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Breaking Down Barriers: The Intersection of Medicine and Faith

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The mentality that science and religion are irreconcilable disciplines has become an undisputed assumption in Western culture. While there are valid reasons for this assumption, it is both too rigid and exaggerated. Typically, this separation is emphasized in the space that needs science and religion to come together: medicine. Rather than continuing to highlight the disparities between the two disciplines, the communities need to come together to provide holistic care. This care encompasses the body, mind, and—for some—the spirit.

The first portion of the research addresses the physical and mental components of holistic healing. By discussing the differences between Western and Eastern approaches to healthcare, as well as the effects of maintaining a positive mental attitude, we demonstrate how the differences between medicine and faith can be reconciled in life. The second portion of our work examines the role that the spirit plays in holistic health, particularly in suffering and dying. Oftentimes medical practice is pressured to ignore the reality of death in order to comply with our unspoken fear of death. Faith practices, especially prayer and mediation, allow for the discussion and acceptance of suffering and death. This component of holistic health can enable us to live more honest and fulfilling lives.
Holistic Health and Life

Ashley Kethcart

Introduction

There is a great disparity between the two major approaches to medicine of the East and the West. The modern western approach to medicine focuses almost entirely upon curing people and pushing as many through the system as quickly as possible. This obsession with curing thousands of people as rapidly as possible speaks to the fast paced mentality. Because of the rapid movement of people through the healthcare system, doctors do not necessarily focus on caring for individuals; rather they focus on curing the masses. Lowell Levin and Ellen Idler write in their book that although modern western medicine has many wonderful results, it still has limits and cannot account for all of a person’s health because ignores aspects of the whole person (Lowell 29). Eastern medicine often looks at more natural ways of healing by not medicating or immediately resorting to surgery as a means to an end. Eastern holistic healing also consists of meditation as a way to completely heal the body by addressing concerns with the mind too. John Welwood writes that being present in the moment--achieved through meditation-- can reduce stress in the brain and increase overall wellness (Welwood 140). It is important to account for all the good Eastern medicine can do rather than immediately dismiss what it has to offer.

In previous studies, there have been some discrepancies between the usefulness of Eastern form of healthcare versus the Western form of healthcare. In order to better understand how Westernized methods of health differ from Eastern methods and determine which is better or if the two can ever be reconciled, we must first gain a proper comprehension of the different approaches to healthcare and how they intersect with one another. Is there a better way of health that can somehow combine the two varying methods so that doctors can provide for individuals’
whole body effectively rather than solely addressing the main problem at hand?

*Unwavering Faith in Science*

Imagine you feel a pain in your lower left abdominal region. At first you dismiss it, assuming it is a muscle cramp or something equally unworthy of further attention. But as the day continues, the pain increases to the point that it is difficult for you to move. Not even Ibuprofen can provide you with relief. You feel nauseated, and a fever begins to develop as well. Your natural response is to head to the hospital. Once there, the nurses and doctors begin the extensive testing usually associated with the medical field. As they continue to eliminate illness after illness, the doctor thinks of one more assessment that should have been conducted upon your arrival. He gently presses your abdomen with his hands. “Appendicitis,” is his only answer. And then, “Immediate surgical removal will have to be done.” You are put onto a stretcher and the world whirls around you as the drugs start to take hold. Before you know it, it is two days later and you are released from the hospital, sans appendix but with some pain relievers in tow.

In much of the Western world people put their unwavering confidence of healing one’s body into the hands of cold, calculating science. When the body suffers from some sort of malady the instant response is to cut into it and provide extensive medications to numb the pain or alleviate the problem altogether. While many of these methods work very well and should definitely be encouraged, the degree to which it is revered in the Western culture has been exaggerated. Although many Eastern cultures still adhere to other methods long lost to those in Western societies, Western countries continue to search for new and improved ways to not just heal, but to rid the world of any malady that has ever come into existence. It seems that their goal is not just to heal people, but to somehow *elongate* people’s lifespans.
People in Western cultures expect rapid admittance into a doctor’s office or hospital, a few cuts and then a prompt and full recovery, or to be as good if not better than new. Nowhere in that thought process are people concerned with the state of their faith, either in themselves or in those working to heal them. Those living in Western societies have no interest in whether their doctor prayed before operating or not. Their only concern is that of having a competent doctor who fully believes in the power of science and what he or she has been taught as factual and undeniably true.

Where life and death is concerned, people only want the scientific methods and ideals which have been proven to work before or which heavily rely upon the technological advances made that could lead to complete eradication of the illness in question. Western cultures train us to have little respect for the idea that meditation or prayer could somehow heal one’s illness alone. does not hold very high regard in Western cultures. In other words Western cultures adhere far more toward a rational approach rather than a religious one. The Western world lives in a time when science and technology are so advanced that any other form of healing is regarded as alternative and definitely nowhere near as efficient or reliable.

*Faith in Faith Alone*

While the Western world reveres science and all of the wonderful things it can bring to the table, the Eastern world is more concerned with prevention and caring for the patient rather than medicine and curing. Put yourself in the Eastern world for a moment. Imagine you feel a pain beginning in your abdomen. You drink some tea, meditate a little bit (as you would on any other given day) and then convince yourself that you will feel better in the morning. Having that positive mentality alone can work wonders. When you wake up the next morning, you see that the pain has subsided and that you can now go about your daily routine. Or if the pain has not
subsided and you find yourself in the hospital under a similar scenario as previously mentioned (suffering with appendicitis) the attitude before surgery will vastly differ. You will spend time with your doctors, praying with them or inquiring into their level of belief in God. Your connection with others through the process is far more intensified than what someone in the Western world would experience. And for people living with this type of temperament, this connectivity makes all the difference in the world. The time it takes to heal is vastly decreased and some might even say your overall level of health would be greatly improved as well.

Some people question whether faith in faith alone in the natural healing process can truly work, but for many around the world, this is their main, if not only, approach to healing. It is not simply the words that are being said during prayer with doctors that improve health and healing, it is more of the attitude and belief found behind it. Does this prove the existence of God or a higher power? Not necessarily, because the overall mindset and the internal brain function after prayer can decrease stress and result in a happier way of life.

The idea of maintaining a “positive mental attitude” is for some individuals as crucial to the healing process as acquiring the appropriate medications (Doniger 131). This certainly rings true for those in the Eastern world, who tend to turn towards prayer and belief in healing rather than medicine and science. For those in these countries, there tends to be focus drawn from the inner self and connecting it to the outer self and in turn to the world around them. This process can greatly impact the body as it transitions from a body of illness to one of health (Sternberg 2). When paired with preventative measures including non-processed foods, which many in the Western world partake of, and more exercise, the positive results would drastically increase health. For many this methodology not only works well but could be considered a vast improvement upon the Western world’s approach of “cut-and-cure”.
Complementary Healthcare

There are two different kinds of healthcare that partner with the traditional Western ideology of medicine and healing. The first is complementary healthcare, which looks at pairing other forms of healing with the traditional. One important complementary form of healthcare is homeopathic medicine, which looks at providing only the prescriptions that are absolutely required, and giving the patient the bare minimum dosage of those medicines (Bright 198). Homeopathic medicine seeks to provide individuals with a more natural way of living and to limit the amount of drugs being put into the body. The idea is to harness the body’s natural healing capabilities. A basic example of this would be not taking Tylenol or Ibuprofen immediately upon discovery of a fever. Rather, advocates of homeopathy would wait and allow the body’s natural defenses and immune system try to ward off whatever infection attacking the body first before maybe helping it if the fever is maintained at a high temperature for a long period of time. After all, if one has a fever, then the body is already working to fight off whatever is infecting it. This decrease in medicinal use can reduce our bodies’ dependence and therefore tolerance levels, which can lead to an overall healthier and more pure body. This calls into question our increased tolerance to antibiotics- which seems to be a mounting problem around the world. While antibiotics have allowed our species to cure many diseases and nearly eradicate them, antibiotics seem to be losing their charm. The rate at which the diseases change pushes us to use higher dosages of antibiotics and in turn the lasting effects decrease. We are on a downward turn and it is hard to see the solution come from Western approach to healing. This is why many have turned towards believing in one’s own body healing capabilities rather than relying upon a dying method.
Another more popular form of complementary medicine especially in the Western world, and in particular the United States, is chiropractic healthcare. For the majority of people, chiropractic care is regarded as an approach to preventative healthcare. Chiropractors believe that the continual realignment of the bones will lead to a healthier body overall and help reduce one’s chances for procuring illnesses. Another major positive attribute to visiting a chiropractor regularly is the maintenance of proper nervous system function (Bright 239). The realignment of the spine and other bones can greatly improve overall bodily function as well as alleviate pain and stress on bones and muscles in the body (Bright 241). Both of these great advantages to overall increased bodily function are what have given chiropractors their distinction in both the Eastern and the Western hemispheres.

For most complementary forms of healthcare, the overall approach is to reduce the intake and dependence upon medicine and instead turn towards a more positive mentality to help combat the malady. Chiropractic care, when paired up with traditionally western forms of medicine can provide an individual with a much healthier body. It is interesting to see that although this form of preventative healthcare has gained a positive reputation in recent decades, for most of those living in the Western hemisphere, this method to healing is about as far as they go into the realm of holistic body healthcare. Their dependence upon technological advances and new medicinal practices continues to be the most sought after way of healing for those residing in the West.

*Alternative Healthcare*

The second form of approach to healthcare is called “Alternative healthcare”. These are many other forms of approaching health and these often incorporate more faith and holistic forms of healing than what is found in typical Western hemisphere. These variations of
providing health and healing often work together with other forms and are definitely more of the preventative variety. One of the many forms of Alternative Healthcare that work in conjunction with other forms of alternative medicine is the idea of mind-body interventions. These interventions which include social, familial and economic factors can help point individuals in the right direction as to which therapy to use to combat those stressors. Acknowledging these stressors and realizing they have an impact on one’s health is important and can help provide an individual with the appropriate care for their illness, which could be more mental (such as stress related) or physical (due to the lowering of one’s immune system). Some therapies that work with this methodology are meditation, yoga and hypnosis.

All of these practices correspond with what John Welwood writes in his book, *Awakening the Heart* as self-awareness. For Welwood, in order to overlook wellness as being “not sick”, it is time to stop seeking to be fully repaired and work on the whole self instead, beginning with self-awareness (Welwood 59). Taking up practices such as yoga and meditation are perfect ways to learn how to live more self-aware and in the moment. What is more interesting is that yoga, meditation and even hypnosis are all significant stress relievers and therefore work to reduce blood pressure. Yoga in particular can help increase balance and flexibility which can reduce the chance of injury in other activities. The stretching and balancing poses required in yoga help create more nimble muscles. The practice of breathing at an even pace can work to lower blood pressure and decrease one’s chances of obtaining heart disease later on in life as well as decrease stress in the present moment (Mayo Clinic). Meditation can work to help develop better self-awareness in order to better live in the moment. By keeping an even breathing pace, and clearing the mind of all past events, the brain is able to “reset” itself and reduce stress produced from
worry (Smith 161). This shows that the positive consequences help in a myriad of ways, including the physical and mental spheres.

The second form of Alternative Healthcare includes Bioelectromagnetic therapies. This form of healthcare is, according to Mary Anne Bright in her book, *Holistic Health and Healing*, “the study of interactions between living organisms and electromagnetic fields. Areas of study include the effects of exposure to ionizing and low-frequency electromagnetic radiation on health and healing,” (Bright 9). The interactions between the low-frequency electromagnetic radiation and the chemical components held within the body and especially the brain allow for changes to occur that can alter the body’s condition. For some this is comparable to what hormone-altering pills have on the body but on a different level. This approach is often used in combination with other forms of healthcare to provide healing. This can be seen most often used during chemotherapy on cancer patients.

A third form of Alternative Healthcare is herbal medicine and proper diet and nutrition. These are obviously considered to be preventative measures, which can help a body maintain itself at a healthier state and eliminate the amount of prescriptions and other harmful things being put into the body. Chinese medicine would be found under this heading and is what gives the Eastern world its stamp on healthcare. Medicinal herbs, which were the human’s first form of medicine puts itself as the tried-and-true method and provides a more natural way to help maintain optimum body function and can even help heal certain light illnesses. For instance, many people drink herbal tea to help with a cold or headache in much of the same fashion that used to transpire in ancient times. Eating properly can help keep up the body’s natural built-in defense system: the immune system which can help if illnesses do find their way into an individual’s body. It is common knowledge that people who eat healthier and partake in natural
remedies have a decreased chance of getting ill and a higher chance of healing faster than those who are more prone to eating processed, fatty and sugary foods and who depend on chemicals in order to properly heal one’s body.

*Holistic Approach to Healthcare*

The holistic approach to healthcare encompasses a vast array of topics. This makes sense due to the fact that holistic means whole and therefore must account for far more aspects than just the body in order to provide better healing. Considering the whole person rather than the issue at hand at the physical level only, can provide a new aspect of healing that according to some can deliver a fuller and faster recovery. Taking the different aspects into account can help healing by creating a better environment through the body and the mind. This means that preventative measures must be taken such as proper nutrition and exercise as well as having a positive mental attitude and maintaining a good social group for support. According to Eileen L. Daniel in her book, *Taking Sides: Clashing Views in Health and Society*, “practitioners of holistic medicine believe that people must take responsibility for their own health by practicing healthy behaviors and maintaining positive attitudes instead of relying on health providers,” (Daniel 197). This shows that knowledge of science and belief in technology alone cannot heal as well as the ailing individual can, if only they realized the importance of knowing and incorporating all parts of themselves. The first step in healing is to recognize the whole self and the effects that every piece of the body have on one another. According to Eric Ram in *Transforming Health*, there are 3 parts of the body that comprise the individual. Acknowledging all of these sections can provide better overall health. We must first gain a better understanding of what it means to be an individual at all levels, not merely the physical one.
Body as 3 Parts

There are three parts that encompass an individual and all three greatly impact the healing process and the way that a body operates in general. In order to apply complementary, alternative and especially holistic approaches to healthcare, it is important to understand and assess all parts of the body that can impact health. They include the obvious physical, as well as the mental and spiritual portions. Acknowledging all three portions as equal fragments is imperative in order to provide a better understanding for overall holistic and harmonious health.

In Transforming Health, Ram writes “Health is based on harmony with one’s self, neighbors, nature and God. It depends on one’s physical, mental, spiritual, economic, political and social well-being,” (Ram 81). This suggests that not only are the different components of the whole person a contributing factor to overall health, but the environment in which a person is involved in can also greatly impact health and healing. This once again, insinuates that belief in the healing process and the ability of one’s body to heal itself is a crucial component in the healing process. Ram argues that this mentality can have a greater impact than prescribed drugs and a surgical knife.

In order to achieve a balanced, healthy and whole person, all three parts of the body must be attended and cared for. Taking care of the physical body is as simple as eating healthy and staying active. All of those rudimentary things that all kinds of healthcare providers have been lecturing about since caring for the body became important are true in helping maintain a healthy physical body. It is important to acknowledge that even if everyone were to limit sugars and increase fruits and vegetables as main staples in their diets, there will always be varying degrees of illness due to other circumstances (as Ram writes, political and economic standings can influence one’s levels of stress and in turn, their health as well) regardless of how well we eat.
The amount of physical activity, for one, would have an impact on a person’s health. Exercising more would yield a healthier body than that of someone living a more sedentary lifestyle.

However, even if you were to eat all of the proper, healthful foods and exercise every day, your level of health may not yet reach its peak. Not until the mental portion of the body is accounted for and taken care of can a person even hope to achieve top health. Caring for one’s mental portion of the body does not mean continuing to get an education and expanding on new ideas that way, although increasing your mental capabilities can certainly produce its own rewards.

Another way to expand upon your mental and brain health is through relaxation and practicing self-awareness. Jonathan C. Smith addresses this concept in his book Relaxation, Meditation & Mindfulness. He writes that reducing stress is a huge piece of mental health and that we must practice multiple ways to relax as a way to recharge and reset the brain in order to function better mentally as well as physically (Smith 61). Welwood’s concept of obtaining “nowness” can help achieve self-awareness and provide heaps and bounds of wellness to the body (Welwood 140). Having a balanced amount of work and play can help maintain proper mental health as well. Staying in touch with family and friends and sustaining those connections which mean the most to you is as imperative as eating well and exercising. Another way to reduce stress levels in the body is to have good economic and political standing in one’s community. Granted, these are sometimes harder to monitor and ensure that they are positive influences rather than negative ones- given that oftentimes these influences are out of an individual’s control. But if all of these things are taken into account, then an individual’s holistic health will be greater.
Conclusion to Healing and Life

Although the Westernized approach to medicine and healing can produce positive results, this part of the world shouldn’t be so quick to overlook the Eastern method to healing and medicine. There are many benefits to eating properly, exercising regularly and reducing stress levels. There is also something to be said of the strong belief that those of faith have in terms of their ability to heal. When one gets ill, it is not only determined by the physical component of the body, but more importantly by the mind. Because of this strong mental component associated with healing, the Eastern approach to healing may have more stock than the West gives it credit for.

Time and time again, through different means and types of healing, we see that Eastern approaches can keep an individual from getting to such a state as needing surgery. Do not forget, that no matter which paradigm you buy into, the over-arching questions remains the same- How can individuals be properly healed? For those in the West, the answer isn’t curing or surgery, but rather taking into account prevention. If they start off on the right foot, and work to eliminate future dilemmas, then the future individual health will be vastly improved upon.

It is important to remember that even with both types of healing brought into play, neither one can completely eliminate death. No matter what your approach is to health and healing, or whether you believe in the existence of God or not. We all live, and in the end, we all cease to exist. Fearing the inevitable will not eliminate its existence. In conclusion, the future of all medicine lies in preventative care being more liberally applied and accepted along with more open communication and relations amongst those in science and those in religion. It is imperative that both methodologies are taken into account when considering healing an
individual, because of those 3 separate components of the individual. It is time that the two opposing sides relinquish their need for being the only one in the spotlight with all of the answers and reconcile their differences, accepting that both can provide a better way of living.
Holistic Health in Death

Kaity Lindgren

Introduction

My portion of our research focuses on the impact of prayer and meditation on the health of a person’s mind and spirit. It is difficult for studies to prove that prayer cures physically, but there is a great deal of authorship on the subject of prayer and spiritual transformation. While much of the scholarship on this subject is written from a Christian perspective, I demonstrate that meditation is an equally viable method for achieving spiritual transformation. This spiritual transformation, regardless of the tradition it emerges from, needs to interact with physical healing to promote a holistic image of health. Not only are both prayer and meditation catalysts for transformation, but they are also capable of interacting with each other. By drawing on both of these practices, it will become possible for all people to access transformation and, above all, wholeness.

Does Prayer Heal?

We cannot expect prayer to physically heal our gravest physical ailments. If prayer could consistently send cancer into remission or save the critically injured, modern medicine would not exist. Candy Gunther Brown tackles the subject of Pentecostal prayer techniques in her case study, Testing Prayer. Her research revealed that the healing power of prayer is not as drastic as some of the faithful believe. In fact, the ability of prayer to heal physical ailments in any capacity is questionable at best. Brown highlighted an often-overlooked discrepancy between the way Pentecostals and other people understand healing. She explains, “The term healing is used to denote improvement, not necessarily a change from total absence to total fullness of function” (202). If and when Pentecostal prayer techniques made an impact on an individual’s health, the
improvement was marginal. Prayer, then, must be connected to a different kind of healing that is independent of the body.

Marjorie Hewitt Suchocki provides some insight into the type of healing that happens when people pray in her book *In God’s Presence*. As a process theologian, Suchocki claims that in some respects, God is unchanging. Sometimes, however, God is of this world. Because God has these polarized characteristics, humans enter into a dynamic relationship with God. The most basic way to enter into a dynamic relationship with God is through prayer. Surprisingly, a large portion of Suchocki’s work shares an assumption with Pentecostals: that prayer is able to induce quantifiable physical healing. She claims, “Prayers for healing, even when the illness in question is thought to be terminal, sometimes contribute to a reversal towards health…God can combine the divine resources with those of the person’s own self and with the communities…surrounding the ill person” (64). By suggesting that God has a direct impact on the body, Suchocki draws focus away from the one thing that God could have an effect on: the spirit. This claim that God is involved with the curing of the body quickly becomes a challenge, particularly when it comes from the relational perspective of a process theologian. Because process theology asserts that God is always changing, questions regarding suffering and death yield ever more cyclical answers. Why does God heal some terminally ill people and not others? Aren’t those reversals in terminal illness just the inexplicable whims of nature? These questions, and their multitude of responses, lead us in circles without making any earnest statement about suffering and death in our lives.

While certain aspects of Suchocki’s discussion of prayer are problematic, she also makes a statement about prayer that incredibly meaningful to a discourse about death. She writes,
“There is a healing that is deeper than death” (64). A healing that is deeper than death is precisely the kind of healing that we subconsciously seek when we pray.

Creating Language and Narrative

Why do we pray? If prayer cannot physically cure us, then why do people still turn to prayer in times of illness? The question provokes a myriad answers from the devout to the skeptical. While the question of why humans pray is an important one, there is an unspoken question about prayer that often goes unasked. This unasked question is integral to a full understanding of the prayer dilemma. What does prayer do for us? What force is so strong that it drives people of all backgrounds to pray in times of distress? If its impact is so widespread, then the force must be something that every person can experience. It is primal and inextinguishable: the fear of death. Prayer promotes the wellness of human beings because it addresses our deep, universal fear and provides meaning to our lives.

Death! It is the subject every person is the least prepared to discuss; it is the thing we know nothing about; it is the great equalizer. All humans fear death in some capacity, the problem lies in our inability to face it. But why do we fear death so much that we cannot face it? Is it because death is something unknowable? The fear of death is not simply fear of the unknown; fear of death is entangled in the stories we tell, the stories we don’t tell, and in our own hearts.

Douglas John Hall regularly addresses suffering and death as a theologian of the cross. Theology of the cross traces its roots back to Martin Luther’s assertion that theology should come from what God has revealed. Of course, for Christians, God’s greatest revelation took place on the cross. In Jesus’ crucifixion, God made clear a key aspect of His nature. God’s presence is most easily seen not when we rejoice, but when we suffer profoundly. As a result,
theologians of the cross are primarily concerned with rationalizing and explaining the simultaneous existence of God and suffering. This challenging work first requires a somber acceptance—but not resignation—to suffering in the world.

Hall succinctly describes one of the major obstacles to confronting death in *God & Human Suffering*, “The modern experiment is based on the assumption that human suffering can be overcome…In other words, suffering is not a necessary or inevitable dimension of human existence, but represents a challenge to human ingenuity and inventiveness” (38). By attempting to prolong life when we should not, humans turn a blind eye to suffering and death. It is safe to assert that this activity is, at least most of the time, unintentional. Unintentional avoidance of suffering and death remains problematic though, because it points to a more extensive cultural issue. Hall enumerates three distinct phenomena that point to this malaise in our lives.

The first phenomenon Hall writes about that individual people have a difficult time articulating their own suffering. In order to avoid confronting the reality of death and loss, people bury their fears. Secondly, people are largely incapable of imagining the suffering of others. Human death and suffering are loudly broadcasted in more ways than ever before: the news, documentaries, and statistics all tell us the truth. And yet, we are numb to it. The cries of our fellows suffering and dying often fall on deaf ears. Lastly, people are unable to fully avoid the shock of death (it happens to everyone, after all), so they look outside of themselves for a scapegoat. Just like nations have looked for an “enemy,” people look for an enemy outside themselves…one that is much less formidable than death (43-45).

In numbing ourselves to suffering and death, we only decrease our chances of ever speaking sensibly about reality. The problem becomes even more basic: we cannot even begin to
face it because we cannot talk about it. Going back to the very beginning is the only way to break the cycle of silence: speech. How are we to speak about suffering and death?

Liberation theologian and mystic Dorothee Soelle is particularly well equipped for the task of discussing suffering. Liberation theology is mainly concerned with interpreting faith through the lens of the poor, who suffer more frequently and senselessly than others. Unlike Hall, who attempts to explain suffering through Jesus’ suffering and death, Soelle does not try to make sense of suffering. As a mystic, she handles the incongruences of suffering without attempting to rationalize them. Instead, Soelle searches for a way to create a language of suffering for the working poor. In her book, *Suffering*, Soelle writes that oftentimes, extreme suffering renders people mute and numb (68-69). Most likely, this is part of what has left humans silent amongst the vast suffering of their brothers and sisters. The ocean of statistics and news stories should be motivating people to act; instead it is crushing them under the weight of so much suffering and death that they have lost the capacity to speak about it. Soelle provides a basic model to breaking this silence: “The first step to overcoming suffering is, then, to find a language that leads out of the uncomprehended suffering that makes one mute, a language of lament, of crying, of pain, a language that at least says what the situation is” (70). Though it seems like a small step, nearly inconsequential in its smallness, it is the only step that numbed sufferers can make. Instead of burying our pain and being “strong” in the face of death, Soelle asks us to cry.

Like Hall, Stanley Hauerwas finds the current attitude towards medicine problematic. Though his work spans a wide range of subjects, his approach to medical ethics and Christianity is especially compelling. He draws attention to our floundering attempts to say something, anything, about suffering and death. Hauerwas claims that we are dependent upon modern
medicine to conquer death. Obviously, this is impossible. But despite this impossibility, we hope. It is precisely this unhealthy form of hope that leads to our inability to accept suffering and our drawing out death beyond sensible limits. Hauerwas believes that the best way to end this is to return to the Christian narrative. While the Christian narrative is rooted in suffering, Hauerwas warns readers that this does not mean it is possible to find a “point” to suffering. Rather, the Christian narrative provides the faithful with a community that can accept the dual existence of God and intense suffering in their lives.

In *God, Medicine, and Suffering*, Hauerwas writes, “Our medicine…reflects the way we think about death. There are few things on which we as a society agree, but almost everyone agrees that death is a very unfortunate aspect of the human condition which should be avoided at all costs. We have no communal sense of a good death, and as a result death threatens us, since it represents our absolute loneliness” (99). Death is something to be conquered because it is something to be feared. And when people routinely and inevitably fail to conquer death, they are numbed and silenced. Soelle asks us to create a language for suffering; Hauerwas calls for a similar response, but he takes it one step further. Hauerwas tells his readers that humans need to make something out of that language: we need to create a narrative.

When we attach meaning to suffering via narrative, we encounter a problem in facing death. Death robs a person of his or her narrative and that person’s story comes to an end. We find it nearly impossible to confront death because we find it nearly impossible to admit that a story is coming to an end. Hauerwas helpfully cites Howard Brody’s explanation of narrative to detail how this fear might be reversed. Brody claims, “Suffering is produced and alleviated by the meaning one attaches to one’s experience. The primary human mechanism for attaching meaning to particular experiences is to tell stories about them” (112-113). This assertion is
certainly true, and it leads to the logical conclusion that in order to find meaning and order in the
chaos of suffering and death, we need to speak about it as it is happening and after it has
happened. And how do we speak of the unspeakable? We pray.

Of course, any spiritual advisor will tell a person that he cannot just pray in times of
darkness. Prayer is also about celebrating the goodness and joy in one’s life. The reality, though,
is that people seem more likely to turn to prayer when they have nothing left to turn towards.
Perhaps as a result of this reality, there are certain notions about prayer that tell us that suffering
is a breeding ground for faith. Matthew Levering’s *On Prayer and Contemplation* includes
excerpts of the writing of Saint John of the Cross about his poem “The Dark Night.”
St. John of the Cross lived in Spain in the 16th century and was instrumental in the reformation of
the Catholic Carmelite order. “The Dark Night” details what St. John believed was a journey of a
person’s soul. This journey begins in the body and moves into union with God as the soul is
purged of the worldly and becomes unified with the divine.

The stage of “dark night” that St. John discusses in his commentary is a time when the
soul is purged of its imperfections and brought to God. Though the “dark night” is specifically
detailing a journey of the soul, it is tightly bound to the concept that suffering produces faith. St.
John of the Cross writes:

But what the sorrowing soul feels most is the conviction that God has rejected it, and
with abhorrence cast it into darkness…When this purgative contemplation oppresses a
soul it feels very vividly indeed the shadow of death, the sighs of death, and the sorrows
of hell…As fire consumes the tarnish and ruse of metal, this contemplation annihilates,
empties, and consumes all the affections and imperfect habits the soul contracted
throughout its life (124-126).
According to “The Dark Night,” a person is transformed when he or she has confronted the fear of death deep within the soul. By turning to face the “shadow of death” the person’s soul is united with God in a way that it could never have achieved previously. Turning to face death here is renamed as “purgative contemplation.” Contemplation is, in fact, one of the older forms of prayer that was often employed by monastics. We can see that using prayer to confront the fear of death is not a new idea (St. John was writing in the 16th century); we have just forgotten about the unique power prayer holds over existential fear.

Long after St. John of the Cross, another Christian weighed in on the relationship between death and faith. Søren Kierkegaard, the 19th century existentialist, was largely ridiculed during his lifetime for his repeated written criticisms of Danish Church. He was concerned with the problem he named “Christendom.” Kierkegaard believed that religion instituted by the state actually served to make people lax in their faith. He called for a faith that was both radical and acted out rather than a faith instilled by doctrine. Furthermore, Kierkegaard claimed that faith depends largely on an individual’s relationship with and in God. Like St. John of the Cross, Kierkegaard focused on the suffering of an individual. While this might seem disconnected from the goal of creating a shared narrative, it is not. It is precisely what allows for the creation of a shared narrative. The seemingly isolated experience of individual suffering gives each person a voice to add to the overall narrative.

In The Sickness Unto Death, Kierkegaard claims that most individuals are in a state of despair because they are either inauthentic or because they are ignoring the possibility of their own authenticity. Despair is not knowing God; despair is knowing God but refusing to submit to his will; despair is death. Furthermore, despair over death occurs in multiple instances: both in living and in the experience of final, biological death. The only thing worse than this despair for
ourselves and our yearning for God is that we can hide it so well that even the person experiencing it is unaware of it (57). Paradoxically, a person who is aware of his or her own despair is closer to God, but that person is in more despair than the one who is unaware of despair.

Once again, it seems that an awareness of the fear of death is the key to overcoming it. But, as Kierkegaard points out, the process of awareness is not painless: it multiplies our suffering. It is also the only way to escape despair and move towards a life as an authentic self, a self who lives in God. Kierkegaard describes this process, “But the opposite to being in despair is to have faith. And so what was earlier proposed as the formula for describing a state in which no despair exists at all, is quite correct, for it is also the formula for faith: in relating to itself and wanting to be itself, the self is grounded transparently in the power that established it” (79). A life rooted in faith can look death in the eye and be unafraid, because faith reminds us that death need not be conquered medically. Death, when confronted, can be transcended spiritually.

For many, that is the crux. We pray when we are suffering or dying because—if one’s faith is wholehearted—death is not finality. Lowell S. Levin and Ellen L. Idler examine this from a more clinical perspective in The Hidden Healthcare System. They claim that when people experience feelings of alienation, this leads them to attempt to seize control by any method possible. After all, there is nothing more alienating and lonely than death. The simplest way to gain control is to pray: belief in God promises people that suffering and death are meaningful (121). The problem with Levin and Idler’s argument is that their explanation only serves to maintain people’s desire to repress the reality of death. They assume that the purpose of prayer is to allow people to escape a confrontation with death once more. When prayer and faith are used as yet another avenue for us to turn a blind eye to the reality of death, they are being misused.
Prayer is the language that allows us to confront death and give voice to suffering. We call on prayer to help us tell a story, and we can call on prayer to help us grapple with the inconceivable and to ask God to lend this life meaning and hope. Hauerwas suggests that prayer provides us with a special kind of narrative: a shared narrative. When our narrative is consistent with those of others, death and suffering fail to alienate people from each other. A shared narrative is just what we need, and it is just what we are missing. Hauerwas claims, “What we lack is the wisdom and skills of a community constituted by a truthful narrative that can comprehend…deaths without denying their pointlessness” (147). Hauerwas believes that this elusive shared narrative can be regained in Christianity. The kind of awareness Hauerwas is calling for is precisely the kind that Levin and Idler ignore. An honest faith does not allow us to turn away from suffering so we can look towards golden gates. Honest faith holds the hand of the dying, fears death but lends the strength to face it, and gives us the words to express our anguish.

It could be said that a shared narrative would be vastly different from the individual transformations described by St. John of the Cross and Kierkegaard. It seems unnecessary that shared narrative and individual transformation through prayer be mutually exclusive. Fear of death is something that takes place within each person, as Kierkegaard claimed. In this sense, confronting our fear is a solitary activity. But strangely, this solitary activity is not a solitary experience, and this is precisely what allows for a shared narrative. Though Hauerwas thinks that this shared narrative can only be extended to Christians—those who share the same telos—this does not have to be the case.

Above all, humans are storytellers. Through telling and retelling, our reality is constructed. Conversely, our silence can also shape our world. Our silence and repression of suffering and death has created a world that cannot face the only universal truth it knows. By
giving our fear of death and suffering a language, we can begin to tell a story. It will not be a story that everyone wants to hear, but it will be one everyone needs to hear. When we can use a language of suffering to create a shared narrative about death, then we can transform the meaning of our lives.

**Whose Shared Narrative?**

Thus far, the conversation about shared narrative surrounding suffering and death has remained Christocentric. This is understandable, as many Christians feel a unique connection to the narrative of suffering and death. Jesus, the supreme example for Christians, suffered and died on a cross. As a result, the Christian community often lays claim to the concept of suffering as a method for spiritual transformation. Hauerwas believes that a shared narrative of suffering and death ought to be restricted to Christians. Yet it seems unreasonable to cordon off such a basic human experience—suffering and the fear of death—for one group. There are other religions and spiritual practices that are worthwhile examples of how to address the same concerns, particularly Buddhism. The problem is that these two traditions are often portrayed as incompatible with each other.

When we think of Buddhism, what do we imagine? For many the answers are stereotypical: monastic robes, the sound of trickling water in the background, a pagoda…In short, people often think of something exotic, something far removed from them. This image is problematic, as Edward Said demonstrates in *Orientalism*. Said correctly identifies the way Orientalism fuels Western misconceptions about the East. He writes, “European culture gained in strength and identity by setting itself off against the Orient as a sort of surrogate and even underground self” (3). The West, which is typically Christian, defines itself in terms of the East. This allows us attribute binary opposites to the West and East; the West is rational,
straightforward, and civilized while the East is characterized as irrational, mystical, and exotic (Even the terms “West” and “East” are polarizing, but we will use them here for distinction purposes). Such problematic categorizations lead us to believe that the respective spiritual practices of the West and East are incompatible; it is impossible to create a shared narrative with a culture that one sees as “other.” By examining the way an Eastern religion using spiritual practices to confront suffering and death, we will demonstrate that a shared narrative between the East and West is possible.

Buddhism, like Christianity, does not shy away from the concept of suffering or death. In fact, it encourages the acceptance of suffering and death. Buddhists believe that suffering exists because people desire things; all suffering is brought on by a person’s inordinate desire for something. One of the most common methods for eliminating this suffering is mindfulness meditation, which has its roots in Buddhism. Hooria Jazaieri and Shauna Shapiro discuss the purpose of mindfulness meditation in their essay “Managing Stress Mindfully.” They describe mindfulness as, “Knowing what is arising as it is arising, without trying to change or control it…the goal is not to get anywhere or do anything…It is about trusting that you are already where you need to be” (17). Rather than letting information discourage us, Buddhism asks a person to be both unaffected and one with it. While the concept of accepting things as they are might seem simple, one only needs to turn back to Hall and Hauerwas to find evidence to the contrary. Nothing is more contrary to mindfulness meditation than our inability to accept death. When we use exorbitant measures to keep a person in a vegetative state, or when we put our family members through endless chemotherapy sessions that make no progress, we are demonstrating our inability to accept death.
The acceptance of death is vividly demonstrated in the ancient Buddhist text, *Satipatthana Sutta*. The author (unknown due to the text’s antiquity) describes the way a Buddhist monk (bhikku) mindfully contemplates suffering and the body. He writes:

If a bhikku, in whatever way, sees a body dead one, two, or three days; swollen, blue, and festering, thrown into the charnel ground, he thinks of his own body thus: ‘Verily, this body of mine too is of the same nature as that body, is going to be like that body, and has not got past the condition of becoming like that body (5).

Buddhist monks are meant to recognize how little their bodies mean; all bodies suffer and make their way to the charnel ground. This recognition of the body’s impermanence is vital to understanding and practicing Buddhism. While Buddhists do not claim this is a simple matter, it is absolutely necessary to be released from the cycle of rebirth. Buddhists believe that suffering causes the cycle of rebirth, whether we are aware of our suffering or not. Human suffering is caused by attachment to worldly pleasures. Though Kierkegaard did not believe in a cycle of rebirth, he does share some similarities with Buddhist philosophers. He, too, thought that a person could suffer without begin fully aware of it and warned against the dangers of attachment to things other than God. Unsurprisingly, both Kierkegaard and Buddhism have a reputation for being somewhat melancholy.

Because Buddhism places such a heavy emphasis on accepting suffering and death, people often misunderstand it. However, this misunderstanding only serves to prove our cultural inability to accept, or at least think about, death. The bhikkus are instructed to consider the bodies of the dead as bodies identical to their own. This is not meant to dishearten, but rather to remind a person that their body—and their life—is not permanent. Such a lesson can easily be misconstrued as no more than a brutal point to be made about the suffering and death of all
people. However, Thomas G. Plante dismantles this myth in *Contemplative Practices in Action*. He claims, “The entire point of Zen is to transform suffering into peace, joy, and liberation” (161). The goal of Buddhism, then, is to accept suffering and death so fully that a person is transformed. Just as St. John of the Cross and Kierkegaard claimed that confronting immense suffering and fear of death could transform a person, so too does Buddhism. Theologians of the cross, such as Hall, also cite suffering as an avenue to joy. Hall explains this seemingly paradoxical statement, “The object…is to identify oneself with the suffering that is already there in one’s world, to let oneself be led by the love of Christ into solidarity with those who suffer and to accept the consequences of this solidarity in the belief—the *joyful* belief—that in this way God is still at work in the world” (145). Although it may seem as if Hall’s statement here can only be applied to Christians, this is not necessarily the case. It is important to draw attention to one of the central aims of identifying oneself with suffering. Hall is calling for Christians to enter into solidarity with those who suffer. Who among us all has not suffered?

The common thread between both Western and Eastern spiritual practices and methods of confronting death is introspection. Introspection is not bound by dogma, culture, or location. It is universally accessible, just as suffering and death are universally experienced. Because of this, introspection is one of the first steps towards creating both a language and a shared narrative about death. Roberta C. Bondi describes the role of introspection in prayer in *To Love as God Loves*. She uses on the examples of monastics to show how prayer can look today, “The monastics assumed that all of us know ourselves at some level much better than we want to admit we do…Christian introspection is meant to lead to love, the love of God and the love of other people. This kind of healing introspection is always done in the presence of God” (78-84). Through introspection, Bondi claims that we can come to know ourselves better. As we get to
know ourselves better, we can begin to discover fears and faults that we were previously unable to admit. St. John of the Cross’ “The Dark Night,” was a detailed description of the process of spiritual introspection. Kierkegaard similarly claimed that spiritual transformation occurs after we become authentic, which requires deep introspection. Mindfulness meditation, too, depends heavily on introspection. It can be practiced at any time: eating, walking, and breathing are all activities that can be performed mindfully. By focusing on each individual movement or breath, a person can become more aware of both body and mind. This awareness promotes acceptance, which eventually leads to a release from suffering and spiritual transformation.

A universally shared narrative of suffering and death does not need to include only Christ’s particular story of suffering. It does not need to only include the Buddhist belief in birth and rebirth. It simply needs to allow for individual introspection and acknowledge the solidarity of those who suffer. This narrative, founded on an ability to confront suffering and death, will have the power to make life honest and whole.

An End to Personal Narrative

While a shared narrative of suffering and death is everlasting, our individual narratives are not. Constructing an honest story about the reality of death in our lives gives power over our own individual narratives. When we lead lives guided by introspection, we are better able to accept death. By consciously accepting life in all its unpredictably, unfairness, and harshness we can also begin to appreciate it. Children die of cancer, car crashes rob countless people of a long life, and people are victims of unspeakable crimes. We do not turn away from these truths because they are painful. We extend our hands and our hearts to those who suffer, whether they are Buddhist, Christian, agnostic, or not rooted in a tradition other than skepticism. We cry with them, and recognize that full lives have not been promised to us. But we can always choose to
tell a story rather than to remain silent. As we tell stories, we can begin to put the pieces back together. As Simone Weil writes in *Waiting for God*, “Joy and suffering are two equally precious gifts both of which must be savored to the full, each one in its purity, without trying to mix them. Through joy, the beauty of the world penetrates our soul. Through suffering it penetrates our body” (78-79).

Though the stark reality of suffering and death in our lives often seems like it pervades every aspect of our lives, Weil reminds us that it cannot touch the soul. This truth is universally expressed in Hall, St. John of the Cross, Kierkegaard, Hauerwas, and Buddhist philosophy. Prayer and meditation have the power to grant us a healing that is deeper than death. In creating a narrative that allows us to accept that death will inevitably claim our bodies, we reclaim our joyful souls.

**Conclusion**

By redefining the meaning of health in the Western hemisphere, it will be possible to create a more holistic process of healing. Rather than relying solely on narrow methods of physical healing, such as antibiotics and radiation therapy, we ought to widen our horizons of what it means to be healed. Certainly, antibiotics and cancer treatments have their place in medicinal practice. But those do not need to be the only methods we use for healing. Alternative and comparative healing practices can also have a positive impact on physical healing, particularly on stress; in turn, these affect a myriad of other aspects related to bodily health.

In addition to the health of the body, healing should also connect to the spirit. Because death is an unavoidable constant in every person’s life, it becomes necessary to address this issue when discussing health. Historically, the issue of death has been most prevalently tackled by religious thinkers of various traditions. Christianity and Buddhism, two traditions typically
considered incompatible, are closely related in their definitions of life, suffering, and death. If a conscious effort was made to use these approaches to life and death, then we could create a universal narrative. This, perhaps more than anything else, would enable people everywhere to accept (or at least confront) suffering and death in the world. By giving a language to death, people find health and healing not only in death, but also in life. Together, these forms of healing could supplement existing medical practices to promote a new kind of healing. This healing unites science and religion so that people can be whole in life and in death.
Works Cited


