Worldview Foundations of Spirituality and Ethics

*Introduction*

There has been an increase of interest in the role of spirituality in health care, as well as in the workplace and other fields in general. This interest has been met with a variety of responses, including an uneasiness that has historical roots. There is generally a perceived tension between science and religion/spirituality. This estrangement between the worlds of science and religion is in some ways not truly reflective of some inherent incompatibility between science and religion per se, but rather a reflection of underlying worldview tensions. The rediscovery of spirituality and its implications for health care provides recognition that the estrangement between the two worlds has not served patients' best interests. If this is the case, then part of the task of serving patients well will require some basic worldview training in order to not only understand patients' own backgrounds more clearly, but to also promote the fruitful interaction of science and religion in the health care setting more generally.

Spirituality and Worldview

The theoretical and practical foundations of any discipline or field take place within the wider framework of what is known as a worldview. A "worldview" is a term that describes a complete way of viewing the world around you. For example, consider religion and/or culture. For many people, their religion or culture colors the way in which they view their entire reality; nothing is untouched by it and everything is within its scope. Yet one need not be religious to have a worldview; atheism or agnosticism are also worldviews. Thus, all of one's fundamental beliefs, practices, and relationships are seen through the lens of a worldview. The foundations of medicine and health care in general bring with it a myriad of assumptions about the very sorts of questions answered in a person's worldview. Consider carefully the seven questions in the *Called to Care* textbook in order to begin grasping more clearly the concept of a worldview.

A Challenging Ethos

A fundamental thesis of this course is that two sorts of underlying philosophies or beliefs about the nature of knowledge, namely, scientism and relativism, are at the heart of this perceived tension between science and religion. Moreover, scientism and relativism help explain to some degree why this tension has not served the best interests of patients, and is even at odds with the fundamental goals of medicine and care.

Scientism is the belief that the best or only way to have any knowledge of reality is by means of the sciences (Moreland and Craig, 2003, pp. 346-350). At first glance this might sound like a noncontroversial or even commonsensical claim. However, think about this carefully. One way to state this is to say that if something is not known scientifically then it is not known at all. In other words, the only way to hold true beliefs about anything is to know them scientifically. Relativism on the other hand is the view that there is no such thing as truth in the commonsensical sense of that concept. Every claim about the nature of reality is simply relative to either an individual or a society/culture. Thus, according to this way of thinking, it might be true here in the United States that equality is a good thing, but in some Middle Eastern countries it is simply not a concern. Yet there is no ultimate truth of the matter, it is simply a matter of individual or popular opinion. In some way, truth is just what an individual or a culture decides that it is, and therefore not truly discovered, but invented.

The current context of health care and medicine in the West is defined by an ethos (the prevailing attitudes and beliefs of a culture) of scientism and relativism. This ethos has exacerbated the perceived philosophical and cultural tension between science and religion. The result has been a general relativizing and caricaturing of religion, and the elevation of science as the default epistemology for all things rational or even true.

While scientism may seem commonsensical or rational at first glance, a closer examination reveals glaring weaknesses. It should be noted right from the outset that scientism is not equivalent to science. This is because scientism is a philosophy about the nature and limits of science as well as the extent of human knowledge. Scientism is a philosophical thesis that claims that science is the only methodology to gain knowledge; every other claim to knowledge is either mere opinion or false.

One of the most pressing dilemmas for scientism is science's inability to make moral or ethical judgments. To understand why, consider the nature of scientific claims and their distinction from moral or ethical judgments. General scientific claims can be described simply as the attempt to make descriptions of fact. But when people make moral or ethical judgments, they do not simply make statements of fact (though that is part of it), but are evaluating those fact claims. Thus when making a moral judgment people are evaluating whether some fact is good or bad. Thus consider the distinction between the following statements:

(1) 90% of Americans believe that racism is wrong.

(2) Racism is wrong.

Statement (1) is a statement of fact in the sense that it is meant to describe the way things actually are, or what is the case. Statement (2) however, makes a judgment; it makes a normative claim in the sense that it is making a claim about what ought to be the case. Statement (2) is not simply reporting or describing the facts. It is saying that it is not the way it is supposed to be. In recognizing these differences, a crucial distinction has surfaced between (1) scientific claims and (2) moral and ethical claims. Scientific claims are limited to statements of description; they are solely claims about what is the case. Moral and ethical statements are prescriptive and are evaluative claims about what ought to be the case. This has been described as the fact-value distinction to designate the difference between facts and values, values being a prescription of the way things ought to be, the moral evaluation of facts. This distinction has also been described as the "is" (fact) versus "ought" (value) distinction.

Thus, because science deals with mere facts, it is not in a position to say anything about what ought to be the case. Science is relevant to moral and ethical claims in interesting ways, but prescriptive statements about what morally ought to be the case are simply beyond the bounds of science. To try to derive what ought to be the case only from what is the case is a logical fallacy. If one were to look at the world and the way things are, and then claim that it simply follows that it is the way it ought to be does not match the experience of morality. There are many events that are the case and describe what is (genocide, war, hatred, murder), but whether or not they ought to be that way is a further question that science is not in a position to answer. Thus to try to derive an ought from an is refers to what is called the fallacy of deriving of ought from an is.  Much more could be said of the inadequacy of scientism, but it should be noted that moral, ethical, and religious claims all involve normative claims about the way the world ought to be. One practical effect within health care has been the subtle but pervasive view that religion is a harmless tangent to medicine and health care at best, and a superstitious and destructive distraction at worst.

Recently there has been a resurgence and appreciation of spirituality within medicine in more holistic approaches to health care. For example, the Center for Spirituality, Theology and Health at Duke University was established in 1998 for the purpose of

conducting research, training others to conduct research, and promoting scholarly field-building activities related to religion, spirituality, and health. The Center serves as a clearinghouse for information on this topic, and seeks to support and encourage dialogue between researchers, clinicians, theologians, clergy, and others interested in the intersection.

(Center for Spirituality, 2014, para. 1)

While a welcome corrective, it is easy to inadvertently buy into weaker forms of scientism and fail to appreciate the particularity of each religion by reducing all religion to a generic spirituality. For example, Burkhardt (1999) attempts to defend a generic definition of the term "spirituality" (p. 71), but Shelly and Miller (2006) point out the inadequacy of such a strategy. It is not fair or respectful to paint all religions or worldviews with the same brush under the heading of spirituality and ignore the differences.

Thus, in the interest of philosophical clarity, religious sensitivity, and genuine care, this section will introduce fundamental concepts and challenge the contemporary ethos to make room for genuine religious dialogue.

The Foundations of Christian Spirituality in Healthcare

In stark contrast to this ethos is the Christian tradition and the resources it provides for a rich conception of care. Contra scientism and relativism, the foundations of Christian spirituality in health care, includes two attitudes/theses: (1) an acknowledgement of science as a subset of knowledge in general, and a deep appreciation for science as a collective human enterprise that reflects the knowability and order of creation; and (2) the goodness and worth of this creation (in so far as it reflects God's creative intention) with human beings bearing special dignity and intrinsic worth, reflected in the well-known bioethical principle of "respect for persons" (National Commission, 1979).

The foundations of Christian spirituality in health care assume genuine knowledge of God and his purposes. Central to this foundation are the biblical Christian narrative and the person of Jesus Christ. In order to appreciate and do justice to this center, the ethos of scientism and postmodernism must be first challenged and dispelled.

This first topic of this course is devoted to understanding the concept of worldview in detail and to begin to challenge the philosophies of relativism and scientism. It will also begin to lay the foundations of a broadly holistic understanding of the relationship between spirituality and health care in general, and a Christian worldview for health care in general.