

Fall Convocation

September 4, 2012 | 11:00am | Wait Chapel



*Relearning Our Mother Tongue:
Finding Our Soul as We Find Our Voice for Health, Mercy, and Justice*

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You can imagine that this is a big occasion for me, one that could freeze my creative spirit if were not for one thing. Have you ever remembered what any Convocation speaker said? I didn't think so; me neither. So this is actually something of a free pass that at best, you'll remember fondly, if not specifically. Ezekiel and I have two simple things we'd like you to see and I'll give them away right up front before your attention wanders: notice how the superabundant stream of living water flows away from the sacred space And notice the social body which the flow enables, nurtures and heals.

I'm thinking of Dr. Mac Bryan this morning, whose office as professor of ethics was just up and to my left behind me. And I'm thinking of a kindred spirit of Mac's, Dr. Steve DeGruchy of South Africa, who died ironically in a wild river two years ago. Steve worked with me in the early phases of what has become a major movement within the field of faith and public health. He thought that work was helping the church relearn its mother tongue, as he said. Steve's last words to his son who as in the river with him that day was, "go on ahead." In effect, this is my attempt to do that theologically. In doing so I want to focus this morning not on my or Mac or Steve's past, but our future and how we might speak our mother tongue in a new day.

Both Mac and Steve thought a lot about water, how it gave life, how it moved differently to and through the rich and poor, how it was sacred and often desecrated. Both of my twin fields use rivers as metaphors. Public Health frequently speaks of going upstream to the fundamental determinants of disease and health. For theology, water is not just useful, but sacramental. Ezekiel saw it flowing from the altar. Steve saw the whole cycle as sacred:

"There is only one stream of water. What passes through the bodies of humans, passes through the bodies of animals, insects and plants. It flushes through our sanitation systems, flows through the rivers, seeps through wetlands, rises to the heavens to become clouds, and returns to nourish us and all living things. There is no life outside this cycle, and theology has to get real about it.¹

A watershed is a cascade of miracles, but still the most simple thing: water running downhill. That simplicity escapes us—or most of us. We hardly see it; and see ourselves in it hardly at all.

Mac Bryan—and generations of other minority voices in Wake's tradition—did notice. His brilliance was telling the truth about radically stupid things—and pointing the opposite way. If

¹ This paper was first presented by Steve de Gruchy at the annual meeting of the Theological Society of South Africa, Stellenbosch, June 25, 2009.

your social watershed is, as ours is, polluted by stupid racism, violence, stupid nationalism, sexuality and, yes, stupid religion, point the other way. To clean a stream, you have to uphill into the watershed. And you have to notice that you may be part of the pollution.

Our motto is Pro Humanitate. We are in favor of humans; we think them worth attention, worth understanding, their life—our lives--sacred. It is helpful to be simple and see ourselves as living in a kind of social watershed. To be pro humanitate is to care about the whole stream, the whole social watershed. It is not comfortable to do so because we—Wake Forest and Wake Baptist Health have been and are very powerful influences on our local human ecology.

My entire adult life has been spent in and around institutions complicit with the leading causes of death, tobacco here and obesity at Emory which floats on Coca Cola and then seven years on the Mississippi bluffs built serving plantation cotton fertilized by racism. So I speak within, not above or apart from complicity. We humanitate are born complicit connected by a stream of history that carries us forward, but itself carries the past which is not past.

Ezekiel is not describing the Mississippi or the Yadkin watershed, or he would have mentioned the harvest of suffering amid the fruit trees. I had forgotten that the Yadkin flows by a city that looks like Camelot to a Memphian, but has nearly the same disparity in infant mortality. The county I can see from the roof of the hospital has nearly the worst the rates of infant death in the state that has the second worst in the nation. That takes us beyond wonder, right to weird and then demands theological language: it is wicked. This in the social watershed dominated by us, the largest industry, employer upstream, the institution where I could smell the tobacco being milled, but also learned of Dr. King and his incendiary dream of the beloved community watered and healed by a stream of living waters.

About ten years ago I was immersed in the living intellectual waters of southern Africa which had experienced the miracle of delivery from Apartheid. And then in a cruel wicked twist, HIV/AIDS washed down the social watershed, destroying a generation at the moment hope had a chance. On the very front lines, in the villages, the role of religion was crucial, both complicit and compassionate. AIDS overwhelmed governments all across the Continent, one indication of which was a request from the World Health Organization to a little band of academics, about the size of this Div school that had been quietly curious whether religion as it is really lived, could be an serious asset on that same bitter soil for health, understood across the life journey of humans. Could faith advance the health of the public? Could religion be pro humanitate? How?

We began the WHO study by going into the villages of Lesotho asking as humbly as an academic can understood the connection between faith and health. We quickly learned that the question made no sense. Indeed, the people felt sorry for us, for in their language (Sesotho), there is no word for health that does not include faith; and no word for faith that does not include health. It is impossible to think them separate, so how could we imagine connecting them? They taught us the word “bophelo” which means something like the Shalom Ezekiel would have also considered obvious.

Once we had a better idea about what was worth knowing, the African students and scholars figured out how to see and even map this kind of vital faith/health. (They did it with such insight the WHO for the first and only time in its history released a major report in a Cathedral, the one in Washington DC.)

The specific findings are vital, but I'm interested today in theological implications, ecclesiological and organizational implications for bodies such as ours, of faith legacy with hopes of being pro humanitate. The first step was taken for us by Dr. Steve DeGruchy just before he died. He noticed six basic things that faith groups did on the ground, that are probably about the same as the 700+ congregations do in the neighborhoods of Forsyth County:

The first and maybe most obvious is *spiritual encouragement*, and which denotes a range of participant responses such as "hope, spiritual care, prayer, faith, trust, encouragement", terms used to describe the way in which religion gives people an inner strength to proceed with resilience, courage and determination in the midst of ill health, poverty, and misfortune. Secondly they offer *compassionate care* to represent responses such as "care, support, compassion, love". And then *they give knowledge* in the areas of "education, training and sensitization and teaching", a pointer to the role that religious entities play in both formal and informal education in Zambia. They give *Material support* such as providing food parcels for the sick and clothing for orphans. *Moral formation*, the fifth element, denotes the way in which religion is perceived to shape the behavior and lifestyle of people and includes participant responses such as "morals, behavior change, self control, positive living, patience, and temperance". And they offer up *curative interventions* in a range of ways in which religion consciously intervenes to cure ill health in either a biomedical or alternate way, and includes the participant responses "facilities, healing, health services, infrastructure, human resources". I work in a multi-billion dollar organization North Carolina Baptists started to do that.

Later this Fall Forsyth Futures with help from School of Divinity students and faculty will release a first draft of similar raw data on local faith networks, which include over 700 congregations. I hope we do as well reflecting ours as did the Africans. The first step is to work with the right science partner. There is a long and useful relationship between theology and psychology out of which has grown faith-sensitive counseling and the work of chaplains. But there is more science to work with theologically, specifically, public health science which focuses us on the social body.

The social body is not just a collection of autonomous humans who happen to be in the same place. And Bophelo is not a quality among individuals who are merely taught by God how to behave correctly toward each other, even for the purposes of healthy outcomes. Shalom, like Bophelo, is a quality of a social body that is not "sort of like a body" or one only in the mind of a poet or a prophet. Shalom/Bophelo is language describing a functional living entity that has

qualities of other living entities. It is, the subject of public health science. A public is not normally thought of or described as sacred, but without the sacred, it is hard to really see it or how it works—kind of like with any one person's body. That sacramental nuance concerning the social body is the theological point. Shalom is what a social watershed—made into one people by God's action—experiences, or not. Shalom is not what one individual person has, even by participation. Shalom is not just an emergent aggregate quality, at least for those of us in the tradition of Jesus. Shalom/Bophelo is the work of God, the work of the Spirit.

Faith based organizations are often praised for their effective techniques in the lives of such individuals. And if you stripped the streets of all of the institutions and people helped in this way, this town would be grim indeed. But we can't be too proud of our efforts for individuals, even when noble. What about the watershed and the generational patterns of suffering. In the hospital we see those patterns every day in our emergency room and out dialysis clinics. Of course we do! What could be more predictable? We can even tell you the blocks on the streets most likely to offer up what kinds of suffering that somehow finds a ride over to Hawthorne Hill and asks for mercy. We are glad to give it with efficiency and decency. But surely we—and I do mean we, the social body--could find a way to move upstream and uphill.

We are right to celebrate as fruit of God's creating spirit the dazzling new insights and inventions of science and scholarship. Faith is exactly about what hasn't happened yet, what hasn't been thought yet, what hasn't been invented yet—so it is the perfect ground for innovation. But it is easy to miss one of the most vital and interesting contribution of faith. It creates webs of relationship that can add efficiencies to many human systems and also add intelligence and creativity that allows systems to break through into other possibilities. The social watershed itself is the miracle! We saw dramatic hard data showing the network of 500 congregations linked in Memphis, including lower raw mortality, cost and 39% longer time out of the hospital after treatment. This wasn't the work of clever machines, but the miraculous affect of webs of trust that are free to embody trust in acts of faithful connection. It is not the techniques or clinical behaviors; it is the accurate evidence of trust, which is a quality, like shalom or Bophelo, of a network, a watershed.

I have come to learn that in many places the Baptist Medical Center is called the Baptist Miracle Center, a reputation built on almost unimaginably focused intelligence and technique that finds hope when all is nearly lost. It is a center of miracles, but we need another whole kind of miracle now. Most conditions are no longer amenable to miraculous interventions; most are manageable in more subtle ways in cycles of care that are more amazing, but less dramatic. Dialysis, beta blockers, anti-depressant therapy and the vast implications of nutrition, movement and networks of friendship and support. The new miracles born of a new kind of innovation require a social body for any of us individuals to gain access.

The very most modern health science is focusing on the way that humans are organized as networks, not just big aggregate glumps. Even—especially—amid chaos, disease, but also ideas and behaviors such as compassion, kindness, virtues extended even to strangers in ways that are not random at all. Germs and virtues spread through networks which form around associates powered by meaning and affection. This is the way to understand the traditions in

which we stand and the works they have done; and it is a way to imagine the future. It is of profound theological significance that public health is pointing us toward the reality of the social body, the world that God so loved.

Any one of our lives are too limited, frail, bounded and random on which to rest any hope of transformation. Surely, this is the most obvious thing in all of human history. But the testimony is not all on the side of bleak unpredictability, for turbulence has an upside. Indeed, theologically we might consider whether turbulence actually trends toward upside or downside. Human plans are often swept away, but sometimes improved in the process.

Those who work with networks are humbled by the realization that we can only build a trellis on which the living web might grow *if God grows it*. We can build a trellis and that is not small or artless feat. But we do not grow the vine or its branches. That is God's work. Or at least that is my theological seed I would like to plant and nurture.

Part of the lesson, I believe, is that if you are going to be pro humanitate, you have to get in the sacred river and get wet. I almost want to say immersed! The findings from Africa and Memphis of the effectiveness of faith groups on improving health outcomes is challenging precisely because the impact is inseparable from the ritual spiritual practices that form, sustain and reform and express faith. Worship, prayer, practices of accompaniment, hope and lament are not advanced by stripping them of their religious essence and explained by the more barren language of functional outcomes. The social health is a byproduct of an essentially mysterious social faith.

We are all swimming in the river of living water, not just standing on its banks watching it go by. We seek God amid ongoing unpredictability at the heart of modernity that itself is more liquid than solid Bauman points out. We know a turbulent river that never lets us forget that history emerges from unpredictability flowing with good, bad and tangled things all along the journey.

I really like that. And I suspect the future will be sort of like that, which I like just as much as God astonishes and surprises with creativity and hope amid the wild tumult of human systems

Ezekiel dreamed of living water flowing in superabundance from the altar of God, cleansing, healing, nurturing, sustaining as it goes. Can we see it?