted the fact she was going to die, we talked about heaven. We talked about going to be with Jesus.

CONCLUSION

As I was preparing this message, I couldn’t help but think of one of our deacons, Cliff Jones, who died recently. He reached the acceptance stage quicker than anybody I’ve ever seen. The rest of us weren’t even there yet. His family might not have been there, but he was at the point where he could talk about it and he talked about heaven; he talked about Jesus. I would see him and he said while I’d been preaching on angels, he was going to go up there and see some of them! We talked about how I’ve been preaching from the book of Revelation. He said, “I’m going to go up there and check it all out. I’m going to know more about it than you do.” And that’s true he did! The last time I got to speak to him, I said, “Cliff, when you get up there, you tell Jesus I said hello. You tell my mom and dad I said hello.” That kind of faith and hope is that kind of faith and hope the world without Jesus Christ cannot even relate to. The good news I have for you today is that for a Christian there is hope past the grave. Don’t give up hope.
OUTLINE

I. ANTICIPATE THEIR FEELINGS

   Stages:
   1. Shock or denial
   2. Anger
   3. Bargaining
   4. Depression
   5. Acceptance

II. ADDRESS THEIR FEARS

   1. Pain
   2. Indignity
   3. Being a burden
   4. Death

III. AFFIRM THEIR FAITH

   1. Be honest
   2. Support but don’t preach
   3. Be with them
   4. Don’t lose hope
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For the Joy…
Pastor David Dykes