

## Perspective/Opinion

## The Call of Christ in the Care of the III: Medical Care as a Communication of Grace

By Nicholas Sparks and William Phillips

One of the authors (William Phillips) has had the opportunity to help provide medical care to those experiencing homelessness on the south side of Chicago. This often involves clinical encounters beneath bridges and on the street. These encounters bring the deep connections between physician health, mental well-being, socioeconomic disadvantage, and spiritual turmoil to the surface. One occasion, in particular, manifests how a Christian conception of human flourishing informs clinical encounters...

One evening our physician was examining the painful and soiled feet of two patients for over an hour. The examination and treatment were performed on a median between two roads, running beneath a bridge. While the physician was delivering care to alleviate suffering and improve the patients' walking, this is not *all* that took place. The symbolic repetition of foot washing, reflecting the example of Jesus Christ at the Last Supper, was not lost on William. And even if unaware of the fact, the physician was promoting the dignity of the patients by being a sacrament – a visible occasion of grace, love, and healing – to them.

The tenderness and humility with which the physician applied cream to feet soothed both body and soul. The physician's actions embodied solidarity and community with the patients, an experience that many of our patients are deprived of through separation from family or dismissal by onlookers. During the examination and treatment, a medical student volunteer played chess on a makeshift table with another patient while we waited. This too was a sacramental act. The simple act of playing a game, in the context of providing medical care, communicated fraternal charity and care in a way incommunicable by words alone.

A Christian conception of human flourishing recognizes healing as a ministry that advances the material well-being of the other, engaging the whole person. By doing so, the clinician can elevate physical care to a level that transcends its mere status as technical care and advances the flourishing of the other holistically. These actions continue the ministry of Christ, communicate love, and enact healing.

In the gospel of Matthew, Jesus teaches his apostles with the following:

Then the King will say to those at his right hand, 'Come, O blessed of my Father, inherit the kingdom prepared for you from the foundation of the world; for I was hungry and you gave me food, I was thirsty and you gave me drink, I was a stranger and you welcomed me, I was naked and you clothed me, I was sick and you visited me, I was in prison and you came to me.' Then the righteous will answer him, 'Lord, when did we see you hungry and feed you? Or thirsty and give you drink? And when did we see you a stranger and welcome you, or naked and clothe you? And when did we see you sick or in prison and visit you?' And the King will answer them, 'Truly, I say to you, as you did it to one of the least of these, my brethren, you did it to me.' (Matthew 25: 34-40)

Service to others has occupied a central role in Christianity since the time of Jesus and the apostles. Early Christians were distinguished from the surrounding culture in large part because of their communal life and their care for the poor and disabled, orphans and widows, rather than by any well-developed theology or set of doctrines. This lifestyle embodied a communal pursuit of flourishing in light of the risen Christ.

We often associate service with sacrifice, and understandably so. Caring for others, on both great and little occasions, often requires us to forsake our own desires and plans and renounce comfort in order to attend to the needs of others. More forcefully, as the past few years have taught us, it involves a real risk on the part of the one giving care.

But as the passage quoted above suggests, service of the indigent and ill, the unhoused and the imprisoned offers a sort of blessedness to the one who serves, attained through sacrificial love. We should not, in the Christian view of things, overlook the possibility of our flourishing in the midst of providing care. While flourishing in medicine at times requires we step away from the sufferings inherent in care, there is ultimately a form of flourishing offered to healers precisely through their healing ministry.

The imperative to care for the body is rooted in what humans *are* and what they are destined *for*. In the book of Genesis, Adam, representing all humanity, is drawn and molded from the dust of the earth, receiving life through the in-breathing of God. Humans are embodied spirits, 'dust bound for heaven,' placed upon the earth to cultivate it in loving union with God. This primordial union is thwarted by sin which ruptures our relationship with God and our fellow humans. The fruits of sin are toilsome labor, pain, death, and the loss of that primal unity for which we – and all creation – were destined. The Old Testament, then, traces an overarching narrative of restoration: God promises, in the midst of human folly, the redemption and restoration of humankind. And through a series of covenants, with Noah, Abraham, Moses, and David, God repeatedly works to draw humans back into communion.

The arc of this story culminates in the person of Jesus Christ who, through ministry to the sick and the sinner, announces the arrival of the Kingdom of God. The prophet Isaiah, foretelling the Messiah, announces

when he comes, he will open the eyes of the blind and unplug the ears of the deaf. The lame will leap like a deer, and those who cannot speak will sing for joy! (Isaiah 35: 5-6)

Spiritual and physical healing are both the signs and the fruits of this Kingdom, inaugurated in Jesus's ministry and continued after his death. Jesus sends the apostles to 'baptize in the name of the Father and the Son and the Holy Spirit.' (Matthew 28: 19) The apostles and their helpers enact this mission by serving the poor and sick.

Healing, then, is central to the ministry of the Christian church and to the Kingdom of God. A Christian conception of human flourishing in this context recognizes the integral unity of the human person. Care is given to the person who is embodied but is not *only* a body. This body bears the memory of its being given by one's parents and, ultimately, one's Creator. The body is thus a sacrament, whereby we receive and manifest love.

The integral, sacramental character of the body enables clinical interactions - even the seemingly mundane — to take on a deeper significance. For physicians are given the opportunity to transform medical care into a sort of *sacrament*: to transform it from a technical process at the service of the body into a deeper occasion for communication, through care, love and grace to the patient. Accordingly, those to whom the work of healing is entrusted are charged with a wonderful responsibility, a talent to be invested and cared for wisely. (cf. Matthew 25: 14-30)

Each person receives gifts for the sake of others. The rich, for example, are given their riches so that they might alleviate the sufferings of the poor. Clement of Rome (c. 35-99 AD) entreated early Christians with the following words: 'Let the rich man minister to the poor man; let the poor man give thanks to God that He gave him one through whom His need might be satisfied.' So, too, healers are given charge of the sick so that they might respond with love and compassion to the distress of the ill. In all this, we are permitted the dignity of participating in the dispensation of grace and healing.

Importantly, the person whom we counsel, heal, and console is not simply the patient in front of us. But in treating the person before us, we are also afforded the chance to care for Jesus. This opportunity is given to the healer to offer the healer the opportunity to exercise and grow in the virtues, such as compassion, mercy, and charity. Because of this, the flourishing that the healer aims to impart through care can also return, albeit in a different form, through their delivery of care.

Strikingly, by growing in the virtues, we do not simply obey the teachings of Jesus, but we also come to resemble him. By radiating charity, compassion, and mercy to one another, we relieve

the burdens of this life and make our lives together into a foretaste of heaven. So the virtues practiced in medicine meet the immediate bodily needs of those whom we serve, but they also instill in us those virtues necessary for human relationships, and ultimately for entrance into heaven.

The intrinsic vulnerability of human life, then, binds us together, healer and patient. But instead of simply being a lamentable fact about human existence, this relationship born from vulnerability invites healers to practice the virtues and thereby serves as a preparation for heaven. By serving those in need, our souls are formed in such a way as to prepare us to enter into heaven, since 'without holiness no one will see the Lord.' (Hebrews 12:14)

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