



WHAT MAKES A GOOD STORY?

She was 93 years old and alone in the bay. Dying from oesophageal cancer. Cachexic and pale. She held my hand and said 'Doctor, don't waste your time with me. Help some people you can cure. I'm not worth it. I'm better off dead.'

I told this story on a BBC Radio Five Live phone-in ahead of the Assisted Dying Bill debate on 11 September. The host wanted to know my experiences on the wards. He wasn't interested in the statistics. But he was moved by my story from when I was an F1 on a geriatric ward.

At the same time the world was seeing images of a little boy washed up on a Turkish beach. We knew that 3,620 migrants had died in the eight months to this point,¹ trying to reach Europe, amongst whom would have been numerous three-year-olds. And yet the politicians' stance became more entrenched. The world seemed hardened. And then a story. An image of three-year-old Aylan Kurdi, drowned and lifeless in a policeman's arms. And everything changed. Because stories are powerful. And yet they are not limited to our postmodern world and media.

When God actioned his divine cosmic rescue plan, he didn't present us with facts and figures. He presented us with a person, Jesus Christ. His story, the greatest ever told, had reached its climax. In the Gospel accounts of his ministry, Jesus answered 61 questions. And he answered many with a story (eg Luke 10:29–37) with 46 parables recorded in total.

Aristotle stated that the best storytellers need a combination of three elements to be most persuasive: *logos* (words, statistics, data), *pathos* (the passion of the speaker connecting with the emotions of the listener) and *ethos* (the credibility of the speaker connecting with the emotions of the listener). As doctors, because of our work and the people we meet, we are often blessed with all three ingredients. We

have stories. And as Christians we are connected to the greatest story.

But are we telling these stories? We might do great work in our hospital or surgery, and this is part of our act of worship to God. But I believe we are charged with having the courage to be a body of Christian doctors who speak up prophetically; in situations of injustice, whether issues of commission or omission, to report our experiences with honesty. In the case of the Assisted Dying Bill, warning for example of the vulnerable majority who will feel increased pressure to take the quick way out to avoid 'burdening' their family (or even the F1 doctor!).

We don't need to be experts to do this. We just need to speak of what we have seen. Supporters of 'assisted dying' release individual, tragic, powerful stories in an attempt to change the law. So why don't we tell the innumerable stories where the opposite is true and death with real dignity is the reality? This would help powerfully refute the arguments head on and dispel the fear that many feel about events at the end of their lives.

But we also need to be bold to speak out our faith evangelistically. We are all called to share God's story even if it costs us our reputation or career. In Acts 4:29–30 Peter prays for God to work powerfully through the disciples' deeds. But he first prays for the disciples to speak his word with boldness, even when their lives were at risk. Have we moved from this New Testament position?

Let's boldly present God's story not just in deed but in word – prophetically and evangelistically.

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references

1. missingmigrants.jom.int