

Reflections on Schillebeeckx and spiritual care

An experience of one of the spiritual care givers in this hospital:

“Jesus cleared some space for me at the cross, he moved over a little.” This is what a woman tells about all her sufferings. She tries to put into words what helps her to endure the enormous pains that she suffers from caused by several ailments. She experiences the depth of her pain as it were in Jesus’ story. Her suffering goes with his suffering. She is not alone.

Author: Hans Hamers

Exam paper

Masterclass The Social Political Theology of Edward Schillebeeckx
Faculty of Theology
Radboud University Nijmegen
Spring 2012

Hans Hamers s7822677

hhamers@glazenkamp.net

October 2012

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1 Introduction

In this paper I want to connect two things: the social political theology of Schillebeeckx and contemporary spiritual care as practiced in institutions of care, hospitals, and nursing homes. The overall inspiring question is: can a line be drawn from Schillebeeckx to the daily practice and experiences of spiritual care givers and their patients?

Schillebeeckx' thinking is heavily enacted in the human life, in this world where people live with their God.¹ So reflections on his theology, from the perspective of concrete practice of contemporary spiritual care, always in a specific frame of space and time, should make sense. The leap taken should not be too large.

In this paper the focus will be on the concept of suffering in Schillebeeckx' social political theology and on human suffering of hospital patients. Related concepts like the meaning and sense of life, negative contrast experience, humanity and human condition, are discussed when needed.

Let me start with a general observation, taken from my own practice as a spiritual care giver in the university hospital. In contact with patients I often hear their anger and indignation, their worries about lack of social justice in their own community, their church, the nation they belong to, and even the world order of which they are part of. Sometimes people are emotional when they talk about this. In a way it seems to move them although the people it concerns are completely unknown to them. Are they giving word and expression to what they sense as a way out? A strong 'No' to the suffering, the evil they see, hear and experience from a distance? Is their suffering not restricted to their personal sphere of the illness and intimate relations of close family and friends?

Patients are seeking relief of their suffering, and in the midst of their physical, social, psychological, religious crisis, sense and meaning seem far away. One might say that they seek salvation, overall physical, social, psychological, religious well-being. How might the social political theology of Schillebeeckx shed some light on these observations?

An indication of an answer is given by Schillebeeckx arguing that it is impossible to remove suffering either in the personal sphere (redemption) or in the social sphere (liberation). Striving for only one of these will divide the nature of man by fixating one sphere of non-salvation. Salvation means being whole, and this is threatened when people seek salvation in only one sphere. So religion has to deal with both spheres, the personal and the social political. Keeping this in mind, salvation must comprise the personal and the social dimension.² In the practice of spiritual care, the social dimension is recognized and implemented in diagnostic tools for spiritual care practice.

¹ Sloten, J. v. (2010). *Suffering in a nursing home in the light of Schillebeeckx' theology* p. 1

² Schillebeeckx, E. (1980). *Christ : The Christian Experience in the Modern World* (Bowden, Trans.), p. 716

Schillebeeckx says that the constant of a utopian element in man's consciousness seems fundamental and is embraced by man to make sense of contingency or finitude, suffering etc. and to overcome this. Schillebeeckx sees this as a specific form of the hermeneutical process in everyday life which *"looks for another social system and another future against the existing attribution of 'meaning'. These are comprehensive approaches which teach us to experience human life and society, now or in the future, as good, meaningful and happy totality of man – a vision and a way of life which seek to give meaning and context to human existence in this world (even if only in a distant future)."*³ All embracing views as religions and non-religious world views, general theories of life, functioning as cognitive models of reality interpreting nature, history of mankind and making it to be experienced as meaningful, and 'yet to be realized'.

In religions the living God is the all overarching principle, beyond the personal realm of life. It is the ground for hope, which is an anthropological constant throughout human history: *"That implies that faith and hope – whatever their content – are part of the health and integrity, the worthwhileness and 'wholeness' of our humanity."*⁴ Religion makes no sense when human salvation, redemption and true liberation are impossible. Religious redemption is a condition sine qua non for total liberation of man.

Above the central theological notions are mentioned which are relevant within the scope of this paper. The line of this paper will be: firstly, the ground base of mankind, humanity, human existence, will be shown through the anthropological constants. Secondly, the concepts of suffering and negative contrast experience are discussed.

Thirdly I will try to draw some conclusion on the relation between Schillebeeckx' theology and the practice of spiritual care.

2 Humanity

The theology of Schillebeeckx is heavily based on the humanum, the experiences of man in this world. The conversation partner of the theologian is not the non-believer, but the fellow man that is despised, oppressed and marginalized, suffering not for a good cause, but simply suffering from something. Grace and salvation comes into play when it is said that God is there for all men, and cares for all men. Therefore I start with an overview of the theological anthropology of Schillebeeckx, more particular the so called anthropological constants as presented in the Christ-book. Schillebeeckx considers these constants as universal for mankind, a system of coordinates to think about man and his salvation, his status, and about humanity as a whole.⁵

³ Ibid. p. 740

⁴ Ibid. p. 741

⁵ Ibid. pp. 650, 652

Schillebeeckx says that mankind is in a need for socialization that is personal and democratic, to survive as mankind, but as a meaningful survival too. But what is this a meaningful humanity? Is there a universal valid view, i.c. ground to start answering this question?⁶ He reformulates the question on meaningful humanity (with respect to the future): “*what challenging realities, which cannot be controlled or theorized about by critical reason, must man take into account in his concern for a good, true and happy future, a future worth living, and what must he do to secure such a future?*”⁷

This question points to man’s status. From the spiritual care perspective, transposed to a personal level, this can be interpreted as a leading existential question. The answer seems to me the contingent experiences of patients’ suffering.

2.1 Anthropological constants

Schillebeeckx distinguishes seven anthropological constants that I will briefly comment on from the perspective of spiritual care.

The first anthropological constant is man’s corporeality, his body including his relations with the environment, cognitively, affective, emotionally, and physically. It comprises the whole human. Schillebeeckx states that this is highly relevant for the Christian salvation of man. To deny this is talking about salvation for angels, not for man.⁸ Thinking about the sick and ill, their corporeality is very prominent. Therefore in the practice of spiritual care the physical crisis, the illness, the therapy, the prognosis of recovery, but also in a palliative setting, the deterioration of the body, is often the first subject in a conversation with a patient. The body is the vehicle for their experiences. Even in the course of medically advanced curing and caring contingency is experienced; a rational explanation cannot be given. Just ‘feeling better’ or ‘having a good day’, is sometimes experienced as a salvific gift.

The second anthropological constant is aiming at the connection between the interrelationship among humans and their personal identity: “*Human personal identity at the same time includes relationships with fellow men*”. Schillebeeckx points with this constant to the fundamental relationship of man to the other fellow man, co-constituting his identity. It is a mutuality. The other, fellow man, is aim and end at the same time, and this is universal for mankind. According to Schillebeeckx, this is also as a kind of wholeness, which is a prominent feature of salvation. It goes further than the strict personal level of relationships. A ‘third he’ is therefore the basis for society, as constituting relational structures between people.⁹ I interpret a personal relationship with, e.g. my professors, as a contingent relationship. This kind of relationships is not meant by Schillebeeckx in

⁶ Ibid. p. 661

⁷ Ibid. p. 670

⁸ Ibid. pp. 734-736

⁹ Ibid. pp. 735-737

formulating this constant. It seems to me that Schillebeeckx here points to the primordial relationships among mankind, as a specific aspect of universality of salvation.

Thirdly, part of the human identity is the fact that men live in social and economic contingent changeable structures. They exist often in the form of institutions. They implicate also norms and values concerning the human life. This is needed to be able to live as a society, but the structures also enslave people, and hinder forms of liberation. So ethics comes into play. This forms the social and economic dimension of salvation, as liberation.¹⁰ In the practice of spiritual care people do mention the social injustice that they experience from within the institutions, thereby often aiming to a much wider context than their own social network.

The fourth anthropological constant: man cannot detach himself from his rootedness in time and culture/nature. So his existence is historical. It shows the finiteness of man, and the necessity of adopting a standpoint outside time and space so he can understand his humanity, in a hermeneutical way. Sciences, in a way, help this understanding, but it remains an understanding of our humanity as a remembered truth, so always as it was up till now. But life has to be lived, be realized, so throwing its implications into the future. This way of understanding is a way of experience, and therefore just as universal as history itself. *“That means that the presumption of adopting a standpoint outside historical action and thought is a danger to true humanity.”* From spiritual care perspective: just acting medically, outside the historical action, or life story of a patient, is a danger to true understanding from man to man in patient contact in a true and meaningful relationship.¹¹ This constant is heavily reflected in the approach of ‘levensbeschouwelijke counseling’ (i.e. ‘philosophical / ideological counselling’) as developed by Evers (2011).¹² In this approach the patient is invited to tell his life story from four different perspectives: from the existing factual status, the future, his life as a life story and from the reflective overall meaningful perspective.

The fifth constant is the mutual relationship between theory and practice. It refers to the constant hermeneutical undertaking of man to give meaning, changing it and improving the world. This is a permanent process, that on the human level is *‘the only humanly responsible guarantee of a permanent culture which is increasingly worthy of man – of what brings man salvation.’*¹³ Within the framework of spiritual care, the first thought that comes up to me, is that the scientific progress in medical and social sciences, in general is considered by Schillebeeckx as salvific. A critical note nowadays concerning the health practices in West-European countries is that the human dignity threatens to be lost, or receives less attention. The approach to the patient in his wholeness is at stake.

¹⁰ Ibid. pp. 737-738

¹¹ Ibid. pp. 738-739

¹² Evers, H. (2011). *Masterclass Levensbeschouwelijke Counseling*

¹³ Schillebeeckx, E., p. 740

The sixth constant is already mentioned in the introduction: ‘the religious and ‘para-religious’ consciousness of man; to get along with, make sense of contingency or finitude, suffering etc. and to overcome this, within encompassing frameworks of religion and worldview that comprise utopian elements. This is considered by Schillebeeckx as fundamental in man’s consciousness.¹⁴

By mentioning these six anthropological constants the condition humaine has been sketched, as a frame of coordinates upon which the human experiences can be reflected. I think this is applicable to spiritual care. The Christian salvation, as man’s salvation by God, is concerned with all the constants, not with one or two separately, so concerned with the wholeness of man. The synthesis of these constants and salvation is about an ‘already now’ and ‘not yet’, as Schillebeeckx points out.

In the next chapter I will try to reflect on two notions that are connected with the theme of this paper.

3 Suffering and negative contrast experience

As a spiritual care giver in hospital I see people who are very ill, and very often for a number of years. They themselves often describe their situation as ‘suffering’, trauma, illness, loss of beloved ones, experienced also by their family, friends, or the community they belong to. A question that comes up most often sounds like: “If there is anything up there, how can it be that I have to suffer so badly?” The sense and meaning of the suffering is posed. Essentially, spiritual care is seeking sense and meaning in a situation of crisis.

3.1 Suffering

Schillebeeckx points to the experiences of suffering as a privileged terrain in which it becomes possible to perceive what faith in God might mean.¹⁵ The notion of negative contrast experience is relevant in this context, because it might be seen as a kind of ‘dynamics of faith’.

Schillebeeckx presents some general viewpoint on ‘suffering man’ from a Christian perspective. In the New Testament suffering is seen as the birth pangs of a new time of true peace and true righteousness. Christ is seen more as a redeemer, than as a liberator. “*The redemptive and ultimately truly liberating significance of suffering lies for the New Testament precisely in the suffering which man has to take upon himself in his responsible concern to overcome suffering*”, so participating in the redemptive suffering of Jesus to overcome suffering.¹⁶ The citation text of a patient on the front page of this paper is a nice

¹⁴ Ibid. p. 740

¹⁵ Kennedy, P. (1993). *Schillebeeckx* p. 121

¹⁶ Schillebeeckx, E., pp. 695-696

example of this participating. Schillebeeckx ascribes a creative and productive force to this suffering, a force for reaching to human righteousness.

In mentioning this productive and creative force the theme of this paper evolves more specific. We may ask now: how might that creative and productive force look like? How does this force work within the framework of the anthropological constants? And, after all, what might be the significance for the practice of spiritual care?

Suffering does not come from God, says Schillebeeckx. In fact, God is concerned to remove suffering. But historically, in Christianity, suffering has been connected with redemption and salvation, in the sense that suffering leads in a way to redemption and salvation, the final perfection. But freedom comes also into play: man has the freedom to do good, the opposite of causing suffering to others. Schillebeeckx considers: redemption is therefore a freedom that is freed for doing good. God places man's freedom in a saving perspective. After all, he stresses: "*it is better to have known human existence than not*" a kind of delight in 'being a man', despite everything.¹⁷ Actually Schillebeeckx gives a Christian base for spiritual care on the base of being human, and the place suffering has in it. He presents an example of Augustine, of the friend who died and the situation of not having an answer, even "Trust in God" was not an answer. Christians should not think away the reality of suffering. It is an essentially Christian conception that suffering is not a mere illusion, and it should not be reduced to it. So suffering is an existential, human experience, and therefore man has a profound right to speak about it. Schillebeeckx connects this human based starting point with the conclusion that only God can bring salvation to man, because of the fact that man is God's creation for the good and happiness.¹⁸

Critical force of suffering

Schillebeeckx interprets the way Christian faith can help people to get along with or bear suffering: "*People do not argue against suffering, but tell a story and make statements on the basis of experience without giving an 'explanation': simply because as Christians they look to the suffering and death of Jesus. It must have a meaning, even if no one knows how or why; the essential presupposition is that suffering should not be made [unreadable]*¹⁹ of. Faith in Jesus as Christ is an 'answer' without arguments, a 'nevertheless'. Christianity does not give any explanation for suffering, but demonstrates a way of life. Suffering is destructively real, but it does not have the last word. Christianity seeks to hang on both elements: no dualism, no dolorism, no theories about illusion – suffering is suffering and inhuman -, however there is more, namely God, as he shows himself in Jesus Christ."²⁰

¹⁷ Ibid. p. 697

¹⁸ Ibid. p. 698

¹⁹ 'Unreadable' due to a poor photocopy. The Dutch text uses the word 'bagatelliseren'

²⁰ Schillebeeckx, E., pp. 698-699

Here, Schillebeeckx gives clear words to the human reality of suffering, as a human inhuman reality, and the way people may handle their suffering, in telling stories, placing their experiences within a religious framework of suffering and the death of Jesus.

He labels this as a critical force of the crucifixion and suffering of Jesus. Unfortunately this force has been weakened by the mysticism of suffering that perpetuates the existing order in church and society. The suffering cannot be reasoned away by qualifying the suffering of a patient as an illusion, or by giving quick answers and explanations to the how and why questions, or labelling it as an experience that can only be conceived in the light of God's goals with man.²¹

This critical force, how can we understand this conception in the light of spiritual care? I will first concentrate on other related notions.

Critical rationality

All religions, and also Marxism, have sought for causes of suffering and how to remove it. In modern society, critical rational thinking, comes more to terms with suffering, as a state of affairs that is not to be preferred but in way not completely avoidable, and we should search for causes to minimize the unmerited suffering. In contrast, religions protest against and struggle with unmerited suffering more than critical rational thought has done.

*“Suffering becomes a problem especially for the man who believes in God.”*²² Nevertheless, religious people try to make sense of suffering, including the suffering as a result of social structures and their misuse. Religions do have to accept that suffering can be handled more rationally. We know more about the physical, economic and natural causes (not praying to prevent a next flood, but building dikes). But a lot of suffering is not rationally explicable, extreme problems like experiencing severe guilt, the violence of nature, misfortune of a handicapped child, loneliness. Schillebeeckx stresses that we should sustain in critical thinking on suffering, in remembrance of the history, its circumstances, in order to influence a liberating force. For secularized, non-religious and religious man, this is a huge challenge.²³

We may say that Schillebeeckx is sketching the broader context for thinking about suffering in the practice of spiritual care. The force and power of critical rational thinking, which has brought much progress in medical and social perspective to reduce suffering, is dominant. Schillebeeckx stresses this challenge for the non-religious man in social-political context. In contacts with patients in a hospital the rational approach of coming to terms with the suffering is dominant, promoted and supported by health care politicians and insurance companies, and practiced by physicians, psychologists and other caring personnel. Within this context the challenge remains of making sense of suffering, for the religious and the

²¹ Ibid. pp. 699-700

²² Ibid. p. 671

²³ Ibid. pp. 716-721

non-religious patient. For the religious patient we pose the question how Christian faith contributes to this process.

3.2 Negative contrast experience

A negative contrast experience forms the condition for a cognitive contact with God, besides or on/in the mystical aspect of faith. The negative contrast experience is rooted in the ethical praxis of humanizing unjust situations. In a negative contrast experience 'no' is said to the unjust world as it is. It is a basic experience accessible to all humans. Schillebeeckx considers a negative contrast experience as a seedbed for cognitive experience of God. He recognizes the possibilities of a negative contrast experience in a secularized society, as a positive power to humanize the world. It is a critical negativity. It establishes a social function.²⁴

A negative contrast experience has a negative side, the experience of unjustness, suffering, and illness. To this negative element a positive element is attached. The positive element is meant to be the situation that is not actual, that has to come, that can be dreamed about, hoped for, and sought after: an unrealized future. The positive element cannot be perceived as real, it is unrealized. So a negative contrast experience is not simply an experience of a negative happening, e.g. suffering. Kennedy summarizes: the negative side is the disordered nature of human existence and suffering. . "A sense of indignation eventually emerges from within such a negative experience: the very experience of debilitating suffering contrasts with a more worthy and human situation envisaged in the midst of suffering; and the perception of contrast which triggers a sense of indignation which refuses to submit to the inanity of suffering. The sense of indignation is associated with an incipient awareness of hope which prompts a prophetic protest against the causes of suffering. And so, a negative contrast experience militates against what should not be, on the basis of a hope what should be." A negative contrast experience 'is actually a double edged experience linked to the notion of prophecy.'²⁵

So what brings us this notion of negative contrast experience? To me it seems that Schillebeeckx meant this notion of negative contrast experience as a potential conception of dynamics of faith or religious dynamics, i.e. how the human experience and the consciousness of God come together in real mundane life. Because it is accessible for all humans, in the practice of spiritual care, one might expect that patients express this 'no' with regard to what they experience (observe) as suffering, being unjust social political situations, or conditions of physical crisis and illness. In a way this is the case, and the 'no' can be heard in the stories of patients. What about the positive side, the hope for that what should be? Kennedy uses the word 'prophecy', implying a notion of hope and critical expression. Is

²⁴ Kennedy, P., pp. 127-128

²⁵ Ibid. pp. 127-129

this a core substance of the critical force of suffering? And is this force strengthened by the Christian belief in Jesus, his suffering, death, and resurrection?

In the next chapter I will try to explore how the critical, productive and creative force of suffering may be more intelligible from the perspective of spiritual care, connecting the notions negative contrast experience and critical rationality, against the background of the anthropological constants.

4 Spiritual care and the critical force of suffering

What did we do so far? Schillebeeckx' theology is heavily oriented on the humanum, the real humane life. In this context the aforementioned anthropological constants are significant, especially the first one that I already mentioned in the introduction, i.e. the constant of the utopian element in man's consciousness. Then we discussed the concept of suffering and related concepts of critical rationality, and negative contrast experience. Schillebeeckx mentioned a creative and productive force for reaching human righteousness, which is connected with the redemptive suffering of Jesus. The words 'creative' and 'productive' are the most challenging here, because they refer to human cognitive capacities, so to possibilities for people to overcome suffering, in a way which is profoundly human. My central question is: can this creative and productive force be understood, that is, its significance in the context of spiritual care?

I will now discuss the side of spiritual care. The concept of contingency is crucial within the domain of spiritual care, how people get along with life events that turn their lives upside down. Scherer-Rath²⁶ proposed a scheme for seeking meaning and sense of such contingent life events, such as suffering from illness. The seeking of meaning is not only reserved to religious people, but also to non-religious people. The anthropological constants provide us a way of formulating the seeking for sense and meaning that is more near to the theological language field as presented by Schillebeeckx. He keeps humanity as an all-encompassing concept in mind, but I will now try to make it more specific. In his introduction on the seven anthropological constants Schillebeeckx stresses the critical awareness of man concerning the question what it means to be human, so what humanity is about, his historicity, wholeness, and salvation as a central theme in humanity. This is also applicable to a single life, the striving for wholeness, salvation, and it implies also taking into account the personal history or the life story, recognizing the limitations of reason to (re)create the wholeness. The anthropological constants are a 'system of coordinates of man and his salvation' to think on this.²⁷

²⁶ Scherer-Rath, M. (2007). *Contingentie en religieus-existentiële zorg*

²⁷ Schillebeeckx, E., pp. 733-734

A key element is human reason, its critical power, and its limitations. Schillebeeckx says that even religious people cannot make sense of unmerited suffering as a part of a divine plan. Suffering cannot be handled rationally as a problem, but appears as a mystery, although you can analyse and explain some kinds of suffering and propose solutions, but the suffering as such is a mystery: “... *suffering and evil in our human history are also my suffering, my agony and my death. They cannot be objectified.*” and “*Human reason cannot in fact cope with concentrated historical suffering and evil. Here the human Logos, human rationality fails: it cannot give any explanation.*”²⁸

This might give some insight on the experience of the suffering, whether personal or from social injustice. It is impossible to objectify it, so to ‘place it in front of me’ and leave it there for critical analysis. Although patients often speak about their illness in this rational and objectifying way, it is almost never the only way of speaking. They express that the suffering is felt inside the body. To deal with the suffering the own body is involved as the locus of the felt experience of suffering, even the suffering due to social political misconduct. I see this as the significance of the first anthropological constant of man’s corporeality.

How does God come into the play? Does the evil and suffering have a ground in God? Schillebeeckx rejects an affirmative answer to this question: God is pure positivity, in favour is the life of the sinner, not his death. Critical reason has not helped us so far, we did not defeat evil. This is what our own critical rational analysis tells us. “*Religious belief seeks to rescue us from this fatal experience and give our action new meaning by breaking its impotence in the light of a new possibility from God: thanks to the proclamatory reminiscence of Jesus as the crucified man who is now alive, through whom a future is given to those who have come to grief in history, even those who (for the moment) are victors at the expense of the defeated.*”²⁹

The Christian message is not an explanation for suffering. God himself did not want Jesus’ death as a compensation for what we did wrong in our history.

Schillebeeckx concludes: we are confronted with the fiasco of critical rational resistance to evil. Suffering brings us, believers, direct up against God. Death shows that a perfect universal salvation on earth is not possible. Salvation should be universal and complete.³⁰

How about salvation if we still experience evil, unhappiness and suffering? It is often in the practice of spiritual care in the hospital that patient’s critical power is challenged but that it will not give them an answer for the big why-question, the question for the ground of their suffering. The experience of many patients is that their belief in a good God is in vain. They

²⁸ Ibid. p. 725

²⁹ Ibid. p. 728

³⁰ Ibid. pp. 726-727

reject God or feel deserted by him. It is simply unthinkable for them that their God did this to them. Their critical reason does not give them a way out either. Schillebeeckx points out that behind this 'reasoning' hides a latent dualistic thinking, of good versus evil, as equally opposing to each other. They have been fallen into the hands of the opposite camp. He suggests seeking the meaningful relation with God in a non-dualistic relation.

Now I will turn to the spiritual care perspective how the view of the non-dualistic relation, good, salvation, and in the end redemption and liberation, despite their suffering, may bring salvation and redemption. I think the creative and productive force of suffering should be related to the notion of negative contrast experience. The NO against the suffering, in the awareness of the belief in God, in the redemptive and salvific death of Jesus, initiates a dynamic of faith in an instant moment. This process is the negative contrast experience. A deeply felt experience of solidarity of Jesus, in a screaming NO, with the person who suffers is overwhelming and releases an enormous force that is creative and productive? I tend to affirm this. This moment, this conversion in a literal sense, within the deepest suffering, cannot be observed with patients in the practice of spiritual care, but only be testified on by themselves. Nevertheless the consequential actions can be observed. I take therefore as an example 'vocation', as active and positive interpretation of a contingent life event in the scheme of Scherer-Rath³¹. Schillebeeckx tells us: vocation is freely accepting the suffering and choosing the good for what the suffering is for. The significant meaning is that the suffering is an actual implication of the call to serve the good cause. This is all true for religious sacrifice, experienced as sacrificial love, for Christians that is 'the participating in the suffering of Jesus Christ' (II Cor 1.5).³²

In spiritual care the vocation Scherer-Rath aims at, may be the suffering itself taken up as a vocation, but also after suffering, i.e. the crisis has (partially) been mastered, another goal in life may be set, and taken up as a duty/assignment. A nice example: parents who devote much of their time and energy helping other people's children with cancer after losing a child due to that disease themselves. In the case of religious people taking up a vocation, this can be seen as striving for salvation, i.e. wholeness, making sense and giving meaning to the loss of their child. They repeat the scream of a NO after their loss, and then the hope for a better, less senseless suffering is born and a great power is mobilized, the creative and productive force to strive for the good of themselves, their relatives and humanity.

5 Concluding remark

In this paper I tried to relate Schillebeeckx texts on social political theology from the Christ book, with my own experience in the practice of spiritual care. Schillebeeckx theology is not conceptualized from this perspective. He keeps humanity as a whole, Gods creation, as central in his mind, its salvation, redemption and liberation. Reflecting on these texts poses

³¹ Scherer-Rath, M.,

³² Schillebeeckx, E., pp. 724-725

an immediate problem: spiritual care is directed to patients, living people, not to humanity as a whole. The link between these perspectives, however, is the phenomenon that patients feel connected with a much wider community than their direct relatives and they express this to me. So, even people who suffer from severe illness are political.

The writing of this paper gave me another view, or representation, of what I call the 'flip-flop-moment' in religion. With this I mean the moment in theologizing where the last step in thinking presupposes the Christian belief, in the solidarity of Jesus, his redemption, that gives power to the creative and productive force of suffering. I am fully aware that the parents-example in the last paragraph of the previous chapter can also be observed with people who claim not to be religious at all. They do feel a great responsibility for humanity, and they act accordingly.

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