## THEOLOGICAL IMPLICATES OF THE PARADIGM SHIFT FROM DISEASE TO **DETERIORATION**

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Health care, it now seems, will be the widest plank in the '92 presidential electoral campaign. Two events yesterday harbinger it: (1) The Administration's health chief, Sullivan, held the first three-way (gov't., med., & ins.) conference, feeling the oncoming threat of nationalization (McNeil-Lehrer spending most of its hour in an ensuing debate), & (2) the Administration's candidate for Penn. senatorship, Rich. Thornburgh, lost to a little-known whose major plank was "national health care" (Thornburgh admitting, late last night, that it was "the health issue" that most accounts for his slide from +47% to -20%).

There's no such thing as a political inevitability, but health nationalization comes close. And only the abortion issue (soon, possibly, the euthanasia issue)

is more complex.

For the reasons of **fairness** & **efficiency**, I'm for nationalization. Americans go for the marriage of idealism & pragmatism, so the "go" light is glowing ever brighter.

As I see it, underlying the issue are two standout facts. fact is that we must adjust our medical thinking from disease-mindedness to deteriorization-mindedness. This Thinksheet is concerned chiefly with the theological component of this paradigm shift. The second is the <u>moral</u> fact that nationalization will further widen America's rich/poor gap. Equal medicine for all, the human ideal, is economically impossible under this or any other government, as procedural costs expand exponentially; so the best we can hope for, short of the Kingdom of God, is semisocialized medicine--the public sector providing each person a healthcard entitling to basic health services, the private health sector supplying additional care to those who can afford it. The net result would be an increase in fairness, though in some areas there'd be a decrease in justice. Now, AIDS babies of the poor have almost as good care as AIDS babies of the nonpoor; but under semisocialized medicine, they'd not have as good care as now, unless the private sector found ways to close that gap. Bleeding-heart orators are going to make it hard for us to keep focused on the net increase in fairness. They may even convince the country of more justice instead of more fairness, utopian justice being fairness' enemy.

[Just remembered: 58 years ago I was in a formal debate on socialized medicine. I've been pro a long time!]

Now let's move from the moral fact to the intellectual fact:

- The Bible is a book of **life**. It's first story (=its first chapter) has no carnivores, so no omnivores: all us animals & humans are herbivores. As we are physiologically closer to the other animals than we are to plants, for our some two million years we've interassociated—as in animal sacrifice—their deaths & ours. (WARNING: Don't overread the first story's vegetarianism! The third story [Gn.4] seems to reject it: God prefers Abel's meat to Cain's grain.)
- But also the Bible is a book of **death**, which it views variously as punishment, natural, friend, & enemy (conquered by what Christians participate in, viz Jesus' Cross & Resurrection). In this last, the mystery of death is only comprehended. To apprehend death through one point of view--eg that it is "natural," our culture's current death-dogma--is to rob death of one of its undoubtable characteristics, viz that it is a mystery.
- Dying, the entrance to the mysterium of death, is shifting from the puzzle of disease (in spite of AIDS' dramatic attention to disease) to the puzzle of deteriorization. A poem Goodwife Hospice Chaplain Loree read to me last night (given her yesterday by a dying patient) poignantly weaves together, on a warp of atheist (nontheocentric) egocentricity, the notes of nature, deterioration, & mystery:

I feel like the tree with each cold wind that blows against my soul. I lose a leaf and then anothertill soon I know I will stand naked too. Do I also remain the tree stripped of beauty and grace? Do

- I stand, to return some day beautiful again? / I WONDER. / Each day I die a little more, and still I too struggle to hold my lovely leaves. When I lose a leaf, I look for another to hold fast to my soul. / I am a tree, and will stand fast against the wind and cold. Shall I return to life again? / I WONDER. / BUT SOON I SHALL KNOW.
- "Hurry! Hurry! Hurry!" were the last words of my only uncle, who died of deterioration. As modes of dying, disease & deterioration have different clocktimes: for the latter, the clock runs more slowly, ticking out "this petty pace from day to day.../...to dusty death," as Macbeth put it. I won't bother to look it up, but the Greeks probably had for it the word "chronoanagke" (the oppressive weight of the inexorable passage of time). The theology of time as a creature of God should be a factor in the shaping of a pastoral care appropriate to the paradigm shift from disease (which is easier to focus on, somewhat diverting attention from time) to deterioration.
- To the extent that disease is easier to focus on, deterioration tempts one to dwell on what one can no longer do, ie on disability. Indeed, so true is this that deterioration could be existentially defined as progressive disability. One often hears "I'd rather be dead than disabled." Well, deterioration-dying is both! One more & more belongs in the general category of the world's cripples & may experience as applicable to oneself whatever horror & loathing one has for cripples. Only one of the possible spiritual benefits here is learning compassionate prayer for all cripples, prayer in which petition & supplication merge.
- Deterioration-unto-death can be <u>organ-specific or general</u>. The 137-year-old Egyptian whom I held up to preach in 1942 (age soon verified by U. of Chicago autopsy) faded away all over his body at once. (Long ago in Illinois I met quite of few who remembered seeing "Mr. Lincoln," but that Egyptian evangelical is the only one I ever met who remembered seeing Napoleon. How mysterious time is, along with death!) The less organ-specific one's deterioration, the greater the paradign shift (in this Thinksheet's title) & the more theologians & caregivers need to pay attention to the difference.
- But my Egyptian was undeteriorated in <u>spirit</u>, in mind. He disproves the myth that "As you get older, your mind 'goes'." True, the medical extension of physical life opens us to some brain-mind deteriorations former generations had much lower stats on. But inner-life deterioration is not age-specific: Macbeth describes himself as having, though a young man, "a mind diseased," obsessed with "a rooted sorrow," oppressed with "written troubles of the brain," & close to death. Modern life has only increased the etiologies of mental-spiritual deterioration unto death (by "natural causes," by direct suicide, & by euthanasia, the last no longer limited to terminal cases). And then there's Altzeimer's....
- Right now, there's statistically more of all kinds of dying-by war, disease, famine, & deterioration (call them the Four Horsemen of the Apocalypse)--than ever before. Escalating population pressures will probably intensify all four As for the fourth, the deteriorating will be nudged to move faster toward death: the social-sanctional scale will tip from anti-suicide to pro-suicide, a tilt full of peril as well as promise. We are beginning to get some books preparing us for the tilt. From the standpoint of Christian theology, the most important so far is A.J.Droge & J.D.Tabor, A NOBLE DEATH: SUICIDE AND MARTYRDOM JEWS IN ANTIQUITY (H&R/91)--concluding that CHRISTIANS AND voluntary death, the decision to take one's own life or allow it to be taken, was considered not a sin but a noble choice, provided sufficient justification. the later taboo against suicide fixed itself on Christendom is another story. is certain now is that the deteriorated-disabled aged who choose to remove themselves rather than continue to be a frightful financial burden will be regarded as acting nobly, selflessly (whereas the taboo says that suicide is selfish, as indeed it usually is).
- The deteriorating are freer than are the diseased to appreciate, with wonder, thanks, & praise, the exfoliating. When your body begins to wrinkle, God is inviting you to pass unwrinkling things more slowing. Newborns, both

- mammals & leaves. Leaves in our greenhouse, each one a morning miracle of life over death & a promise of its plant's wrinkled budding & open flowering. In the very deterioration process, the soul can become a wrinkled newborn, wrinkled in anticipation of fullness.
- The spiritual discipline of letting-go-&-letting-God has, under deterioration, a longer course to run than is the case with most diseases, & thus provides greater opportunity for the slow-developing virtues-powers of the spirit. One of these is the art of disengagement-divestment, the mission of maximizing blessing to others & the glory of God in dequantitating, distributing with intelligent compassion what you can't take with you. The Golden Rule of an acquisitive society is that gold rules: the Golden Rule of one's days of deterioration is that love, which should always have ruled, now rules. Here, with repentance & faith, is the heart of ministry to the deteriorating.
- The deteriorating rich may see themselves as having a special ministry to, & social-political action on behalf of, the deteriorating poor. Materialism & its motivators, including underregulated "free" markets, constitutes a pseudopneuma, a false spirit in society (demonically corresponding, Bloy said, to the true Spirit in the church). Some of the deteriorating will respond to the challenge to make this endeavor a last earthly offering to God, a final action-praying of the Lord's Prayer. (Henri Nouwen: "You are Christian only so long as you constantly pose critical questions to the society you live in,...emphasize the need of conversion both for yourself and for the world,...keep saying that a new world is yet to come,....believe you have a role to play in the realization of the new kingdom,...urge everyone you meet with holy unrest to make haste so that the promise might soon be fulfilled,...keep looking for a new order, a new structure, a new life." Feeling less the distractions of possessions, power, & personality, the deteriorating are free to feel more the attraction of beloveds, beloved community, God the Beloved.
- As a special <u>boundary</u> case (deterioration + disease), AIDS offers special opportunities for reflection & action on the paradigm shift. The category of "degenerative diseases" overlaps both, but AIDS is unique in beginning with decisive HIV immunological deterioration & ending with a disease.
- At \$36,000 per annum, long-term nursing-home care is for the economic aristocracy (better, plutocracy). Biblical equity (fairness to the poor) & French-Revolutionary equality are both offended by this lace-curtain warehousing of the affluent. To American idealism, which melds the two traditions, existential inequality is easier to bear than is any structural inequality, such as the present nursing home & the oncoming national health authority (which will be able to provide only limited, "basic" health services to the poor). What implicates here for (1) how the deteriorating see themselves & (2) how society sees & treats them & (3) what's "the Christian thing" for the Christian deteriorating to do about it in their "muddy vesture of decay" (as Sksp. put it in "The Merchant of Venice")?
- In hope of enriching thinking on this Thinksheet's theme, a few thoughts on <u>nature</u>. (1) The deteriorating are in consonance with planet earth's. (2) In 1967, the rotation of the earth as a measure of time was abandoned in favor of the atomic clock. (3) Earth's running down faster than is the universe (if the universe is), so earth's rotation is now slower than in 1967, so occasionally a leap second must be added to the year. Shifting to the other side of the space-time continuum, (4) in 1983 the length of the meter (which regularized the definition of area & volume [liter]) had to be corrected in light of the new (1967+) value of the second. (5) QED, both measures—time & space—are now *completely divorced from earth....* This paradigm shift in <u>physics</u> parallels others, the ones particularly pertinent to theology being the paradigm shift in <u>ethics</u> from humanity-centeredness (anthropocentricity) to life-centeredness (biocentricity), & the paradigm shift in <u>dying</u> from disease to deterior(iz) ation. All three shifts are Copernican in that they are, each to its own field, as potentially as disruptive as was

Copernicus' from geo- to helio-centricity to <u>cosmology</u>. We, & our descendants, will see whether that potentiality is realized in radical changes in valuings within the polarites of humanity/ecology, individual/society, body/mind-soul-spirit, lifedeath. Properly understood in the new contexts, the Bible will be more an accelerator than a brake on this world-process—though as it's now generally being used, it's more the latter than the former.

My note on nature has another pertinence, viz the radicality indicated in italics (above). As our new way of measuring, "divorced from earth," transcends our old way, our new ways of seeing-understanding-doing will have to transcend the traditional ways, or the quality of the environment  $\epsilon$  of human life will decay to the level of mere survival, billions of human beings picking at detritus like gulls on a garbage dump. God cannot be trusted to prevent the consequences of man's sentimental stupidities.

- Great literature should be mined for wisdom on how to live with deterioration. Obviously, the Bible. Cicero's DE SENECTUTE ("On Old Age"). And oh that Shakespeare: "With mirth and laughter let old wrinkles come" ("Merchant of Venice"); and just from "As You Like It": A "fool," looking at a clock, observes that "from hour to hour we ripe and ripe, / And then, from hour to hour, we rot and rot." "All the world's a stage" on which each of us plays "many parts" in "seven ages," the seventh being "second childishness, and mere oblivion, / Sans teeth, says eyes, sans taste, sans every thing." But slow aging can "feelingly persuade me what I am," so (next line) "Sweet are the uses of adversity," freeing me to find "tongues in trees, books in the running brooks, / Sermons in stones, and good in everything."
- Deterioration is increasing <u>debility</u>, the can't-do antonym of can-do ability. God, who gave us the courage to do, now offers us the courage to be. Disability of body should have a negative correlation with ability of spirit. In Hebrew today I read, "From generation to generation we will story-tell Your greatness."
- 17 Tim Stafford (CT 16 Sept 91) rightly says, "In the Bible old age is not a problem. Rather, old age is consistently treated as a blessing. To die 'full of years' is the fondest wish of biblical characters" (eg, Zech.8.4f, Is.65.20). Rightly he contrasts this with the Greeks (Aristotle's loathing the degeneration of the old) & the Teutons (in fairy tales, the older people are, the nastier). wrongly he fails to take into account the rarity/superfluity factor. Then (in the Bible), few made it into old age, & those who did had the same relative value as pearls, viz rarity. But now, today & tomorrow, earth's being sodden down with slowly deteriorating "elder citizens," burdens to themselves, their families, any healthcare system, & the environment. "New occasions teach new duties," but Stafford's project--against suicide & euthanasia--is to keep the aged alive as long as possible, a project proving increasingly insane & even cruel. I heartily agree with him: "Life is reflecting the goodness of God through the joyful acceptance (and transformation) of all things. Old people are as good at these activities as younger people, maybe better." But I cannot agree with his limiting his generalization, in the instance of death, to the passive acceptance of deterioration. But Stafford's AS OUR YEARS INCREASE has many sound biblical-Christian insights.
- Barring Kingdom Come, our species may be on a <u>bell curve</u> from mere survival to brief flourishing (say, 3,000 years) to mere survival. "May be," but need not be. Nor need the human individual be on such a bell curve: in this case too, at life's shutting down something better may be chosen than mere survival.
- The category of "deterioration" can be usefully viewed as anti-progress or reverse evolution—of the body individual, the body social, the body ecological. In Bolivia, a New Tribes Mission (evangelical Protestant) discovered a tribe badly deteriorated in spirit, physical health, & skills (even having forgotten firemaking), living in a badly deteriorated environment. Dire prophecy for all humanity unless we can stop some present trends & reverse some others.

What is the role of <u>medicine</u> in disease dying? It's greatly suppressed disease, thus extending life  $\epsilon$  increasing the population. And in deterioration dying? It's both slowed deterioration  $\epsilon$  extended for millions the deterioration period, thus increasing the population. And of course it's increased the population by increasing fertility  $\epsilon$  decreasing infant- $\epsilon$ -child mortality. Population increase is a side-effect of medical efforts on behalf of life  $\epsilon$  longevity: physicians are only indirectly a factor,  $\epsilon$  not the only factor, in producing the great new curse of our time  $\epsilon$  primal threat to our future.

IRONY: The more medicine succeeds in its traditional objectives, the more it fails us vis-a-vis the bad news of demographic damnation....Follow out the irony. Some historians of medicine say that till 1830, when blood-letting was denounced, medicine did humanity slightly more harm than good. As I've just survived three weeks of a hospital-acquired horror, I'd be inclined to move that date forward. What evaluation will the future make of medicine? Unless population can be brought under homeostatic (environment-sustaining) control, modern medicine will be judged to have been a net Bad Idea. A physician once told me he considered the clergy occupation "futile." Will the future judge his occupation to have been worse than futile? Meanwhile, I thank God for (most of) medicine's effects on me & millions of others.

My observation is that the deterioration-dying are more subject to depression than are the disease-dying. The slow attrition of one's physical-&/ormental powers disrupts the daily-weekly life-rituals, along with one's body's circadian rhythms. The more decisional freedom one has, the greater the danger of slumping into a hypochondriacal-egocentric funk....Recently coming upon such a creature, I asked myself this: Who in our church knows this person & might help her establish new rituals getting her out of herself & into some sort of caring for others (and two women came to mind)?...The church's rituals are vital, but do not penetrate the whole of life as ancient rituals did. In A TIME TO MOURN, A TIME TO DANCE: THE EXPRESSION OF GRIEF AND JOY IN ISRAELITE RELIGION (PenState/91), Gary A. Anderson shows how that culture molded emotional-spiritual life to fit particular patterns of meaning: ritual behavior shaped feelings & even cognitive life. (Three generations ago, the James-Lange theory put it this way: We more act ourselves into feelings & ideas than the reverse.) In rabbinical texts, "mourning" & "joy" are not simply emotional states but sets of ritual behaviors. JOY behavior (eating, drinking, festal song, anointing with oil, festive attire, sex) is the exact antitype of MOURNING behavior (fasting, dirges, putting ashes on the head, rending one's garments or putting on sackcloth, no sex [ie, continence]), & the two behavior sets are not to mix (eq, no "mourning" on religious feast days). This mentality is not specifically Israelite; it's generally ancient Near Eastern (appearing, eg, in the Gilgamesh epic)....According to this way of wisdom, counseling the deteriorating depressed should center not in "How do you feel?" but in "Do this!" To the extent of whatever truth there is in the feeling-is-feminine, action-is-masculine analogy, counseling today is too feminine. Why? Because of (1) compassion, (2) fear (of offending the counselee), (3) greed (protection against loss of income from the counselee), & (4) low estimate of one's authority as counselor....For decades my counseling style has been behavioral: "Try one of the actions I'm suggesting before I see you again" (implied more often than stated: "or I'll not see you again"). Refusal to try behavioral change proves the person wants not a counselor but a friend, & the counselor as counselor has no business being a friend. "masculine" style lacking in compassion? Rather, it's free of sentimentality, the emotional curse of a permissive society.... Does this make for dependence on the counselor? No, on the new behavior that "works." Is not such dependency a form of addiction? Not if the counselee accepts the counselor's instruction (1) to keep open to finding a behavior that "works even better" & (2) to view the behavior as self-chosen ritual, "ritual" in this sense being (as in James-Lange & G.A.Anderson) programmed behavior controling feelings-emotions-moods. Psalter, "Praise the Lord!" is not when you feel like it; it's doing it so you will

- feel like it. But doesn't praising God (& going to church!) lack authenticity when you don't feel like it? Only if one is so self-indulgent & arrogant as to assume that whatever "I'm really feeling right now" is authentic (let's call it the Esalen disease). But if the question of authenticity is widened, as ethics demands it should be, to include the etiology of one's "right now" feelings, then one can see that if the behavior causing the "right now" feelings was inauthentic, the feelings share that inauthenticity. The human project is to arrive, personally & socially, at the most pro-human, pro-environment behavior. Ethical reasoning focuses neither on the behavior (the hypermasculine error) nor on the feelings (the hyperfeminine error) but on the behavior-feelings loop.
- We are what we've dreamed, & the deteriorating are responsible for their own dream control. Dreams are made of such stuff as we are, & (Sksp., "The Tempest") "We are such stuff as dreams are made of, and our little life is rounded with a sleep." The categories of dreaming? They are the categorizes of theologizing: creation, sin & damnation, repentance & redemption-transformation-salvation. In a rough way, what gets our attention during the day holds our attention during the night. If during the day the deteriorating dwell on the possibilities in the difficulties, dreaming will be creative; if more on the difficulties in the possibilities, destructive. Optimism/pessimism has more to do with one's decisional life than with one's personality type.
- Getting old is a down. It gets harder to energize our enthusiasms, sustain a sense of adventure, nourish our ideals, continue to risk with courage instead of hunkering down in one's own groaning of the creation (Ro.8.22). But growing old is growing food that couldn't be grown on the lower slopes. It is praisingthanking God for blessings appropriate only to life's last stage, many of them surprises one could not have imagined earlier. It is spiritual triumph over the declining body's persistent cries to be given exclusive notice. It's rejoicing in freedom from this world's bondages. The good things the Bible has to say about "length of days" need saying now more than ever, now when the population's % of undiseased deteriorating is the highest in human history....l love this Wm. Law, that ruthless asserter of humanity's decisional power (AN APPEAL TO ALL THAT DOUBT, p.18): "That this world hath evil in all its parts, that its matter is in a corrupt, disordered state, full of grossness, disease, impurity, wrath, death, and darkness, is as evident as that there is light, beauty, order, and harmony everywhere to be found in it."
- It's no contradiction to say that **grace** makes the difference between getting old & growing old, for grace presupposes that most difficult of human decisions, viz repentance, the confession of (as it says in "Amazing Grace") wormness. This from pop-singer Judy Collins (CNN 6Nov91): "Amazing Grace" "saves your life every time you sing it." It should be sung a capella, from the heart and mind alone; & when it is, it's "always fresh, a healing that gives you wings" personally & collectively....The spirit of the difference grace makes is in this from Bonhoeffer: "Socrates mastered the art of dying; Christ overcame death."....The festivities await our repentence, our return, our walking into the arms of God (L.15, the Prodigal Son). On our way home, we are to travel in intimate companionship with Jesus, engaging in rituals appropriate to the journey & the goal. (These were the two notes of Ignatius Loyola, founder of the Jesuits, whose "Exercises" were the works of that companionship, as they were also the rituals [§21, above] transcending moods-emotions-feelings.)
- Perhaps the simplest mood-determining action is meditation-turning-to-prayer on **brief readings** witnessing to the power of will & grace to snap one out of one's depression (in addition, it may be, to psychotropic drugs). Eg, (1) "Thank God for life: and when the gift's withdrawn, / Thank God for twilight bells and coming dawn" (Thos.D.Landels at 83), & (2) "I shall grow old, but never lose life's zest, / Because the road's last turn will be the best" (Congregational minister Henry vanDyke), & (3) "Do what you can, with what you have, where you are" (Theo. Roosevelt).