

On March 3rd, 2021 at 10:35 am, Eli Timoner took the first dose of the 3 medication compounds prescribed to him to end his life. Gathered around him holding his hands and stroking his legs, Eli's family encircled him in a constellation of generations and offered their final words of gratitude, love, and blessing. After more than 40 years of coping with paralysis resulting from an accidental stroke, Eli was dying of COPD and congestive heart failure. In January of 2021 after being admitted to the hospital due to a recent fall and trouble breathing, Eli began begging his children to help him die. Eli's son, David, who like his father was a resident of California, learned about medical aid in dying and shared the information with his father. From the moment that he learned about the option, Eli knew that this was what he wanted, and he made this clear to his children, his family, and his friends. Supportive of Eli's conviction and clarity, his family rallied to provide him with the exit plan he so desperately desired. For the 15 days following his initial physician approval, Eli's family accompanied their beloved patriarch as he confidently and lovingly said farewell to each of them and to his 92 years of life in his Pasadena home turned hospice.

The experience offered them all the opportunity to share stories, gratitudes, hopes, fears, and disappointments with one another and with Eli. He had the chance to share bank passwords and auto pay accounts with his wife, edit his obituary, advise

on his eulogy, and say zoom-farewells to friends, colleagues, and family. He got to participate in the ritual act of the pre-death confession with his rabbi, release his shame about past failures, and experience his last 24 hours in a state of abundant love. With whispers of comfort, permission to let go, and gifts of rest and gratitude, Eli's family held him and one another as he took his final breaths. At 12:10pm on March 3rd, Eli was pronounced dead with his hands still held by the people he loved the most.

Eli's story is just one of the thousands of stories of those who have been able to access medically assisted death in the 20 years that it has been legal in various states in the US. I did not know Eli personally, but through the gifts of Eli's children, I have witnessed his love, generosity, and absolute certainty about what it is he needed at the end of his life. And I'm not the only one. Eli's story premiered at the Sundance film festival in 2022 in a documentary film called "Last Flight Home," written and directed by his middle daughter Ondi. Ondi, already an award winning filmmaker before ever conceiving of *Last Flight* began filming her father when it became clear that he wanted to pursue a medically assisted death. What began for her as a memorializing attempt to capture her father's final months morphed into a touching film that brings the viewer into Eli's home and his heart. The film, which is now streaming on Paramount+, offers an intimate, heart

wrenching, and love filled window into what it is to go through the process of medically assisted dying with intention and care as a family system. There are no frills and no attempts to glamorize the dying process- just real people navigating a very real goodbye in the most honest and loving way they can.

Despite her fame and respect in the film world, it was not through Ondi that I came to know about Eli, but rather her sister and Eli's eldest daughter, Rachel. Rachel, more familiar to me as "Rabbi Rachel Timoner" is a giant in the world of Jewish social justice and ethical leadership. Throughout the film, Rabbi Timoner navigates her dual role as daughter and rabbi as she tends to her own mounting grief and her father's spiritual needs. She speaks candidly in the film and in interviews after it aired about what it has been like for her to become a face for Medical aid in dying advocacy in the Jewish world. In a short piece entitled "I'm a rabbi and I helped my father end his life" published in the forward shortly before the film aired at Sundance, Timoner writes,

"I am aware that this will be upsetting and even offensive to many in the Jewish community. I do not wish to create controversy on this issue, and I would not have chosen to make this film. I would not have chosen for my father's death to be viewed by the public at all, and I would not have chosen to champion this issue.

But I have cared for others who desperately wished for this choice at the end of their lives, and I think it might be time for the Jewish people to reconsider our views on this important matter<sup>1</sup>.”

Timoner’s call for reconsideration asks us to dig into the assumptions and institutions that we have inherited in our faith traditions. Her call is not without its awareness of Judaism’s traditional end of life tropes, and she makes no efforts to ignore, deny, or disregard the sanctity of life that Judaism’s tradition affirms throughout millenia. Even as she now serves as an advocate for medical aid in dying and is involved in the proposed compassionate care bill that was just introduced in New York, Rabbi Timoner remains sharply attuned to what’s at stake when creating this type of legal allowance. In an interview given just last month, Rabbi Timoner notes,

“The idea that Judaism is afraid of, and I know the disability rights community is very aware of this, is the danger of saying when a person doesn’t have quality of life is that life would be cheapened or that we would start ranking the value of life and decide that certain lives were not worth spending money on as a society or working to save or prolong. That’s a real specter here... there’s a real danger-”

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<sup>1</sup> <https://forward.com/opinion/481307/im-a-rabbi-and-i-helped-my-father-end-his-life/>

But this cautiousness is not where Timoner stops. Timoner continues, saying, “...But some voices actually matter more. I think that the dying person’s voice matters more.” She pauses here in the interview, and with laughter adds “that’s what makes me a reform rabbi probably... but I’m not going to tell someone to follow tradition if that’s not where the conscience is<sup>2</sup>”

Towards the end of Deuteronomy, a book which serves in many ways as Moses’ farewell address to the Israelite people as he faces his own death, Moses tells the Israelites, “I have put before you life and death, blessing and curse. Choose life<sup>3</sup>—”

This teaching, along with Gen. 1: 26’s formulation that humanity was created in the Divine image makes a link between the theological behavioral elements at the core of human life. For centuries, the obligation to “choose life” has been interpreted as a command to sustain and prolong life for those facing imminent death. As a result, Jewish movements across North America have been reluctant to offer religious support for medical aid in dying. The 1990 work a “Comprehensive Guide to Medical Halakha,” by Abraham S. Abraham states for example:

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<sup>2</sup>

<https://www.shomercollective.org/events/respecting-our-parents-a-rabbis-personal-experience-with-medical-aid-in-dying>

<sup>3</sup> Deut. 30:19

“One may not hasten a death, even that of a patient who is suffering greatly and for whom there is no hope of a cure, even if the patient asks that this be done. To shorten the life of a person, even a life of agony and suffering, is forbidden;”

A sentiment which was then echoed a year later by 1991 by Fred Rosner in

“Modern Medicine and Jewish Ethics, ” which states,

“Any positive act designed to hasten the death of the patient is equated with murder in Jewish law .... only the Creator, who bestows the gift of life, may relieve man of that life, even when it has become a burden rather than a blessing<sup>4</sup>.”

Jewish biomedical ethics articles, books, and religious responsa over the last 100 years have used these teachings and teachings like them to argue that life should be prolonged at all costs. While there was some space throughout the decades to debate passive vs active life sustaining measures and whether or not terminal patients should have the autonomy to reject treatment options for themselves, few rabbis were willing to entertain let alone advocate publicly for medical aid in dying as something in line with Jewish practice. Any autonomy of the dying person or sensitivities for suffering had to be balanced with a sensitivity for the sanctity of

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<sup>4</sup> <https://forward.com/opinion/481307/im-a-rabbi-and-i-helped-my-father-end-his-life/>

life. Hastening death let alone facilitating it was then and remains for many today an unthinkable breach in Jewish ethical care.

With so much literature amassed speaking out against life ending measures, the prospect of discerning how to navigate meaningful pastoral care for those seeking medical aid in dying can feel daunting. But I want to invite us this morning to consider a reality where the obligation to “choose life” is one which requires us to confront death honestly and compassionately as a facet of spiritual living. Perhaps, as we hold the medical, spiritual, psychological, and social developments that shape our contemporary landscape in 2023, we can affirm the sanctity and dignity of each person’s life by supporting individuals with terminal illness to discern for themselves the difference between staying alive and living. What might it look like for us as faith leaders to affirm that for some terminally ill individuals, “choosing life” might mean “choosing death” on their own terms?

Quoting talmudic sources, Nachmanides, a 12th century rabbi-physician, records in his work *Torat HaAdam* that for most people death comes 5 just days after they are pronounced terminal. He calls this 5 day window an “ordinary” or “normal” death, and coins the term “rushed death” for any death experience which happens in the span of 4 days or less. In this same formulation, Nachmanides determines that deaths occurring 7 days after a terminal diagnosis are “loving deaths” likely due to

the time that the dying person has to get their affairs in order and say goodbye to loved ones. What is most relevant for us from Nachmanides' formulation however is that **any death** that occurs after the 7 day mark is viewed as an extreme form of suffering, possibly carrying Divine implications<sup>5</sup>. For Nachmanides and many others living in the medieval and ancient worlds that birthed our sacred texts, that death could be prolonged longer than the time God took to create the world was outside the scope of the human imagination. Even the wisest rabbinic minds could not conceive of a world in which death could be staved off for weeks, months, and even years the way it is in our contemporary context.

When we talk today about what it looks like to “choose life” or “hasten death” in a halakhic or religiously legal way, we need to be aware of the fact that our religious frameworks were born into a world when lifespans were radically shorter and death came drastically faster due to the lack of medical detection available. What it means to hasten death for someone suffering total physical, psychological, and spiritual pain in the ancient world for 4 days is drastically different from what it means to hasten death for someone who has coped with four decades of pain today.

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<sup>5</sup>“Footnote 19: Torat HaAdam, Section “The Gate of the End,” Subsection “The Matter of Departure,” quoting BT Mo-eid Katan 28a and Tractate S'machot (also known as Evel Rabati) 3:9–11”  
[https://www.ccarnet.org/ccar-responsa/5782-1/#\\_ftn19](https://www.ccarnet.org/ccar-responsa/5782-1/#_ftn19)



That there might be times in which “choosing life” requires a spiritual posture which welcomes death is well documented in Jewish tradition. Several notable stories in the Babylonian Talmud relate instances in which rabbis gathered to pray for someone to cross the threshold from life to death, demonstrating for us that the path for “choosing life” is not necessarily as clear cut as we may want to believe.

In one Talmudic story, the rabbis gathered to pray for the death of a colleague and friend experiencing unrelenting psychological suffering, and their prayers are swiftly answered<sup>6</sup>. In another story, a group of rabbis praying over the bedside of a dying colleague prolongs the dying man’s discomfort. Their prayers are so fervent and unceasing that they tether the dying man to life despite his desire to die.

Witnessing the situation, the man’s wise caregiver creates a distraction, shattering a pitcher of water on the ground nearby thus startling the rabbi’s out of their diligent prayers. In the moment of silence that followed, the dying man’s soul is able to slip away into life beyond the realm of the living<sup>7</sup>. The well meaning spiritual convictions of the dying man’s rabbinic companions in this story ultimately served to prolong his suffering. Through an interdisciplinary intervention, the man ultimately finds the release of death he needed. Other stories along similar lines include talmudic tales of martyrdom when executioners and students alike offered death-hastening measures for teachers enduring excruciating deaths<sup>8</sup>, and rabbis

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<sup>6</sup> BT *K’tubot* 104a

<sup>7</sup>BT *Bava M-tzi-a* 84a

<sup>8</sup> BT *Avodah Zarah* 18a.

who directed individuals on how to meaningfully divest from life in order to move onto death. I hear these stories and I think about the thousands and thousands of unknown caregivers who quietly stewarded their loved ones towards a welcomed release of death through acts of fierce love and support. If we are the inheritors of tradition and the living legacy of our ancestors, this is the line of descendants that I hope to embody.

Sparked in large part by the Medical Aid in Dying legislation that passed in Canada in 2016 and in US states in the last few years, Jewish thinkers across the denominational spectrum have begun to revisit the issue of assisted death as it pertains to Jewish law and spiritual care. In the last 3 years, both the Conservative and Reform movements in America have issued updated responsa on the issue of Medical Aid in Dying in support of the “narrow and carefully defined window” of legal processes that permit for safe and consensual chosen deaths for those facing terminal diagnoses and extreme suffering<sup>9</sup>. Both pieces of religious literature make a rhetorical argument for reframing Medical Aid in Dying as something other than suicide, thus liberating the resource from the confines of traditional religious doctrines. Revising his own previous rabbinic ruling, Rabbi Elliot Dorf writes for the conservative movement in 2020, “This, then, is not “suicide” in the sense that

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<sup>9</sup> Reform responsa: [https://www.ccarnet.org/ccar-responsa/5782-1/#\\_ftn26](https://www.ccarnet.org/ccar-responsa/5782-1/#_ftn26)

Conservative responsa:

<https://www.rabbinicalassembly.org/sites/default/files/2021-04/Assisted%20Suicide%20Revisited%20final.pdf>

we normally mean it – that is, that a physically healthy person intentionally and willingly takes his or her own life; it is instead alleviating pain and suffering, and that we also have a duty to do”. Mirroring this stance in their updated response in 2022, the rabbis of the CCAR write in the conclusion of their responsa:

“in an era in which medical technology can prolong life to the point where a person’s existence becomes torture to them, when (Healing the body) *refuat haguf* is no longer possible, we can, at least, support the choices of those individuals for whom death is (healing the soul) *refuat hanefesh*<sup>10</sup>.”

As we ask ourselves about what it means to offer spiritual care in our contemporary context, I implore each of us to explore how dignified death can serve to affirm the sanctity and fullness of choosing life. We need to take the time to ask ourselves if our traditional religious standards for prolonging life are robbing people of the ability to *live*?

Rav. Hillel writes, “Do not be sure of yourself until the day of your death, do not judge your fellow human being until you have reached his place....29”. None of us can know what we will need to feel most whole when our time to die arrives. What we can know, however, is that life and death are precious partners that give

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<sup>10</sup> [https://www.ccarnet.org/ccar-responsa/5782-1/#\\_ftn26](https://www.ccarnet.org/ccar-responsa/5782-1/#_ftn26)

meaning to one another. We can encourage ourselves to be brave when it comes to challenging our ingrained assumptions about the value we put on prolonging life, and we can center the experiences and needs of dying people in our ongoing explorations of what it means to choose life. The same chapter of deuteronomy that tells us to choose life also tells us “lo b’shamaim hi”- it is not in the heavens that these teachings dwell, but as close to us as our hands, lips, and hearts that move through the world.

In his final words to one of his grandchildren, Eli Timoner tells his grandson “Respect the people you do not know yet, and love the people that you know already” Is this not what it means to choose life? I invite us this morning to embrace a world in which choosing life might mean supporting and affirming those terminally ill individuals whose spirits and bodies are ready to choose death.

“I have put before you life and death, blessing and curse. Choose life<sup>11</sup>—”

May each of us be blessed to find the strength, clarity, and compassion to choose life, and death, with dignity, care, and presence.

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<sup>11</sup> Deut. 30:19