

Redeeming Medicine

BY KEITH G. MEADOR

Our desire to “save” souls is often accompanied by the neglect, even disparagement, of the diverse bodies of God’s good creation. These two books challenge the illusion of an overly spiritualized Christian story. Their view of health in the community of faith might redeem medicine and, in the end, save us all.

The Gnostic impulses of American Christianity, and American Protestantism in particular, are longstanding and pervasive. Our desire to “save” souls has often been accompanied by the neglect, even disparagement, of the diverse bodies of God’s good creation. Joel James Shuman and Brian Volck’s *Reclaiming the Body: Christians and the Faithful Use of Modern Medicine* (Grand Rapids, MI: Brazos Press, 2006, 176 pp., \$19.99) and Jean Denton’s *Good is the Flesh: Body, Soul, and Christian Faith* (Harrisburg, PA: Morehouse, 2005, 176 pp., \$16.95) both offer an embodied alternative to this Gnostic understanding of the Christian life. They do this by turning our attention to soul *and* body practices that affirm faithfulness in the midst of life, health, disease, and death.

Their angles of vision are distinctively different as evidenced by the theological presuppositions undergirding their approaches and their ultimate framing of the challenges to the Christian community. That one is an edited volume and the other coauthored means that we benefit from several points of view and, at times, a more focused examination of specific Christian teachings on the life and health of persons. Yet, in spite of these differing modes of engagement by the authors, their shared hope of capturing the reader’s imagination for living a communally formed, distinctively narrated, embodied Christian life is a gracious offering. They help us be formed in a life of soulful, embodied personhood that bears witness to the delight

of the Creator with whom we were created for relationship. The challenge both of these books give to any illusions of some ethereal, overly spiritualized notion of the Christian story is refreshing and to be commended.

HONORING THE BODY

Shuman and Volck frame a primary concern well, saying, “Gnosticism appears to have won the day, as ‘spiritualized,’ albeit profoundly secular,

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theories of progress abound, whether in neo-conservative free-market ideologies of unlimited economic growth, liberal projects of democratic expansion, or medicine’s technological promise of a posthuman future free from the limitations of a failing body” (p. 54). Although they have previously named the “power” of medicine as a cultural perpetrator of domination and distortion – the medical-

industrial complex often serves a variety of economic and political interests having little to do with the care of patients and their communities – their noting the pervasive spiritualizing of our lives by the Church and its theological abdication of discernment provides a crucial dynamic enabling these powers to have their way. It is time for the Church to articulate a more “faithful use of modern medicine.”

But to do this the Church must first face up to its past. “The church need look no further than itself if it seeks someone to blame for all of this. Not only did so-called orthodox Christianity retain, through Platonism and other sources, a higher opinion of spirit than body, but the established churches, when openly challenged on ‘approved interpretations’ of these and other points, reacted violently, suppressing and killing theological opponents rather than witnessing the fullness of the Christian life as they understood it” (p. 54). While rendering this pointed indictment without reservation, Shuman and Volck contend the Church is not without hope or resources for renewal. They exhort us, saying, “Nonetheless, it is from this sorry history that we must recover the orthodox understanding of the body, created good, fallen through our sinfulness, and restored by Christ” (p. 54).

With creative thoughtfulness Shuman and Volck name medicine “among the powers and principalities,” but such an understanding is consistent with the longstanding understandings of medicine as a social con-

struction that has pervasively abused positions of privilege and power in American society. Perhaps the more interesting dimension of this conversation for us as the Christian community is the consideration of our susceptibility to the abuses Shuman and Volck describe so well and our own culpability in propagating distorted understandings of human flourishing that allow these abuses to proliferate unabated. Do we have a voice that might challenge and mitigate such “powers and principalities,” and are we willing to bear witness to another way with courage and integrity if that means some of our own dearly held assumptions regarding personal prerogative, autonomy, and individualistic notions of entitlement might be challenged? This is not an easy proposition to engage and should not be approached lightly. Shuman and Volck give us some guideposts to consider in their conclusion as we seek to respond faithfully to their challenges. They remind us of the communal imperative, the call to service, and the need for thoughtful teaching in congregations as pillars by which to embody faithful responses to the current deficiencies of Christian communities’ engagement with medicine.

While Shuman and Volck offer much to improve the conversation on these issues in the Church, we nevertheless yearn for them to broaden their imagination regarding their breadth of understanding regarding “health,” particularly the “health of a community” which, if rightly interpreted, includes much more than the practice of medicine and the inherent limitations of healthcare and its dominion in contemporary society. Their embrace of a communal vision of the Church formed through baptism calls us to a new standard of the good and successful life. “To ‘be perfect’ is to abandon the politics of security and immerse oneself in the politics of indiscriminate love” (p. 121), which means that as baptized believers we are called to a more consummate interpretation of the “health of the community” than fully reflected in *Reclaiming the Body*. If more fully developed to include the practices of caring as formed within a community committed to knowing and being known within the arduous work of story-filled shared lives, Shuman and Volck might provide an even richer theological tapestry for revealing the intricate beauty of theology and health as a central conversation of the Christian community.

INCORPORATING THE COMMUNITY OF FAITH

Denton’s edited volume brings together a diverse collection of authors and essays regarding embodied faithfulness along with questions for personal reflection and group discussion. Linda Smith provides a concise summary of healing in the biblical tradition (p. 13), and Mary Earle offers an interesting appropriation of the practice of *lectio divina*, the repeated and meditative reading of Scripture, in the consideration of the body (p. 75). Elizabeth Moltmann-Wendel offers an intriguing reflection on “the bodily Jesus” and the relational implications embedded in the fullness of the incar-

nation (p. 12). The questions for reflection and discussion are a distinctive offering of this book and they increase its usefulness in the local congregation. While the diversity of perspectives represented is uneven at times in the depth of their development, the breadth of ideas represented provides a valuable array of opportunities for discussion in the format presented.

One of the more insightful essays in this book is Margaret Mohrmann's "The Idolatry of Health and the Idolatry of Life." Mohrmann rightly challenges the pervasiveness of "idolatry" within our culture and how it ultimately detracts from "the theological meaning—that alone gives health," in addition to "whatever suggestion of sanctity" it may bear (p. 34). Appealing to the particularity of Christian ethics and its claim on us to love and care for embodied, concretely situated persons, she thoughtfully challenges the distortions interjected by the disembodied presumptions of abstracted standard bioethics. She highlights our creatureliness and the dependence we have on God through whose image we become sacred and our bodies become holy. A right understanding of the relationship between health and the Christian life is contingent upon clarity regarding this point. Any hope of redeeming medicine requires an understanding of the health of a community interpreted through the interdependence of created beings in relation to a Creator God.

After clarifying the distinction between "pain" and "suffering," Dan Sulmasy critiques the frequent implication within contemporary healthcare that the purpose of medicine is to eliminate suffering. "Suffering is not a disease or symptom and cannot be cured or eliminated by medicine," he writes. "Suffering is only healed through compassionate love. In imitating the healing work of Christ, Christian clinicians enter more deeply into the kingdom of God" (p. 91). This perspective on suffering not only challenges medicine's illusion of eliminating suffering, but also says much more about how Christian practitioners should interpret suffering and what their responsibilities in response to its presentation should be. That suffering might present an opportunity for us to imitate Christ and "enter more deeply into the kingdom of God" is most assuredly a very different perspective on suffering than is typically presented in healthcare, but it is also distinctive from the usual response of the Christian community. Many in the Christian community have become enamored with the claims of some within the contemporary religion and health movement that spirituality can justifiably be used as an instrumental tool through which to attain health and well-being. Sulmasy's understanding of suffering as forming us for faithfulness challenges the presumption that spirituality can be appropriated for its protective utility and reminds us that suffering and illness are part of our finitude as creaturely humans. He heightens the relevance and theological significance of suffering in relation to human flourishing when he says, "Suffering is only possible for creatures that have dignity and that search for meaning" (p. 91).

Abigail Evans recounts many of the current challenges faced within the American healthcare system in her essay on “Health Care in Crisis.” While she does not develop a full argument in response to questions she poses regarding such issues as the balance of costs and quality of healthcare or the implications of restrictions on time and the quality of the physician-patient relationship, she does give a concise description of the current context and the prevailing concerns within contemporary healthcare. Evans introduces this section regarding healthcare and justice with statements from major denominations regarding healthcare: the Evangelical Lutheran Church in America, American Baptist Churches, the Episcopal Church, and the United States Conference of Catholic Bishops. The denominations vary in emphases, but they all include some commitment to improved access to healthcare and a broad interpretation of the health of communities with a conviction that it is part of the core mission of the Church to be agents of care, service, and healing. The ELCA articulates this thoughtfully in its statement, which reads, “A ministry of healing is integral to the life and mission of the Church. It expresses our faith in the power of God to create and to save, as well as our commitment to care for our neighbor.... Because it originates from and carries out Christ’s healing work, the Church’s ministry is freed to contribute to the healthcare system as well as to address its injustices” (p. 114). The integral nature of health ministries within this call to mission and a prophetic ministry of justice gives voice to the potential for the practice of health ministries to redeem the Church and medicine.

CONCLUSION

The redemption of medicine as a practice of caring formed by the Christian story embodied in a particular way of life, while elusive, is not without hope for attainment. In a culture so pervasively convinced that individualistic consumption of healthcare “goods” (frequently interpreted as technology) is the means to health, the challenges and considerations offered by Shuman and Volck, as well as Denton, provide a context for pondering the possibilities of what a reformed and redeemed medicine might look like.

It is a radical notion, if fully engaged, to challenge the “powers and principalities” of medicine and to embrace a vision of the Church as the

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concrete, social embodiment of salvation as a gift of a Creator God on whom we are graciously dependent. Medical services for the individual would become secondary to the health of the community, and our proclivities for idolatry of the self would become transformed into love of God and neighbor, with practices of worship and caring consuming our daily lives. This does not mean that we would no longer value the very real benefits in healthcare made available by physicians, nurses, and others of service among us. But it does mean that what is typically construed as “healthcare” would be understood as a subordinate good in service to the “health of the community.”

If rightly interpreted within the fullness of the gospel’s embodied, salvific, eschatological hope, this vision of the health of the community – formed in the worship of God, an honoring of the body, a love of the dust from which we came, and a gratitude for all that is given by a gracious Creator God – might redeem medicine and, in the end, save us all.



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