

## IS THERE NONE LEFT TO SAY ANYTHING?

by *James F. Moore*

*Abstract.* Remarks made by Lutheran leaders in Africa indicate that the churches have not been responding to the crisis of the HIV/AIDS pandemic sufficiently. In this essay I ask how the churches would be better prepared to act and also, more broadly, how the churches act to begin with. The dialogue between religion and science can assist us with both tasks as we consider the challenge of HIV/AIDS as a focus for this dialogue. First, analysis by social scientists can uncover what problems face any effort to motivate churches to act—and, for that matter, any individual member of a church group. I argue, further, that we can discover the difficulties associated with producing action by religious communities by looking not at abstract theological ideas but by investigating the way those ideas are conveyed in worship. I explore the worship patterns of Lutherans to show what sort of view is actually produced by the week-to-week messages of liturgical texts. I contend that a different approach both to worship and to action can be produced by reconsidering our views of reality as seen through the eyes of contemporary science.

*Keywords:* compassion; HIV/AIDS; inclusive worship; Martha Nussbaum; stigma; worship.

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In the summer of 2001 a number of leaders from the Lutheran churches in Africa gathered and issued a statement of apology for not acting appropriately to meet the crisis of the spread of AIDS in the region and vowing to do better in the future. Such statements are good as such, because they acknowledge that something has failed in the churches. Even so, the crisis in Africa is now so severe that we are left wondering who is left for the churches to respond to. The statement is similar to the indicting epitaph

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that Martin Niemoeller left as he commented on the response of people in Germany in the aftermath of World War II and the Holocaust (Rittner, Smith, and Steinfeldt 2000, 57, 63). People do not respond, it seems, until they experience the impact themselves, and by that time there is no one left to respond.

The issues concerning the churches and their response to the AIDS pandemic are deeply rooted in social, political, and theological factors. My presentation focuses on the theological, with the goal of thinking beyond the apologies and toward the real factors that contribute to inaction and might, if addressed, change the outlook for the future. In fact, the theological issues have to do with several levels of engagement with the problems—the ecological, the moral, and the religious. The interactions of these three levels in a theological perspective are so intertwined that it is false to assume that they can be treated independently, but through such analysis we can more easily see the problems that haunt the theological treatment of disease in the twenty-first century and move to a different sort of stance.

Briefly, I argue that the *ecological* level of engagement has to do with the way that religious communities act as a rule. This style of acting leads from the way such communities define themselves and any others, as well as the way that this defining leads to a particular kind of acting toward the world. The *moral* level has to do with a historical, traditional way of thinking about certain behaviors that even in the most liberal groups has led to a confusion about acting. The African or the Thai settings are surely very different from the United States in their respective traditional moral cultures, but the confusion persists, I think, and plays out in specific ways depending on which religious tradition we speak of. The *religious* level of response is linked to particular ways of understanding sin (or transgression, or inappropriate living), which tends to be connected with a broader understanding of the sacred, human destiny and “divine” justice. Already we can see how the three levels of concern are linked and the way that each determines, in part, how any one comes to understand the other two.

#### THE ECOLOGICAL LEVEL

The first level is the most basic but also may well be involved with the most important shifts required to change our theologies of disease. I am most interested in the way that religious communities act as communities, and not so much in the larger national and international structures, which have their own policies and forms of operating that have to do more with how bureaucracies operate. This concentration on local practice links with the way theologies are done in practice as well. I return to that matter later on.

I am reminded of the advice that a bishop gave to me on the occasion of my installation in a local parish. He told me that any successful ministry is based on two things: conducting effective worship and contact with parishioners. I discovered that the first of these is critical only at certain

periods in the cycle of religious observances that make up the church year. Of course, most of the major religious traditions also have such a cycle of events that form not only the symbolic pattern of community worship but also the concrete occasions when the community actually gathers to act together. Let us assume that these principal occasions mark critical events that help to define the local community and are repeated in particular ways at more regular events of worship.

The second piece of advice was intended to encourage me to actively visit members of the church community. Over time, I took that to heart and did it consistently. Again, however, this pattern of visiting, meant to personalize what the church community represents to the individual members, is symbolically represented in particular life occasions that are celebrated as important turning points in the lives of individuals and families. These events—deaths, births, marriages—also can crystallize for us how that community acts in personal ways.

So, in key worship events and key life-cycle events, the community acts on behalf of its official members even if this rule is broadened to include others. That inclusion happens as if the others are for the moment members. That is how these events are conceived and understood as communal.

My concern is to think about how the religious community acts, and this simplification of the activity of the community is intended to help us focus on those activities that are fundamental in shaping the sense of community as such and, with that, the way the community acts in general. Of course, communities such as churches do act in other ways, some of which are generally social, in a variety of meanings of that term, and some that have to do with acting to conduct the business of the community. I do not exclude these activities and believe that the first of these, social activities, is precisely what the leaders of the Lutheran churches in Africa were thinking about when they confessed their ineffectiveness of action to confront the issue of HIV/AIDS. These communities do act to address social concerns, sometimes spontaneously and thus sporadically and sometimes within an organized pattern. I would argue, however, that these actions are understood within the communities as an outgrowth of the sense of community formed in regular worship and the personalized sense of community represented in life-cycle events. Thus, the belief is, no matter if this is accurate, that social (that is, moral) activity comes from the spiritual sense of community formed in the primary ways that the community acts.

#### WORSHIP AS ACTION

Worship patterns are too complex for us to discuss in any complete way here. My hope is that, by choosing some patterns, I can uncover critical matters for constructing a theology of disease. I choose the act of prayer as an example and add to that the use of texts that are considered to be sacred by the community. These two worship activities are reasonably broad so as

to connect with specific acts of different religious communities, including most of the major religious traditions. I focus on group prayer, which may be prayer recited by the group or an assigned prayer ritual that is commonly recited by all individuals in the group. The use of sacred texts is also quite varied in practice and may be formalized in worship patterns, but it also may be integrated into other parts of worship practice such as in prayers or in singing or chanting.

My contention is that both prayer and use of sacred texts are designed as a regular part of worship practice that aims to identify the members of the community as a distinct group (perhaps as part of a larger religious community, but with a well-defined identity). The act of prayer is more fluid in some cases, as it may have the character of extending the concern of the group beyond the bounds of the group and its identity, but the idea of prayer is clear. Prayer serves to reemphasize the relationship between the community and the sacred, the divine, and in so doing mark the community as special (perhaps not necessarily unique, but special). Prayer has an outward form of petition or extending beyond the interests of the group (indeed, maybe designed to turn the attention of the group outside of itself but in such a way as to make that idea of the community integral to the community's identity). Thus, the function of prayer as an act of the community appears to be to reinforce group identity in particular ways.

If the function of prayer appears fluid, the function of using sacred texts is more obviously defined. Of course, any text, even in quite explicitly defined worship contexts, has its own status with a potential for many possible meanings. Thus, those same texts used for the purposes of doing theology will function differently, since a text has the potential for multiple interpretations. That is not evident, however, in most uses of sacred texts during worship. The text is again used to define communal identity through a regular pattern of the recitation of key texts—that is, those texts that are key for defining communal identity. All of this also presumes communal acceptance of the texts as sacred.

The result of this pattern is that worship is an occasion for defining group identity, and this results in an intentional creation of boundaries: this is us, and they are not. This making of boundaries does not have to be malicious, but it is nevertheless central to the way communities act as communities. This is also related to the way communities justify their actions and also conduct self-criticism. I am always amazed by those who believe that it is critical for a community that defines itself as religious to constantly be involved in deciding what that means (my university, Valparaiso, regularly attempts to define what it means to be a Lutheran university). It is also interesting that those who take this task with great seriousness also believe it is important for self-identity to know. Can we argue that there is a Lutheran way of thinking and acting that is distinctive? I have no doubt that such arguments can be constructed, but the point I am making

is that the need to focus attention upon identity as a central concern for religious people is cultivated over and over again in practices of worship. I am already projecting the matter of the way religious communities do things as an issue, because it has enormous importance for how a theology of disease is constructed. Is there a uniquely Lutheran, Jewish, Muslim, or Buddhist theology of disease? I ask this knowing full well that the notion of theology is an alien idea for many non-Christian religious people.

#### LIFE-CYCLE EVENTS

Another aspect of communal functioning is also of great importance for our discussion, since it is in the level of personalizing the community that the entire area of religious ethics is understood by many religious people. To act morally within a community is to act precisely in a personal way, to act in accordance with what is necessary for special life occasions. I can identify two examples as valuable cases for exploration: the rituals surrounding marriage and death. Different traditions celebrate these rituals in strikingly different ways, so that we can hardly make sweeping judgments about the content of such events except that we can observe, again, how these rituals mark the way communities act.

We can begin to assess the nature of such rituals by asking why religions and religious leaders involve themselves in observing these turning points in the lives of people. What is added to the event by the community's acting? In fact, the community as such is rarely involved together as actor at such events but is more or less represented in action by its professional leaders. Thus, the event does not serve as an obvious reminder of the community itself. But we can see, in marriage services, for example, something of the nature of this observance and why religious communities are involved in acting.

Historically, religions did play a role in marriage events, because marriages were critical for the future of the community. I might argue more fully that marriages were means for control within a society, and religions became a way to maintain that level of social control. We can presume that current rituals are a vestige of this earlier need. Eventually such rituals are likely to disappear as religions are no longer needed to maintain social control in this way. Instead, religious communities tend to function quite distinctively within larger, more pluralistic societies, and the religious wedding is an expression of this independent identity. Now, the theological understanding of this practice (to sanctify the wedding and the marriage) does have an impact on many who participate. Many, even without a good sense of what this might mean, require for themselves a "church wedding." There is a sense that something holy<sup>1</sup> is added to the event.

Despite the attitudes of the participants, however, my point is not why people get married in religious rituals but why religions perform such rituals. This seems to be linked with a sense that there is such a thing as a

Lutheran wedding, a Jewish wedding, a Muslim wedding, and so on. Such rituals are an expression of the identity of the community in the sense of a specific setting-apart of a particular group. Thus, the religious leadership may argue that certain rules of membership must be observed in order to qualify as a community's wedding. It is, again, a way of distinguishing who is who. Does this mean that such rituals are not available for those who do not qualify? It seems that, far more than worship itself, such rituals serve to disqualify the one who does not belong. The rituals are a way for a community to decide who is inside and who is outside.

Such activities are not necessarily a judgment of the validity of noncommunal weddings but only a statement that those who wish to be married and are not members (as defined by the wedding ritual) must be married by someone else. That is someone else's work. In fact, this form of action by the community is likely the principal way that many members actually participate in the activity of the community, if not the only way. The image of how the community acts is projected as a practice of maintaining separated identities. We do not act together in these matters.<sup>2</sup>

Rituals concerning death, like our understanding of prayer, tend to be more fluid, not so much in their pattern but in the way the community views the participation of individuals. Leaders may still restrict the action of burial to members (some communities will restrict who can be buried in a community cemetery), but the individuals present to be involved in mourning can be quite diverse. In fact, the community may view this inclusiveness as a symbol of outreach by the community. Even so, we still ask what role the community plays in its participation. The answer appears to be that the community sanctifies the event. But this means that the community authorizes the appropriate rites for burial for an individual. The effect is similar to that of the marriage event: the appropriate rite is that which is done by (and can be done only by) the community and/or its official leadership. Others can certainly perform burial rituals, but that is for them, and this is for us.

It is not surprising that these formative activities of religious communities serve the exclusionary purpose of forming the particular identity of the community and its members. This form of speciation has been observed and described by any number of observers (see Strozier and Flynn 1996, 51–57). It is important to remind ourselves as we construct theologies of disease that the communities we generally represent form their identities for action around acting that is exclusive. This is bound to affect the way these communities act in general.

We need to ask in our present context what impact this discussion has on our project as such. Above all, the issue is that religious communities act most centrally from a fairly carefully defined and circumscribed identity. It is clearly the case that Lutherans will think that there is a Lutheran way of acting and will consider this question first in terms of the structures

and patterns that their own communities have historically used for acting. Thus, any broader sense of action (a generally ecological ethic) will be conceived as building out from the position of the community and including (in some way) the separate views of others. This is not surprising, given what we know even from this brief description of communal action.

#### AN ECOLOGICAL REJOINDER

It is striking that this structuring of acting should persist (often under the guise of protecting and respecting pluralism). My own work over the last several years has led me to a view that is supported by others in this science-and-religion dialogue. That view begins with the assumption of an evolutionary model in which both nature and culture (as part of nature) develop wide diversity through an historical process. At the very least, this means that religion develops, and, if our understanding of the emergence of human becoming is correct, religion has developed from early strands of religious believing that were carried over into later strands that ultimately emerged as the early stages of religious traditions that have survived as “world religions.” As a rejoinder to the observations given earlier, I offer this extended view of the development of religions, which raises some questions about current community-centered practices.

The ecological perspective suggests that the movement toward distinct communities with clearly defined religious boundaries is a movement against the ecological foundation of human becoming. Diarmuid O’Murchu has argued that the underlying reality of the cosmos is one of connection (1999, 52ff.). This connection does not mean a universe without particulars, without individual uniqueness, but rather a universe that is tied together in a web of connections that is dependent on the notion of a necessary role of each component for the survival of the whole. Thus, this view leads us toward a self-understanding that emphasizes participation in the whole. O’Murchu’s image is that of a dance, a metaphor that has certainly been used by others, including Alan Lightman (1996).

My effort so far has been to offer a view of how religious communities are led to act, and I have suggested that communities primarily act in the context of the worshipping community. This liturgical context for understanding identity, indeed, for maintaining identity, is one that produces boundaries. Yet, the ecological reality of our existence requires that we note our participation in the larger whole of interlocking roles and actions. This ecological view implies a need for a liturgy in which the identities that are produced connect us with the larger natural reality, if for nothing else but for the sake of human survival. We need ecological liturgies (prayers, hymns, uses of texts) that make evident these connections, not liturgies that reinforce exclusive identities and boundaries that do not allow for the connections necessary for survival.

O'Murchu's model takes up the example within Christian worship of the *sacrament*, in which the narrative told is one of exclusivity, that is, of the self-contained body of Christ, which acts from that identity toward the outside world (O'Murchu 1999, 153ff.) The image suggests that the sacred home of the divine is in the sacrament within the worshipping community: the community acts as the body of Christ. Of course, there are theologies that attempt to transform this message (I take this up below), but the metaphor of the sacrament localizes divine action.

Another image, that of *covenant*, is also portrayed in various liturgies; the act of worship is designed to reaffirm the community's participation in the covenant. Such images can be used to motivate a look outward (an accountability for the world, a Tikkun olam, the Hebrew for healing the world which comes from the Jewish tradition) but the image again localizes God. Both of these images are products of an earlier age in which one could think of a localized god who acts in these specific ways. The end result is a local and not a global god, despite the possibilities for universalizing these localized images.

But each of these images that dominate worship practices in Christian and Jewish communities can be transformed toward a liturgy of connection that does not seek to focus on communal identity that is distinct but rather locates the individual/community in the web of complex connections in the cosmos. Naturally, such a liturgy would require the freedom to relinquish one's local claim on God, and this is likely to create serious resistance in communities. It is not surprising, then, that religious communities fail to act beyond their defined boundaries despite the theologies that have a vision of nondiscriminatory action.

#### THE MORAL LEVEL

A colleague of mine at Valparaiso University wrote an essay years ago in which he played upon the root meaning of the word *liturgy*, which is "work of the people" (Brockopp 1980). The argument he made was simply that the liturgy should be designed to lead people from the point of entry through the narratives that give identity to the community—the narratives of creation, including the fall and the narratives of redemption, including the making of covenant—toward a reaffirmation of moral purpose, which he saw symbolized in both the offering and the sacrament. What sort of purpose would this be? He would argue that the work of the people is to be servants of God. This means both obeying God and serving humans. There is in this theological rendering of the liturgy a foundation for seeing moral purpose as service being the primary message of worship. I suspect that this view is shared by thinkers from many religious traditions.

Defining such moral purpose in the broadest terms makes the analysis risky at best. I want to take this notion of moral purpose and the background already developed regarding the worshipping community as the lo-



cus of communal action and explore the possibility of religious communities forming a basis for response to the HIV/AIDS crisis. In order to understand the content of moral purpose, I examine the notion of *compassion*, which engenders much of what I believe religions suggest for a moral foundation and models the style of action that flows from the community at worship. I do not assess here whether and in what ways communities can actually do this, only the foundations for such action. Other of my colleagues in this forum have looked more closely at the particulars of the HIV/AIDS crisis in various locations. What I am looking for is a series of directions for exploring a theology of disease.

My analysis suggests that the liturgies of communities are more works *on* the people than works *of* the people. They form a clearly distinct communal identity that assures boundaries, determining who is part of the community and who is not, even if the aim is to envision the community reaching out beyond itself. Thus, we might wonder how such inertia from within can actually produce a moral surge in the community. Another problem is that often the community identity produced is not clearly produced to form a community in action but rather is a way of defining a community that gathers only from time to time. Movement toward strategies of action is difficult to assess on the basis of the liturgy itself. Still, the model of compassion might well give us a clue about this problem.

Martha Nussbaum (2001, 297ff.) provides a structure for understanding compassion in her work on emotion, which is basically structured on the understanding provided by Aristotle. Aristotle believed that three basic factors are necessary for any form of compassion to emerge. We are, of course, faced with the problem of understanding exactly what compassion is. The word arises from the Latin root that means "suffering with" and is closely related to other terms, most specifically the word *sympathy*. If this is what we mean by compassion, then what is required, first of all, is our sense that some other is suffering and that the suffering is worthy of our attention. That is, compassion requires that we be aware of the suffering of others and take that suffering seriously. Second, compassion requires some assessment that the person does not deserve the suffering. Third, we who see the suffering must believe that the situation could possibly happen to us, so there is a form of empathy (Nussbaum 2001, 327ff.). Nussbaum, not quite sure of the last of these points, adds that we can modify the need for direct empathy simply by suggesting that the person (perhaps this could be broadened to include animals and even aspects of nature in general) is of some value to us. This latter point may be the most critical and suggests a role for the universal claims of religion, even if, as we shall see, religions tend toward nullifying both the second and third requirements of compassion.

Naturally, the first requirement for compassion involves not only awareness but also an ability to prioritize the suffering of others. To what extent is a particular situation likely to capture our attention enough so that we

can take it seriously? I am reminded of several articles I read recently from a conference on issues related to Catholic and Jewish relations (Pawlikowski and Banki 2000). John Morley (2001), writing about the sensitive issue of the actions of Pope Pius XII during the Holocaust, notes that the whole structure of the Vatican organization of communication made the particular matter of the fate of Jews in Europe only one of many in a complex set of concerns that faced the Pope on a daily basis. Morley's argument seems historically accurate in that it is likely that Pius XII, along with other civic and religious leaders during the time, simply missed the news of the genocide of the Jews in the morass of information being passed on. It is also possible, say historians like Morley, that Pius XII simply had to trade the fate of some for the fate of others, and Pius XII saw his role principally to safeguard the members of his church.

Such arguments can be made with a great deal of seriousness. In fact, if we want to see how arguments similar to this can be made, we need only look at the debate over why the Allies did not bomb the death camps at the end of the war (Berenbaum and Neufeld 2000). The main argument is again a matter of priority that led some to overlook the details of the camps and/or to set other matters as a priority. Even so, we are likely to raise questions more readily about the religious moral urge than the matter of moral decisions made by the military. The point made by Morley is open to challenge, but the fact is that his case is built on an acceptance of the way churches act. If we are inclined to think about individual persons in churches, we are still left with a strong likelihood that actions will be delayed because (1) the attention of members is directed elsewhere and/or (2) other matters take priority for the churches. It is questionable that these communities will become aware of and act on crises at the time they need to be taken seriously. This may well be the case for the Lutherans in Africa, who after the fact confess that they acted inadequately.

The principal structure of action in religious communities even while preaching compassion sets up the members of the community to become self-absorbed. All of this depends on people being made aware of suffering in such a way that it is taken seriously. If we look at Muslim belief, for example, we see a similar structure prevailing in that the notion of almsgiving is set into the context of the Muslim life, which is dominated by acts calling for obedience to Allah. The history of understanding compassionate action does provide a possibility for acting with compassion in the midst of crisis, but the impetus of action is more fully directed to obedience in the standard contexts of action. Could we say with confidence that Muslims are more likely than others to be aware of the suffering of others?

We might argue that Buddhist efforts to understand compassion, such as we see in the work of the Dalai Lama, are different in that compassion is seen initially as the outflowing of a healthy human being. Thus, the value of compassion is rooted in the growing sense of self-awareness that ex-

presses itself in compassion (Dalai Lama 1995). Of course, the Dalai Lama is not particularly keen on religion as a source of this path of seeking health and wisdom. This may be more promising than the structure of religion, which sets obedience to God and the identity of the community as priorities for action. The Dalai Lama is also inclined to view his Buddhism as producing a view of connection similar to what I suggested earlier as part of an ecological viewpoint. More important is that we see how the structure of compassion and the religious viewpoint actually affect our ability to think of the other as undeserving and ultimately in the same camp as we are ourselves.

#### WHAT IS UNDESERVED?

Two features of the structure of compassion are already problematic, given my argument to this point. First, our awareness of the other depends on our seeing suffering. How can we think of compassion as grounding moral action if it is dependent on the other's being in a state of suffering? This point of view also leads us to the fateful observation that religions tend to begin an assessment of human living and the context of our living with the assumption that something is wrong. Such a perspective already sets up a context for thinking about what is or is not deserved. Second, compassion is seen fundamentally as a one-way activity in this consideration. Naturally, the assumption is that of reciprocity: if I experienced the same suffering at some other time, I would hope for similar compassionate treatment. But reciprocity must be presumed as an inessential factor for acting with compassion. Thus, the structure of compassion remains action in one direction. This, too, sets up a context for understanding what is deserved, or how I am likely to assess that, since a one-way form of action depends on choosing to act on the basis of what I decide are the criteria for acting. My guess is that this issue was also critical in the failure acknowledged by the Lutheran leaders in Africa.

Yet another problematic with compassion plays into our discussion about HIV/AIDS. Compassion is seen as an emotion by Nussbaum and others in the long traditions of thinking about compassion. This does not mean that it is without reason, but it does mean that awareness is dependent on the complex of emotions that we are likely to experience at any one time and in any situation. (The complexity of our experiencing emotions and sorting through them is too much of a topic to manage in this essay; Nussbaum and others have done this well.) We do know that emotions find their sources in a complexity of personal experiences only a portion of which may be the religious narratives that shape the worshiping life of religious communities. Even understanding this complexity, however, we see readily that, on a horizontal level, compassion alone does not determine our judgment about whether the experience of another is considered deserving of our compassion or not.

Above all, compassion must contend with deeply felt emotions of shame, anger, and disgust within the complex of feelings, and the structure of each of these emotions is also powerful in its hold on us (Nussbaum 2001, 342ff.) Thus, we can understand a negative response to those who are living with HIV/AIDS if ethical norms consider the behaviors often associated with contracting the disease as deserving disgust or shame. Indeed, the power of these emotions is so overwhelming for many that reasonable arguments to the contrary still cannot override the basic disgust. And this includes efforts to make the religious act (giving alms, for example) indiscriminate. In fact, compassion will be next to impossible to generate if we believe that those who suffer do so because they deserve what they suffer.

Let me be clear that this reaction does not have to be a simplistic moralistic response. More likely it is a deeply insidious response rooted in feelings that are reinforced by claims to identity that are themselves reinforced over and over again in the context of normal patterns of worship. We may claim that such norms are fundamentally cultural, and we can note that they do not claim universal standing as such, but the religious response is so clear among many of the religions that reactions of disgust will not allow true compassion to surface. The problem with the spread of HIV/AIDS is that any reluctance to act or slowness in showing compassion is likely to have disastrous effects. I dare say that we cannot expect religious people to act with compassion swiftly regarding AIDS until we are ready to accept without reservation people who are seen as the principal risk groups: homosexuals, persons who are labeled as promiscuous, and those who use intravenous drugs. Any theology of disease that wants to address this issue in its global dimensions must start a step back and deal with the heritage of disgust and shame that plagues us in acting with moral urgency.

The problem is not merely being able to act (and it is there even in the visceral sense of contact, touching); it is also linked with our ability to accept solutions that violate our sense of decorum, our deeply felt norms. For example, despite the obvious ways that India has managed to reform practices to fit a modern democratic sense of justice, it is still difficult in many places to override the religious authority in determining the fate of women in cases of marriage crises and those who are still regarded as part of the subcaste, the untouchables (Nussbaum 1999, 213ff.). All of this remains true even with the reform in national laws. In the same way we must think about the way that *Shari'a* law defines what is called sexual promiscuity in Muslim countries, especially when this very same law is offered as proof that Muslims are ready to deal with HIV/AIDS more successfully (see Hunt, Jung, and Balakrishnan 2001, 16ff.). Can we argue that the underlying level of rejection of human dignity can be a collateral effect of fighting the AIDS pandemic? Of course, we can point to the Roman Catholic position regarding the use of condoms in cultures that must struggle with issues in different terms and with different consequences

than what is the usual case in the Western world. And will the American obsession with a war on drugs make it impossible for us to take seriously what needs to be done to stop the spread of HIV by contaminated needles? If we are asking what religions need to do in terms of a theology of disease, let us say emphatically that if our working theologies cannot help us see and understand the deeply destructive feelings that often guide our acting, we will fail.

#### THE POSSIBILITY OF EMPATHY

The last of the criteria that define the presence of compassion may be the most challenging and problematic, for it brings to the fore the basic weakness of any morality based on compassion and theologies that are used to frame such an ethic. Aristotle claimed that compassion can exist only when we can envision that the problem experienced by the sufferer is one that we might also experience. I take up this form of the argument first before turning to what is more often the religious form of the argument, partly because I agree with Nussbaum (2001, 335ff.) that often this factor is necessary before we will act to help others, even if we might hope that our motives for acting are more noble. It is surely true about the way America entered the conversation about the global spread of HIV/AIDS and, in particular, its spread in Africa.

The point is that I am moved to act only when, even though I am not yet suffering, I can imagine that the suffering of the other is something that can also strike me. Why would this be the case? The issue is not that I feel sympathy for the other but that I can see myself in that role. The ultimate aim of compassion on this level is to stop the causes of suffering before they can affect me. The suffering of the other becomes a warning to me. Of course, I am still left with the issues I have already addressed: I must be aware of the other and his or her suffering even to be warned (choosing to set action as priority), and I have to contend with the underlying emotion of disgust that prevents any level of empathy. This is probably the most difficult hurdle to leap. If I feel disgust, I am emotionally unprepared to think of myself in a similar situation, quite apart from any reasonable acceptance of a likely threat. Thus, I can construct boundaries around those who are in high-risk groups and close myself off from the threat. The actual sense of a threat to myself is minimized then to the point of simply rejecting the idea that I could suffer in the same way. All this can happen beyond reason. The issue then is whether we can effectively argue for the likelihood of compassion when there is a rejection of empathy. Aristotle would say no. Nussbaum would say yes, as would the various religious traditions. Still, it may not be so clear that religious people actually are motivated by pure compassion in most situations.

In the case of religions, the power is strong in constructing a view of the self that rejects such a participatory empathy. There is a clear tendency

among the religions to locate the cause of suffering on the moral level. Thus, we are both the cause of our own suffering and the source of possible solutions (transformations, salvations). The religious mind can then universalize suffering as a general problem, a condition of human living. In fact, the very structure of compassion suggests the need for a view of reality such as this. We might be led to a conclusion that all of us deserve suffering to a point, even if all of us have the chance for redemption. Nevertheless, the religious mind also constructs a narrative of righteousness that defines the identity of the follower. This is not an absolute in most cases but is regarded as a process, a path to follow. Thus, I could be drawn into any form of suffering, but the call of religious discipline would suggest that I should be moving closer and closer to a resolution, to overcoming the causes of my suffering. If I call this righteousness, I am likely to have a compelling religious reason not to identify with those who suffer the most. If I were to act with compassion, I would be self-consciously encouraged to think of my action as totally unmotivated, that is, as acting with care for a person who suffers in a way that I am never likely to experience. This level of denial is very powerful in the religious mind and has to do not with the actual experience of suffering but with how reality is perceived both as universally containing suffering caused by our actions and moving toward some existence without suffering in which we are gradually and increasingly participating.

If we agree with Aristotle that these conceptions of world and self are likely to mitigate against acting with compassion, we can understand why religious people especially fail to act quickly even in spite of their own vision of what it means to be religious. We can counteract this assumption only with a belief that the religious mind is also led to act without empathy but with sympathy on the basis of some other way of seeing things. I think that the Dalai Lama expresses this view as clearly as any when he argues that acts of compassion toward other humans are an expression of the fundamental connection with the Divine, the sacred wholeness of being human (1995, 83ff.). Christians might say that acting with compassion (loving our neighbor) is the same as acting with love toward God. All of this depends on how we understand the Divine and divine action.

#### DIVINE COMPASSION—THE ALTERNATIVE

As I move to this topic, I draw closer to the conclusion of my reflections on a theology of disease. If I maintain that compassion depends on our image of the Divine, I am arguing that theology is the end work of this investigation, even though I would say even more that moral action is truly the end result of my reflection. I do not contend that having ideas of God will in any way make me act more with compassion. I doubt that I can remove myself so thoroughly from the factors that I have discussed about the religious mind so as to believe that all can be repaired simply by our changing

our theologies. But we can explore the logic of this religious claim.

Nussbaum believes that we can act compassionately even when we do not empathize with a sufferer because we can still value the other and consider that valuing as sufficient for our action. What we need is a context of thinking that allows us to value the other indiscriminately. That is, if we are to act for any sufferer in any condition of suffering, we cannot act because of the particular qualities of the one suffering. I use a diary for my Holocaust class written by a woman who was a graduate student in Amsterdam during the Nazi occupation in 1942. Some in every class deeply identify with this woman even though they do not expect to ever experience the Nazi threat as she did. Others react negatively toward her as a person because she is so self-absorbed in much of what she writes.

The problem I have with Nussbaum's argument is that even this form of compassion makes the trauma that another is suffering the reason for compassion rather than an honest caring about the person. This thinking about compassion is too much linked to the root meaning of the word—suffering with—and may be too connected with an understanding of the Divine in which the Divine is fully self-sufficient and acts not because there is a real connection with the suffering of humanity. This rendering of a fully transcendent Divine is too easily transposed into a model for loving that is one-sided, as if this sort of giving is the ultimate, perfect sense of loving. Thus, a transcendent model cannot account for an ongoing link with the other that is essential to the becoming of the one showing compassion.

Of course, compassion does not have to be understood in this way, though it seems it is the way philosophers have often understood compassion or benevolent action. The solution is likely to be found in a new conception of the Divine that disposes of the transcendence that isolates the Divine from human community and experience. Still, the human expression of compassion can be understood as already and always a sense of connectedness that does not require the suffering of the other. Compassion is the reality of our existence, not merely an expression of sympathy at times of great injustice.

Unfortunately, the usual meaning of compassion that is rendered as a religious sense of concern for the other is an expression of sympathy that comes at the time one recognizes the need of the other. This structure of acting cannot possibly provide a foundation for ongoing communal action that is sufficient for the issues we face, because it is usually too late when we finally notice the suffering of the other, especially if we do not suspect that this suffering is either undeserved or a threat to ourselves.

The idea of compassion brings with it yet another severe problem that often prevents effective moral action. This structure of responding is often unequal in that it presumes that one party is the compassionate giver and the other the receiver. The divine model emphasizes this inequality, but the structure also persists in human interactions. And we have seen that

often this model of giving does not result in reciprocity, because there is no conceived feeling of threat to the self. Thus, the inequality remains and is not only a foundation for a structure of injustice (to what extent is this a natural path toward a breakdown of respect?) but also results in and requires the decision of the one to give.

Nussbaum argues that this failure of the structure of compassion is overcome by the nurturing process, in which compassion becomes the mode of responding to the other as a matter of course. But this assumption brings us full cycle to the problem that the community as community acts out of the practice of worship, and nurturing does not fundamentally reinforce compassionate action unless the worship is self-consciously shaped to emphasize the connectedness that I have described.

I am speaking here only about why it is that religious communities do not act consistently in ways that we would expect from the implications of religious beliefs. The fact is that, quite apart from the negative factors that block effective moral action, there is built into a normal pattern of understanding of religious morality this basic problem of the structure of compassion. The answer may lie in a radical reconstruction of theology that is not merely directed at a theology of disease but takes into account the problems I have raised to this point about ordinary communal activity.

#### NOTES

1. The word *holy* at its root means to be set apart and thus has to do with the creation of a distinct identity for some reason, even if popular understanding confuses this with a notion of moral purity.
2. Some communities also experience this modeling of action with regard to all worship events, and sometimes the exclusiveness of acting is explicitly mandated, as with the recent actions of the Lutheran Church–Missouri Synod to suspend a bishop for his participation in a multifaith gathering for prayer in New York City.

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