WHAT DOES THE BIBLE SAY ABOUT SUICIDE?

A CULTURAL ANALYSIS AND BIBLICAL RESPONSE
Darrin Patrick, a megachurch pastor, speaker, and author, died earlier this year. According to Seacoast Church, a multi-site megachurch in South Carolina where he was teaching pastor, he died of what appeared to be a “self-inflicted gunshot wound.”

A longtime friend of Patrick noted that pastors often don’t know what to do when they struggle. They attempt to keep up appearances and handle their struggles on their own. “We don’t feel like we can ask for help,” he said.

Anxiety is escalating in our culture.

According to recent surveys, more Americans than ever before are stressed, depressed, and anxiety-ridden. Nearly forty million people in the US (18 percent) experience an anxiety disorder in any given year. Anxiety disorders are the most common and pervasive mental disorders in America.

There is a direct link between anxiety and opioid use. Those suffering from anxiety are two to three times more likely to have an alcohol or other substance abuse disorder. Anxiety is linked to heart disease, chronic respiratory disorders, and gastrointestinal disorders.

And numerous studies have related anxiety directly to suicide.

Compared to those without anxiety, patients with anxiety disorder were more likely to have suicidal ideations, attempted suicides, completed suicides, or suicidal activities.

These were the facts even before the pandemic that is challenging millions of Americans who face mental health issues.
According to an August 13, 2020 report by the Centers for Disease Control and Prevention, one in four young adults said they had considered suicide in the previous month because of the COVID-19 pandemic. Roughly 30.9 percent of respondents said they had experienced symptoms of anxiety or depression.

A recent mental distress survey found that participants were eight times as likely to screen positive for serious mental illness as participants in a similar survey two years ago. The vast majority of the 2020 participants, 70 percent, met criteria for moderate to serious mental illness.

An article in the New England Journal of Medicine noted that during public health emergencies, “emotional distress is ubiquitous in affected populations.” And counselors warn that the isolation created by stay-at-home restrictions can especially contribute to psychological harm.

As a pastor and a theologian, I am not qualified to offer medical advice or professional counseling to those suffering from anxiety and depression.

But I can offer biblical insights on the painful issue of suicide.

In light of National Suicide Prevention Week that is observed this year from September 6–12, let’s look at this issue through the lens of Scripture.

And let’s offer others the hope and help that we find in Christ.

**The scope of the issue**

More people die from suicide than from homicide in America. According to the Centers for Disease Control and Prevention, suicide rates increased 25 percent nationally from 1999 to 2016. They rose in nearly every state.

According to the Suicide Prevention Resource Center, suicide is the second-leading cause of death for Americans ages ten to thirty-four. Suicide rates are much higher in the elderly American population than for any other age group.

Suicide rates have grown exponentially for women since 1999. And white, middle-aged men account for 70 percent of all suicides each year.

The CDC reports that more than half of the people who died by suicide did not have a known mental health condition.

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What does the Bible say about suicide?

Factors contributing to suicide include:

- relationship problems
- a crisis in the past or upcoming two weeks
- problematic substance abuse
- physical health problems
- job or financial problems
- criminal or legal problems
- and loss of housing

These are some of the facts regarding the tragedy of suicide. However, if you are reading this paper because this subject is more personal than objective for you, I hope the following discussion is helpful.

As I noted, I am writing as a theologian and a minister, not a counselor, psychologist, or psychiatrist. I will offer a brief overview of our subject from a biblical and theological perspective, with some practical suggestions at the conclusion of our conversation.

But if suicide is a real issue for you, I urge you to seek professional help immediately. See the section “Help for those considering suicide” toward the end of this essay.

The history of suicide

The term suicide is traced in the Oxford English Dictionary to 1651; its first occurrence is apparently in Sir Thomas Browne’s Religio Medici, written in 1635 and published in 1642. Before it became a common term, expressions such as “self-murder” and “self-killing” were used to describe the act of taking one’s own life.

In Greek and Roman antiquity, suicide was accepted and even seen by some as an honorable means of death and the attainment of immediate salvation. Stoics and others influenced by them saw suicide as the triumph of an individual over fate.

Socrates’ decision to take his own life rather than violate the state’s sentence of execution influenced many to see the act as noble. However, he also made clear that we belong to the gods and cannot end our lives unless they wish it so (Plato, Phaedo 62bc).

Many of the early Christians knew they would likely die for their faith but chose to follow Christ at any cost. These deaths are not typically considered “suicide” since they were not initiated by the person but accepted as a consequence of his or her commitment to Jesus.

Augustine (AD 354–430) was a strong opponent of any form of self-murder (cf. City of God 1:4–26). He appealed to the sixth commandment and its prohibition against murder. And he agreed with Socrates that our lives belong to God so that we have no right to end them ourselves. Over time, many in the church came to see self-murder as an unpardonable sin (see the discussion of the Catholic Church’s position below).
In the nineteenth century, social scientists began to view suicide as a social issue and a symptom of a larger dysfunction in the community and/or home. Medical doctors began to identify depression and other disorders behind the act. Suicide became decriminalized so that the individual could be buried, his family not disinherited, and a survivor not prosecuted.

Many are confused about this difficult subject, as our society and its churches have adopted such a wide variety of positions on it.

So, let's discuss biblical teachings on the issue, the Catholic position, a Protestant response, and practical help for those dealing with this tragic issue.

**The Bible and suicide**

God's word does not use the word suicide, but it has much to say on our subject.

**Biblical occurrences**

The Old Testament records five clear suicides:

1. When Abimelech was mortally wounded by a woman who dropped a millstone on his head, he cried to his armor-bearer to kill him so his death would not be credited to the woman (Judges 9:54).

2. The mortally wounded King Saul fell upon his own sword lest the Philistines abuse him further (1 Samuel 31:4).

3. Saul’s armor-bearer then took his own life as well (1 Samuel 31:5).

4. Ahithophel hanged himself after his advice was no longer followed by King David’s son Absalom (2 Samuel 17:23).

5. Zimri set himself afire after his rebellion failed (1 Kings 16:18).

Additionally, some consider Jonah to have attempted suicide (Jonah 1:11–15). And Samson destroyed the Philistine temple, killing himself and all those with him (Judges 16:29–30). But many do not see this as a suicide as much as an act of military bravery.


Some consider Jesus’ death to have been a kind of suicide since he made clear: “No one takes [my life] from me, but I lay it down of my own accord” (John 10:18). However, as the divine Son of God, he could only have been killed, by any means, with his permission.
Biblical principles

God’s word makes clear the sanctity of life:

• “You shall not murder” (Exodus 20:13).

• “This day I call the heavens and the earth as witnesses against you that I have set before you life and death, blessings and curses. Now choose life, so that you and your children may live” (Deuteronomy 30:19).

• “The Lord gave and the Lord has taken away; may the name of the Lord be praised” (Job 1:21).

• “Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honor God with your bodies” (1 Corinthians 6:19–20).

• “No one ever hated their own body, but they feed and care for their body, just as Christ does the church” (Ephesians 5:29).

There are times when believers may have to give their lives in the service of Christ and his kingdom (cf. Mark 8:34–36; John 13:37; Philippians 1:21–22). But voluntary martyrdom is not usually considered suicide.

As we have seen, our postmodern culture claims that absolute truth does not exist (note that this is an absolute truth claim). In a nontheistic or relativistic society, it is difficult to argue for life and against suicide. If we are our own “higher power,” we can do with our lives what we want, or so we’re told.

But if God is the Lord of all that is, he retains ownership over our lives and their days. He is the only one who can determine when our service is done, our intended purpose fulfilled. It is the clear and consistent teaching of Scripture that our lives belong to their Maker and that we are not to end them for our own purposes.

Suicide and the Catholic Church

Does this fact mean that suicide costs Christians their salvation?

Many of the theological questions people ask in this regard relate in some way to the Catholic Church’s teachings on the subject. The Catholic Catechism contains several statements regarding suicide and mortal sin (all italics are in the original).

Suicide

On suicide, the Church does not maintain that taking one’s own life always leads to eternity in hell, as this statement makes clear:
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#2280 Everyone is responsible for his life before God who has given it to him. It is God who remains the sovereign Master of life. We are obliged to accept life gratefully and preserve it for his honor and the salvation of our souls. We are stewards, not owners, of the life God has entrusted to us. It is not ours to dispose of (see #2281–2283).

Mortal sin

The Catholic Church maintains a distinction between “mortal” and “venial” sins. Mortal sins separate us from God’s grace; venial sins, while serious, do not (see #1037, #1470, #1859–1861, and #2268).

Theological principles

The following principles of Catholic theology seem clear:

- We cannot be sure of the spiritual state of the person who commits suicide. This person may be suffering from “grave psychological disturbances” which “can diminish the responsibility of the one committing suicide” (#2282). Mortal sin requires “full knowledge and complete consent” (#1859) and can be diminished by unintentional ignorance (#1860).

- Thus, the Church “should not despair of the eternal salvation of persons who have taken their own lives” (#2283).

- However, if the person was fully aware of his or her actions, without suffering “grave psychological disturbances,” this person committed murder, an act that is “gravely sinful” (#2268).

- A person who commits a mortal sin and demonstrates “persistence in it until the end” goes to hell (#1037).

Since a person who commits self-murder (suicide) cannot then repent of this sin, it is logical to conclude that this person cannot be saved from hell.

However, the Catechism nowhere makes this conclusion explicit.

Suicide and the “unpardonable sin”

Most Protestants do not believe that it is possible for a Christian to lose his or her salvation, even if that person commits suicide.

In this section, we’ll summarize biblical principles on the subject of “eternal security.” Then we’ll apply them to the issue of suicide.

Know what you can know

The Bible assures us, “I write these things to you who believe in the name of the Son of God so that you may know that you have eternal life” (1 John 5:13). A literal translation would be, “We
can actually and with full assurance know intellectually and personally that we have eternal life.” This phrase does not mean that we gradually grow into assurance, but that we can possess here and now a present certainty of the life we have already received in Jesus.

But first we must “believe in the name of the Son of God.” “Believe” means more than intellectual assent—it is the biblical word for personal trust and commitment. We can assent to the fact that an airplane will fly me from Dallas to Atlanta, but I must get on board before it can. No surgeon can operate on the basis of intellectual assent—we must submit to the procedure.

If you have made Christ your Savior, you can claim the biblical fact that you “have eternal life,” present tense, right now. You are already immortal. Jesus promised that “whoever lives by believing in me will never die” (John 11:26). We simply step from time into eternity, from this life to the next.

Nowhere does the Bible say how it feels to become the child of God because our feelings can depend on the pizza we had for supper or the weather outside the window. No circumstances or events can guarantee our salvation.

It takes as much faith to believe we are Christians today as it did to become believers. We still have not seen God or proven our salvation in a test tube. If we had, we could question the reality or veracity of what we saw or thought.

Either the Bible is true, or it is false. Either God keeps his word, or he does not. He promises that if you “believe in the name of the Son of God,” you “have eternal life” this moment. You cannot lose your salvation, for you are already the immortal child of God. This is the fact of God’s word.

What about “falling from grace”?

Those who believe that it is possible to trust in Christ and then lose our salvation are quick to quote Hebrews 6:4–6. These interpreters assume that the text speaks of people who have experienced a genuine conversion, then “fall away” (v. 6). They typically believe that such a person needs another salvation experience.

But others disagree.

Some believe that the writer is stating a hypothetical case: if genuine Christians “have fallen away,” then “it is impossible” for them “to be brought back to repentance” (vv. 4, 6). Not that they can actually fall from salvation, but, if they could, they could not be saved again. Note that if the text deals with a Christian who actually falls from faith, it teaches that the person has no chance to be saved again.

Others believe that the writer is speaking not of a Christian but of someone who considers the faith, perhaps even joins a church, but then rejects Christ. If such a person persists in unbelief, he cannot then be saved. If a person claims that he once trusted Christ but does so no more, we would believe that he was never a genuine Christian.
The Bible seems clearly to teach that a Christian is forever the child of God:

- “For God so loved the world that he gave his one and only Son, that whoever believes in him shall not perish but have eternal life” (John 3:16).

- “If anyone is in Christ, the new creation has come: The old has gone, the new is here!” (2 Corinthians 5:17).

- “My sheep listen to my voice; I know them, and they follow me. I give them eternal life, and they shall never perish; no one will snatch them out of my hand. My Father, who has given them to me, is greater than all; no one can snatch them out of my Father’s hand” (John 10:27–29).

- “Everyone who lives and believes in me shall never die” (John 11:26 ESV).

What about the “unpardonable sin”?

Jesus has just healed a demon-possessed man. The crowds think he might be the Messiah, but the Pharisees say that he drives out demons by the devil himself. So, Jesus responds, “Blasphemy against the Spirit will not be forgiven” (Matthew 12:31). He repeats his warning: “Anyone who speaks a word against the Son of Man will be forgiven, but anyone who speaks against the Holy Spirit will not be forgiven, either in this age or in the age to come” (v. 32).

Peter could deny Jesus, Thomas could doubt him, and Paul could persecute his followers, yet they could be forgiven. But “blasphemy against the Spirit” cannot be forgiven, now or at any point in the future. This is the “unpardonable sin.”

So, what is this sin? Let’s set out what we know.

We know that Christians cannot commit this sin. The Bible is clear in 1 John 1:9: “If we confess our sins, he is faithful and just and will forgive us our sins and purify us from all unrighteousness.” “All” means all. No sin is unpardonable for a Christian.

We know that this sin relates to the work of the Holy Spirit in regard to unbelievers. Jesus is warning the Pharisees, those who rejected him, that they are in danger of this sin. So, what does the Spirit do with non-Christians?

- He convicts them of their sin and need for salvation: “When [the Spirit] comes, he will prove the world to be in the wrong about sin and righteousness and judgment” (John 16:8).

- He tells them about Christ their Savior: “When the Advocate comes, whom I will send to you from the Father—the Spirit of truth who goes out from the Father—he will testify about me” (John 15:26).

- He explains salvation: “The person without the Spirit does not accept the things that come from the Spirit of God, but considers them foolishness, and cannot understand them because they are discerned only through the Spirit” (1 Corinthians 2:14).
What does the Bible say about suicide?

- When they confess their sins and turn to Christ, the Spirit makes them God’s children: “If anyone does not have the Spirit of Christ, they do not belong to Christ. . . . And if the Spirit of him who raised Jesus from the dead is living in you, he who raised Christ from the dead will also give life to your mortal bodies because of his Spirit who lives in you” (Romans 8:9, 11).

In short, the Holy Spirit leads lost people to salvation.

So, we know that it is the “unpardonable sin” to refuse the Spirit’s work in leading you to salvation. To be convicted of your sin and need for a savior but refuse to admit it. To be presented the gospel but reject it.

Why is this sin unpardonable?

Because accepting salvation through Christ is the only means by which our sins can be pardoned.

It is “unpardonable” to reject the only surgery that can save your life or the only chemotherapy that can cure your cancer. Not because the doctor doesn’t want to heal you, but because he cannot. You won’t let him. You have rejected the only means of health and salvation.

The unpardonable sin is rejecting the Holy Spirit’s offer of salvation and dying in such a state of rejection.

Then you have refused the only pardon God is able to give you.

Don’t do that. Be sure you have made Christ your Lord, today.

To conclude this part of our conversation: no verse of Scripture connects suicide with our eternal destiny.

If this act could cause us to lose our salvation, we believe the Bible would make that fact clear. To the contrary, we can neither earn nor lose our salvation by human actions: “It is by grace you have been saved, through faith—and this is not from yourselves, it is the gift of God—not by works, so that no one can boast” (Ephesians 2:8–9).

Suicide is a tragedy for all involved, including our Father in heaven. But the Bible nowhere teaches that it costs Christians their salvation.

Suicide and physician-assisted death

Physician-assisted death (PAD), or euthanasia, is legal in nine US states and the District of Columbia. Said differently, PAD is available to one in five Americans today.

We can expect the push for PAD to increase in the future.

A recent Gallup poll found that nearly seven in ten Americans (72 percent) say “doctors should be allowed by law to end the patient’s life” by some painless means if the patient and his or her family request it.”
What does the Bible say about suicide?

Euthanasia terms and concepts

“Euthanasia” is derived from the Greek words *eu* (well) and *thanatos* (death).²

The term usually means “a good death” or “mercy killing” and is understood to be the provision of an easy, painless death to one who suffers from an incurable or extremely painful affliction.

Types of euthanasia

A distinction is usually made between “active” and “passive” euthanasia.

- Active euthanasia occurs when someone acts to produce death. This is often called “assisted suicide,” as in the actions of doctors who provide medical intervention leading directly to death (such as the use of fatal injections).

- “Passive” euthanasia occurs when the patient is treated (or not treated) in a way which is intended to lead to death, but actions are not taken to cause death directly (withholding sustenance, for example).

A third category has become common in recent years. “Letting die” refers to medical actions taken to enhance the patient’s well-being during the dying process. Unlike passive euthanasia, the doctor does not intend the patient to die as a result of this decision. Rather, the doctor withholds medical treatments which intensify suffering or merely postpone the moment of death for a short time.

For instance, it is not considered passive euthanasia to discontinue chemotherapy in cases of advanced cancer, especially if the drugs increase the suffering of the patient. Nor is it active or passive euthanasia to elevate levels of morphine or similar medications to alleviate suffering, even if the patient may die more quickly as a result. In such cases, the physician does not intend this decision to cause death, even though death may result from his or her action.

Relevant terms

The decision to enact euthanasia is termed “non-voluntary” when patients cannot express their wishes. It would be considered “involuntary” by any who believe that it goes against the patient’s wishes as he or she would have expressed them. A patient’s euthanized death would be “voluntary” if he or she gave “informed consent” while motivated by his or her best interests (unlike a person suffering from mental or emotional illness who wishes to die).

A patient who executes a “durable power of attorney” assigns responsibility for medical decisions to another person, usually the spouse. In the absence of such an action, the court often assigns responsibility to the spouse, a decision known as “substituted judgment.”

Using life support and/or similar technology to maintain a patient’s life is termed “heroic” or “extraordinary measures.” Some patients wish only “ordinary means” that offer reasonable hope of benefit and are not excessively burdensome. A third means of support could be called “basic,” providing only nutrition and water.

Doctors are required to help their patients (“beneficence”) and to refrain from harming them (“non-maleficence”). They can ethically provide medical assistance to alleviate any suffering, even if such help shortens their patients’ lives. This “double effect principle” assures that doctors do not act immorally if they intend only the good effect, do not use bad as a means to good, and create good at least equal to the bad.

For example, as stated earlier, doctors can prescribe morphine to alleviate the suffering of a terminally ill patient, even if a side effect of morphine in that patient will shorten the person’s life, unless they intend the drug to shorten or end that life.

Definitions of “death”

Doctors usually consider “death” to occur when circulation or respiration ceases irreversibly, or when the whole brain does the same.

“Brain death” is a special category. The “upper brain” supports consciousness, while the brain stem controls body functions such as breathing and heart rate. If the upper brain has died, the patient is considered to be in a “persistent vegetative state” (PVS). There are estimated to be 10,000 to 25,000 PVS patients in the United States.

If the brain stem has also died, the patient is considered to have suffered “brain death.” Because nerve cells do not regenerate, both upper-brain and total brain death are completely irreversible.

Biblical options

At the outset, let’s make it clear that active euthanasia or “assisted suicide” is unbiblical. This practice is the overt, intentional taking of life and is prohibited by the Sixth Commandment. For the remainder of this section, we will consider euthanasia only as the subject relates to passive or “letting die” options.

Defining the alternatives

Many ethicists believe that in cases of total brain death or upper-brain death, “heroic” measures are unnecessary. Many believe that ordinary treatment is not obligatory, and “letting die” is moral.

Some, however, believe that it is wrong to withdraw food and hydration, allowing the body to starve. This approach views the life as “holistic,” meaning that a functioning body is still united to the “soul,” the “image of God.” Such a person is still a member of the human race and deserves at least basic care (food and water), if not ordinary care (routine medical support).
Other Christians believe that brain-dead or PVS patients are simply bodies, that their souls or spiritual selves have gone on to eternity. Withdrawing food and water from such patients is then considered to be morally acceptable.

In this view, without a functioning brain, the body no longer sustains a soul or retains the image of God. Medical personnel should always care for those who possess potential for conscious life. But when a PVS exists, there is no possibility of brain regeneration and the “soul” has left the body.

Still others support “vitalism,” the belief that physical function by itself is sacred. In this view, even if the “soul” has departed a body which is brain-dead or in a PVS, the body deserves medical treatment to the very end of physical life. Some “vitalists” support ordinary care or basic care for such a body, while others argue for heroic means to preserve physical function as long as possible.

Which view is the most biblical?

Created in the image of God

One way to answer our question involves the scriptural description of humanity as created “in God’s image.” Genesis says that “God created man in his own image, in the image of God he created him; male and female he created them” (Genesis 1:27 ESV).

What does it mean to be made in God’s “image”? Most theologians focus on humanity’s uniqueness. What is it that separates us from other forms of life? Such characteristics make us uniquely “the image of God.” Four biblical statements address the question:

1. We are created in God’s image to “have dominion over” his creation (Genesis 1:28).
2. The Lord warns us, “Whoever sheds the blood of man, by man shall his blood be shed, for God made man in his own image” (Genesis 9:6).
3. Paul states that a man is “the image and glory of God” (1 Corinthians 11:7).
4. James states that people are “made in the likeness of God” (James 3:9).

From these specific biblical references to the “image” or “likeness” of God, we can suggest that a person retains this “image” when he or she is able to relate to the rest of God’s creation as his representative on earth. We are to “rule” or govern creation, represent God to others, and value each other. In this sense, we are “in” his image so long as we manifest his image on earth.

By this reasoning, we lose the “image of God,” that which makes us uniquely human and valuable, when we lose the ability or potential to relate to ourselves, our environment, other humans, and God. A baby in the womb and a comatose patient are each a person, in that they retain the potential for such interaction. But a PVS individual is not.

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What does the Bible say about suicide?

**Dualistic and holistic views**

How does this distinction relate to the body?

Some believe that the “soul” can depart the body before its physical death. This is typically considered the “dualistic” view, separating the physical and the spiritual.

Jesus cried from the cross, “Father, into your hands I commit my spirit!” (Luke 23:46). Stephen prayed before his physical death, “Lord Jesus, receive my spirit” (Acts 7:59). Some interpreters use these statements to separate the soul or “image of God” from the body.

In the belief that a PVS patient does not and cannot exhibit the image of God, it is then concluded that the person’s “soul” has left the body. Any physical support for the body, even food and water, is thus unnecessary.

Others adopt a holistic understanding of the biblical view of humans. While Greek philosophy separated body, soul, and spirit, Hebrew theology did not. It is not that we have a body, soul, and spirit that can be identified as separate entities. Rather, we are body, soul, and spirit. These words are different dimensions of the one person (cf. 1 Thessalonians 5:23).

In the holistic view, we retain the “image of God” so long as our bodies retain some dimension of physical life. In this approach, so long as a person is alive physically, that person is the “image of God.” Food and water would be essential, appropriate provision for any person. And so, the decision to withdraw them would be wrong.

**Permission to die?**

What if a patient previously directed that such withdrawal occur? Then the law would require that his or her wishes be honored. But should it? Should we be permitted to mandate that heroic or even ordinary measures not be taken to maintain our lives?

The dualistic view believes that a patient loses the “image of God” in certain medical conditions and would support that person’s previously stated right to refuse medical life support. The holistic view, taken to its logical conclusion, would seem to require at least food and water to be provided in the desire to preserve and honor the “image of God.”

It could be argued that even heroic measures are required and that a person should not be allowed to refuse them. Just as we require passengers in cars and airplanes to wear seat belts, so we should require patients to receive all medical support for as long as their bodies survive.

**My position**

I believe that the holistic view reflects God’s understanding of humanity. But I also believe a distinction between heroic, ordinary, and basic life support is warranted.

In my view, it is permissible to cease heroic or even ordinary life support for a person who
possesses no actual or potential capacity for relational life on any level, as that person cannot
demonstrate the “image of God.”

But I also believe that, so long as the body is alive, the “person” is alive. And persons deserve at
least basic support (food and water) for as long as they live.

However, we and/or our doctors can choose to “let die,” to take medical steps which do not
prolong our lives. When these medical actions enhance the present quality of life, even if they
shorten the life span of terminally ill patients, they are especially warranted.

Medical care and the power of God

In dealing with family members facing end-of-life decisions, here are the questions I think we
should ask:

- Do they intend to hasten or even cause death? I do not believe such a decision is defensible.

- On the other hand, do they wish simply to allow nature to take over, “letting die” if this
  is the natural result of the patient’s condition? In this situation, medical support is not
  prolonging life—it is prolonging death.

Maintaining or ending medical care does not necessarily affect the intervention of God.

The Lord Jesus raised Lazarus from the grave after he had been dead four days (John 11:38–44).
God does not require medical life support to heal. And if it is his will that the patient not survive
physically, no medical means can defeat his purpose.

If all medical options have been exhausted, and there is no plausible reason to believe the
patient will ever improve, a family who ends heroic or ordinary life support is not removing the
possibility of divine intervention.

Rather, they are placing their loved one in God’s hands, allowing him to heal physically or
eternally.

Help for those considering suicide

People consider suicide when the pain they feel exceeds their ability to cope with it. They want to
end their suffering and think that ending their lives will bring relief.

**If you or someone you know is having thoughts of suicide, please get help immediately.**

Ask your pastor to recommend a Christian counselor in your area.

You can call the National Suicide Prevention Lifeline at 1-800-273-8255 (TALK) or go to the
National Suicide Prevention Lifeline’s website at [suicidepreventionlifeline.org](http://suicidepreventionlifeline.org).

Take every threat of suicide seriously.
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In the meanwhile, it is important to know that it is possible to get through this.

*Feeling* suicidal does not require that we act on our feeling.

The best thing to do immediately is to create some space. If we decide not to act on our feelings for even a few minutes or a day, we can find the strength to seek help. By seeking help, we can deal with the pain and find the hope we need.

**Warning signs**

The Centers for Disease Control lists these twelve “suicide warning signs”:

- Feeling like a burden
- Being isolated
- Increased anxiety
- Feeling trapped or in unbearable pain
- Increased substance use
- Looking for a way to access lethal means
- Increased anger or rage
- Extreme mood swings
- Expressing hopelessness
- Sleeping too little or too much
- Talking or posting about wanting to die
- Making plans for suicide

This is an issue parents need to discuss with their children. I urge you to read Janet Denison’s article, “The Kate Spade Conversation.” She discusses the major rise in depression among teenagers and links to an important article by the Society to Prevent Teenage Suicide.

And she notes that “too often, Christians feel that depression should simply be handled ‘spiritually’ instead of ‘medically.’ Depression is an illness, and an illness needs both types of help. If you have reason to believe your child is clinically depressed, you and your child need the help of a physician, as well as the Great Physician.”

**Protective factors**

The following indicators help buffer people from the risks associated with suicide:

- Effective clinical care for mental, physical, and substance abuse disorders
- Easy access to clinical interventions and support for those seeking help
- Family and community support
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- Support from ongoing medical and mental health care relationships
- Skills in problem-solving, conflict resolution, and nonviolent ways of handling disputes
- Cultural and religious beliefs that discourage suicide and encourage self-preservation instincts

Help those you care about to experience these positive influences and you’ll do much to prevent the tragedy of suicide.

Three biblical promises

In the appendix of his classic book, *The Problem of Pain*, C. S. Lewis includes this note from physician R. Havard: “Mental pain is less dramatic than physical pain, but it is more common and also more hard to bear. The frequent attempt to conceal mental pain increases the burden: it is easier to say ‘My tooth is aching’ than to say ‘My heart is broken.’”

Let’s close by claiming three promises God makes to every suffering person today.

**One: You and every person you know is someone of inestimable worth.**

Depression and life crises can cause us to feel that our lives are not worth living. The opposite is true. Every person on earth is someone for whom Jesus died (Romans 5:8).

In 1941, C. S. Lewis preached his famous “Weight of Glory” sermon in St. Mary’s Chapel at Oxford University. In it, he stated, “There are no ordinary people. You have never talked to a mere mortal. Nations, cultures, arts, civilizations—these are mortal, and their life is to ours as the life of a gnat” (his emphasis).

Lewis adds: “Next to the Blessed Sacrament itself, your neighbor is the holiest object presented to your senses.”

So are you.

**Two: God loves you and wants to help.**

When Elijah despaired of his life and prayed, “It is enough; now, O Lord, take away my life” (1 Kings 19:4 ESV), God provided the physical, spiritual, and emotional sustenance he needed to go on.

When Jeremiah said, “Cursed be the day I was born!” (Jeremiah 20:14), God sustained his prophet.

Scripture promises: “The Lord is close to the brokenhearted and saves those who are crushed in spirit” (Psalm 34:18). Paul, who faced almost indescribable challenges (2 Corinthians 11:23–28), could proclaim, “I consider that our present sufferings are not worth comparing with the glory that will be revealed in us” (Romans 8:18).

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Jesus knows your pain. He has faced everything we face (Hebrews 4:15). He cried from the cross, “My God, my God, why have you forsaken me?” (Matthew 27:46). Now he is ready to help you.

However, let me repeat that one of the most important ways the Great Physician heals is through human physicians. That’s why you need to reach out to professional counselors as soon as possible. God will use them as he ministers his grace to you.

**Three: You can “dwell on the heights” with God.**

Paul testified that he could “take captive every thought to make it obedient to Christ” (2 Corinthians 10:5). He could do this because he lived in the power of the Holy Spirit (Ephesians 5:18).

God wants to be “the sure foundation for your times, a rich store of salvation and wisdom and knowledge” (Isaiah 33:6). The person who walks with him “will dwell on the heights” (v. 16).

You can “dwell on the heights” with your Father. This is the promise, and the invitation, of God. Will you accept it today?

**Three practical steps in the pandemic**

The coronavirus pandemic and the economic recession it is causing are unprecedented in living memory. But I am convinced that God redeems all he allows. So, let’s close by focusing on three ways we can follow the example of Jesus in redeeming these difficult days for the sake of our spiritual and mental health.

**One: Social distancing can be reframed as an opportunity for spiritual growth.**

Jesus prayed alone at the beginning of his day (Mark 1:35) and at its end (Matthew 14:23). He agonized in solitary prayer before his arrest and crucifixion (Matthew 26:36–46). Times of isolation became opportunities for worship as he sought the strength of his Father.

Praying, fasting, reading Scripture, and meditating on the word and works of God are gifts we give ourselves in solitude. And they position us to experience the joy and peace of the Lord (Philippians 4:6–7).

When last did you make significant time to be with your Father for no reason except to be with your Father? When next will you?

**Two: Gratitude in hard times can lead to great joy.**

According to research reported by the Harvard Medical School, gratitude is strongly and consistently associated with greater happiness. My purpose here is not to encourage naivete: the crises of our day are producing unprecedented suffering for millions of people.

But the One who came to save all of mankind faced challenges we cannot begin to imagine. And yet he lived a life of worship and praise: he gave thanks for his food (John 6:11; Mark 14:22–23);
he praised his Father for revealing his will (Luke 10:21); he thanked him for hearing his prayer (John 11:41).

If we choose to “give thanks in all circumstances” (1 Thessalonians 5:18), we will seek reasons for gratitude amid our challenges. For example, we can thank our Father for his presence in our pain (Matthew 28:20). We can thank him for healthcare heroes fighting this pandemic, researchers who are working to end it, and workers who are supplying essential services.

These days are especially difficult for our churches as they are forced into strange routines. Many are struggling financially. But God is still good and his grace is still powerful.

Would you identify and thank God for a specific gift of his grace right now?

If you do, you will testify that “the joy of the LORD is your strength” (Nehemiah 8:10).

Three: Our physical health directly affects our mental health.

The Risk Index for Depression shows that an individual is more likely to become depressed if their diet is poor and they do not exercise. According to the Sleep Foundation, sleep is especially important during a time of crisis as it empowers our immune system, heightens brain function, enhances mood, and improves mental health.

Jesus modeled such self-care throughout his life:

- He rested beside a Samaritan well (John 4:6).
- He slept in a boat even during a storm (Mark 4:38).
- He ate with Matthew and his friends (Matthew 9:11) and with his disciples (Luke 22:14–15).
- During a season of intense activity, he led his disciples to “come away by yourselves to a desolate place and rest a while” (Mark 6:31).

Paul similarly prayed: “May your whole spirit and soul and body be kept blameless at the coming of our Lord Jesus Christ” (1 Thessalonians 5:23).

Will you make Paul’s prayer your personal intercession today?
What does the Bible say about suicide?

A discussion guide on suicide

The following discussion guide may be used in a small group setting or for your personal time of devotion. We hope it helps you both better understand the topic and how God might want to use you, in your specific context, to be “salt and light” on this issue.

NOTE: If you or someone you know is having thoughts of suicide, please get help immediately. Ask your pastor to recommend a Christian counselor in your area. You can call the National Suicide Prevention Lifeline at 1-800-273-8255 (TALK) or go to the National Suicide Prevention Lifeline’s website at suicidepreventionlifeline.org. Take every threat of suicide seriously.

Discussion questions

1. When a famous person dies by suicide, how does it make you feel?

2. Have you ever experienced someone close to you dying by suicide? How did you react? What do you wish you would have known or done before their decision?

3. Does our culture accept suicide? What evidence proves your stance?

4. What have you learned in church about suicide?

5. Do you believe that a Christian who commits suicide will enter heaven? What biblical proof can you cite?

6. How does the question of “the unpardonable sin” relate to whether a Christian can lose his or her salvation? Put another way, can a Christian “fall from grace?”

7. Does our culture accept physician-assisted suicide? What evidence proves your stance?

8. Have you ever given thought to what “extreme measures” you would allow to yourself if placed in a medically precarious position? Or have you had a personal experience with family or friends facing such decisions? How did they decide their chosen path?

9. If you had an aggressive disease and had been given only months to live, would you seek quantity of life or quality of life? Why?

10. What does it mean to be created in God’s image? How does this fact relate to physician-assisted suicide?

11. How do the dualistic and holistic views of the body differ?

12. How can you help others dealing with anxiety, depression, and/or thoughts of suicide?

13. What are three promises of God every Christian can claim when it comes to the problem of suicide?
What does the Bible say about suicide?

About Dr. Jim Denison

Dr. Jim Denison is the author, founder, and Chief Vision Officer of the Denison Forum. Through *The Daily Article*, his daily commentary email and podcast that globally reach 250,000+ subscribers, Dr. Denison guides readers to discern today’s news—biblically. To subscribe, visit [denisonforum.org/subscribe](http://denisonforum.org/subscribe).

About Denison Forum

The Denison Forum exists to thoughtfully engage the issues of the day from a biblical perspective. The Denison Forum provides leading insight for discerning today’s news differently, empowering believers to navigate current issues and share the timeless truth of God’s word with a changing culture.

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