First Evensong of the Transfiguration – August 5th, 2018

This evening we begin to celebrate the feast of the Transfiguration. It is an event which must have been of such importance to the Gospel writers that it is recounted in all three Synoptic Gospels of Matthew, Mark and Luke. It is extremely difficult to understand exactly what took place, as the language used of the incident is completely inadequate to convey the true meaning of what went on. Whatever occurred was completely beyond the understanding and experience of those who witnessed the event. Although this feast was observed widely by the Orthodox Church in the East, it nevertheless was very much in obeyance in the Western Church until the twentieth century.

August 6th is also the anniversary of the dropping of the first atomic bomb on Hiroshima, as a result of which, the Pope asked for the Transfiguration to be observed very much as a remembrance of the horrors that took place on that day and in so doing, the sacred meets the secular. In marrying these two events together, I am going to attempt this afternoon to contrast transfiguration with disfiguration, transfiguration having its cause or origin in God, while disfiguration can only come about as a result of sin. I will further define transfiguration as being something that enables us to become more fully human. It involves humanity surpassing its current capabilities and results in our knowledge being enlarged, suffering being alleviated, and a step being made closer to the Kingdom. In other words, becoming more like God intended us to be. Disfiguration, on the other hand is something which dehumanises, de-personalises and diminishes humanity. Many examples of this can be found in the world today, from the deliberate and malicious disfiguring act of an individual throwing acid into the face of another person, as reported in the news recently, to the disfiguring dehumanisation which results in the continuation of tribal, racial and so called religiously motivated violence and war along with the disregard, disdain and contempt shown to immigrants, refugees, the vulnerable, needy and marginalised in our world. In defining therefore, I would suggest that anything which improves the human condition, especially that of suffering humanity and which improves our knowledge and the human condition must ultimately have its origin in and of himself who wills the best for his people whom he has created and whom the Bible tells us, loves as a father loves his own children. Disfiguration which diminishes and demeans humanity, either as individuals or as the whole human race, ultimately has its origin in self-interest and sin.

The parallel between the divine incident and technology is easy to see on this festival, and brings to the forefront of our mind the relationship between religion and science. Science, knowledge and technology have brought about huge improvements in the human condition and living conditions, especially since mechanisation and the invention of modern medical techniques. Knowledge of itself has to be a good thing per se, but what perhaps makes a deed good or evil is the purpose to which that knowledge is put along with the intention behind it. One of the most controversial debates which took place after the Second World War for example concerned the experiments cruelly carried out in Nazi Germany on the most vulnerable within society – the mentally ill and the physically and mentally handicapped, often inflicted on the person without anaesthetic or pain relief. Given the circumstances under which the results of research were conducted, a heated debate took place as to whether the knowledge gained from those experiments could be used because it was considered to be 'tainted knowledge', having hardly been obtained by the noblest means. Similarly the bombing of Hiroshema took place shortly after the discovery of the splitting of the atom, and without full knowledge or appreciation of the full effects that the dropping of the bomb would entail, effects which are still being felt all these years later.

In the study of ethics, a principle often discussed is whether the 'ends justify the means'. In the case of the bombing of Hiroshima, the desired end was the surrender of the Japanese government thus bringing the Second World War to an end. The catastrophic devastation and suffering that the people of Hiroshima experienced was unprecedented and perhaps to some extent unforeseen. It is therefore extremely debatable whether the bombing of Nagasaki just a few days later was completely justifiable.

But as we know, life is not full of certainties - it is certainly not black and white, and circumstances often direct the way in which ethical decisions are made. A very modern ethical dilemma raised its ugly head this week resulting from often unforeseen circumstances created by modern medicine. A landmark ruling in the Supreme Court concerned people in a permanent or persistent vegetative state. The court decided that where families and doctors are in agreement, the Court of Protection no longer has to be consulted and that food and water can be withdrawn therefore allowing the patient to die.

Henry Marsh is a world renowned expert in brain surgery. In his book entitled 'Admissions, A life in Brain Surgery' written when he was about to retire after 27 years of performing extremely dangerous operations, he reflects on his work and his patients. Rather surprisingly for me, there are no heroics, there are no claims that brain surgery saves lives in a way that no other surgery or surgeon does – rather, it is quite the opposite. He reflects time after time about the extreme nature of the cases that he is presented with, the necessity of performing life-saving procedures, but, realistically, humbly, and regrettably, he comments that, despite great faith being placed in him by patients, and the patient's family, and the belief that, in the most tragic of circumstances everything possible must be done, nevertheless, sometimes, perhaps often, the result for the patient of their life saving operation was the unforeseen consequence that the quality of life for the patient has been made infinitely worse and the patient in some cases, perhaps the ones he lives with the guilt mostly of, are the ones where death might have been preferable to a life lived with severe brain damage, severe disability or vegetative state. Having done everything possible for many patients over many years, it is an honest, if not painful account, of a surgeon haunted by those occasions where the last state of the patient became worse than the first and they continue to exist in a sort of 'living death'.

Now while I acknowledge that many necessary and transformative operations are successfully performed with great regularity, and that these of their very nature are therefore tansfigurative, nevertheless I can't help thinking that perhaps, when tragedy or serious illness strikes, there can be a tendency to place unreal expectations on doctors and the medical treatment available, and, when things don't go according to plan, that contemporary society somehow lacks the coping mechanisms and sadly often it is said that we live in a culture of blame as a result. Henry Marsh and others often ask us to pose that often debated subject, a parody of the Ten Commandments first proposed by Arthur Hugh Clough the 19th century poet and educationalist who said 'Thou shalt not kill, but need'st not strive officiously to keep alive'. One can only imagine the turmoil and upset that families of those involved in tragic circumstances go through – the dashed hopes, the longing, the emotional pressure placed on medical staff that surely someone can do something. Yet I suspect that many in extreme cases become victims of the very technology which kept them alive and so there is both transfiguration and unintended disfiguration. In former times when death was much more a part of life, perhaps coping mechanisms and an acceptance of death were for more common than they are now.

Not wishing to dwell on arguments concerning euthanasia, there nevertheless is for me a very real problem concerning the decision to withdraw hydration and nourishment from a patient in

a persistent vegetative state. While it is true that both food and hydration are being given somewhat unaturally, by intravenous means or directly into the stomach, my understanding is also that we are not entirely sure as to the extent the patient is aware, if at all, and to what extent therefore they might suffer as a result of being dehydrated or starved to death. I don't have any answers to this very real dilemma, perhaps there are only more and more questions that need to be asked as we seek to discern what might be the most humane way of dealing with extremely tragic circumstances and cases.

Often people ask why religion has anything to do with ethics. Well, to me the answer is quite clear. Ethics governs every aspect of our human life and behaviour. As Christians, as indeed people of any world religion will tell you, we are not solely responsible or answerable to ourselves; we believe that ultimately we are all answerable to God, and that as people of faith, living by divinely revealed principles, we at least deserve a place at the table where these debates take place.

And so, in the meantime what are we to do? I like to think of major breakthroughs in medical knowledge and technology that enable us to treat and cure what would have formerly been terminal illnesses as moments of transfiguration, where knowledge means that we become more than we were, that suffering is alleviated and that a glimpse of heaven and the way forward is received. Conversely, we don't have to look very far to see the effects of the disfiguration of sin. The challenge in this broken, divided and incomplete world, is to recognise the difference between transfiguration and disfiguration, their causes and effects, and to pray for the coming of the Kingdom, where instead of transformative glimpses, we attain that perfect state for which God made us. Until then, we hope and pray that God's will will be done and his influence seen in our lives and that of the world.

Prayers

Loving God, we give you thanks for the vision of your Son Jesus Christ who was transfigured before his disciples; keep the vision of Christ before us at all times, that we might be aware of his glory and salvation in our lives.

Lord, in your mercy.

Hear our prayer.

We pray for the people of Hiroshima and Nagasaki, the people of Chernobyl and all living with the effects of radiation poisoning or contamination. We pray for all who work in the nuclear industry, for calm where there is the threat of development of nuclear weapons, and especially where there is political instability or the possibility of war.

Lord, in your mercy.

Hear our prayer.

We pray for all living in a permanent or persistent vegetative condition, for those who care for them and those who love them and watch over them. We pray for those who make laws and interpret them concerning vulnerable people living with severe disability and for all engaged in medical and scientific research.

Lord, in your mercy.

Hear our prayer.

Lord, hear us as we bring before you situations and conditions where there are no easy answers and where no solution presents itself; guide all who are perplexed and anxious this evening, be with those facing heart breaking decisions, and comfort all experiencing grief or loss. Lord, may your kingdom come and your will be done, now and always; we ask this in the name of Jesus Christ our Lord. Amen.