

On the edge of faith

Rowan Williams

The practice of medicine lies somewhere between science, as we normally understand it, and art. There is even one text that describes medicine as a 'virtue', but I suspect that might take a bit of explaining. The point is that there is a common enough recognition that something about medicine goes beyond what we might call sheer technical skill. The 1994 statement on Core Values for the Profession^{1,2} has things to say about integrity, sensitivity and confidentiality that would sound odd in a description of a job that demanded identifiable practical skills and no more; or one that was essentially about imparting information.

This is where medicine and the life of faith have something to say to each other and to society. Not every anguish, or every crisis, is a problem that can be solved by throwing information at it. Human beings seem to cope with their problems more by listening, intuition and relationships, than by detached skills and the acquiring of facts alone. Healing involves trust, which takes time and commitment. Materially and psychologically, we have to 'budget' for such time and commitment; we have to be wary of short-termism and corner-cutting. Also, some commitments just aren't possible without a deeper commitment to the human community, and to the deeper needs of human beings. Finally, healing is an imperative in a world that is irretrievably frail, often wounded; but no less an imperative is facing the fact that we shall die.

Medicine as an art often nudges us towards these issues. Unlike the proclamation of faith, it does not propose itself as a focus for trust, let alone a hope that enables death to be confronted. But it lives, properly speaking, on the edge of the territory of faith, awkward, in itself agnostic, yet witness to the humanity that faith speaks of. It is because of this that the Church must have a concern for the profession of medicine. It is a set of conversational and relational skills, rooted in, but not confined by, knowledge of the material organism. Likewise it must have a concern for the national provision of healthcare as a sign of society's willingness to confront weakness and mortality without fear.

This picture of humanity is rather different from that depicted so often nowadays – hasty, anxious, obsessed with measurable successes, deeply embarrassed by failure and death. I would also dare to say that medicine might have a concern for the Church. It is not easy to sustain the humane vision of medi-

cine (or anything else) at a time when the rules of our humanity are apparently being rewritten to suit the imperatives of management and profit.

Cardinal Newman once startlingly observed that if the Church ceased to exist the world would soon come to an end. What he meant was that we often have little idea how much we owe as a culture to the sustaining vision of humanity as something to be revered, body and soul, to be approached with awe and reticence for its strangeness, its richness and its tragedy. The foremost theologian of the second Christian century, Irenaeus of Lyons, famously asserted that 'the glory of God is a human being fully alive' meaning alive in, not beyond, this mortal body, which shares in the image of God as truly as does our mental or spiritual life. Somewhere here is the common ground for the cure of souls and the care of bodily persons that faith and medicine share.

References

- 1 *Core values for the medical profession in the 21st century.* Report of a conference held on 3–4 November, 1994. London: BMA, 1994.
- 2 Smith R. Medicine's core values. *BMJ* 1994;**309**:1247–8.

The Most Reverend Dr Rowan Williams, Archbishop of Wales and Archbishop designate of Canterbury

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