

SALVE REGINA UNIVERSITY

A CHRISTIAN ETHICS OF CARE AS A SPIRITUAL MODEL: ITS PASTORAL  
APPLICATIONS AND RELEVANCE

A DISSERTATION SUBMITTED TO THE FACULTY OF HUMANITIES PROGRAM IN  
CANDIDACY FOR THE DEGREE OF DOCTOR OF PHILOSOPHY

BY

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PREVIEW

## Acknowledgments and Dedication

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Finally, I dedicate this work to my late father, Eugene R. Anthony II, and mother, Bette Anthony, who have always loved and supported me, to my beloved wife, Frances, who is my devoted partner for life, and to all the past, current, and future oncology patients at Massachusetts General Hospital. May God bless you all!

## Abstract

The work introduces a new and innovative pastoral/spiritual care theory/model, which I have labeled as the Christian ethics of care. The Christian ethics of care is composed of a five-point framework, and the primary moral and social elements of it are the following: compassion, attention, respect, prayer, and empathy (CARPE). While many individuals in their daily lives extend one, some, or even all of the five-point framework elements of CARPE to someone or others in their social interactions, this paper takes the position that (non-) professional pastoral and spiritual caregivers should make a conscious and concerted effort to incorporate all five of the elements of CARPE into their interactions with suffering clients/patients. As a result of doing so, this work asserts that a positive effect will occur upon the clients'/patients' overall health and well-being, while leading to emotional, psychological, spiritual, and even physical healing within the suffering/grieving person receiving pastoral/spiritual care. In order for pastoral/spiritual caregivers to effectively understand how the Christian ethics of care could be utilized and practiced, I have created four hypothetical/fictional case studies, which deal with actual real world traumatic events, covering various scenarios involving a suffering individual and/or his/her family member(s) dealing with trauma, loss, and grief. In these case studies I, as the pastoral/spiritual caregiver, extend CARPE to my clients/patients, analyze and discuss the Christian ethics of care case studies, and provide a pastoral/spiritual care plan, to each client/patient, based upon the Christian ethics of care theory/model. Finally, the work focuses on how a medium, such as film in our digital age, could positively contribute to overcoming social prejudices in our society that are contradictory to CARPE, while encouraging pastoral/spiritual

caregivers to consider using particular films to more creatively interact with their suffering and/or grieving clients/patients.

PREVIEW

## Introduction

### **Primary Research Question**

How does the philosophical ethics of care revise/complement/add to existing approaches to Christian pastoral ministry, specifically in healthcare situations, and also professional counseling settings?

### **Secondary Research Questions**

How does the combination of religion and ethical moral theory, such as a Christian ethics of care, help us to engage with the question of “What does it mean to be human in an age of advanced technology?”

How does religion—seen both as a general cultural phenomenon and as a collection of unique, specific traditions—illuminate the task of being human in an age of rapidly advancing technology (i.e. in the 21<sup>st</sup> century)?

Since we live in the digital age, how can a pastoral/spiritual caregiver utilize a medium, such as film, to better allow them to communicate with some clients/patients in new and refreshing ways that were before not possible?

What role does creative pastoral/spiritual care play in a suffering client’s/patient’s overall healing and restoration of functional wholeness?

If all of us would consciously incorporate at least one or even all five of the moral/social elements of compassion, attention, respect, prayer, and empathy (CARPE) into our daily interactions with one another and with everyone, could we live more harmoniously together in a pluralistic world?

## **The Christian Ethics of Care's Relationship to Technology and the Humanities**

As recently stated, the thesis question that I pose, will explore, and attempt to answer is “How does the philosophical ethics of care revise/complement/add to existing approaches to Christian pastoral ministry, specifically in healthcare situations, and also professional counseling settings?” In my dissertation, my goal is to clearly define and articulate my Christian ethics of care theory/model, and apply it to four case studies (hypothetical/fictional scenarios) that primarily focus on individuals dealing with traumatic events (i.e. an ethical conundrum involving a young boy's life or death, a teenager's angst concerning his sexual orientation, a recurrence of cancer and the patient's despair, and a family's agonizing decision whether to terminate their mother's life, by withholding life support). Therefore, because we live in an age of advanced technology, three of the four case studies focus upon how medical technology, in combination with pastoral/spiritual care, can positively impact a suffering patient's overall healing, while helping to restore his/her functional wholeness. In order for readers to truly understand how my Christian ethics of care theory/model can be utilized in the real world, I assert that it is necessary to create hypothetical/fictional case studies that deal with actual real world traumatic events, and explore how I (as a fictional chaplain or professional counselor) would apply a Christian ethics of care to a particular life event, affecting an individual and/or family member(s), across the stages of life. The four case studies are useful because it will allow readers to essentially see a Christian ethics of care theory/model put into action and tested, and it will also allow me to analyze this model of pastoral/spiritual care. As a result, I, and other pastoral/spiritual caregivers, can remember and utilize similar pastoral/spiritual care and counseling strategies if I (and hopefully my readers) deal with a client/patient in a similar crisis situation.

## **Methodological Approach**

The research into exploring my thesis question will not only be examined via my use of the four Christian ethics of care hypothetical/fictional case studies, but will also be supplemented by examining relevant pastoral care and counseling literature. By using such works, which will be annotated and discussed in the “Literature Review” section of the introduction, it will better allow me, and also my readers, to understand the concepts and meanings of compassion, attention, respect, prayer, and empathy (CARPE), and how important it is for pastoral/spiritual caregivers to incorporate this five-point framework into all of their interactions with their suffering/grieving clients/patients. Although many pastoral/spiritual caregivers utilize one, some, or all of the moral/social elements of CARPE in their (non-) professional conversations and private contemplations upon their clients/patients, I assert that making a conscious effort to incorporate all five into their professional and everyday lives will not only make them better pastoral/spiritual caregivers, but will also positively impact those suffering individuals dealing with trauma, loss, and grief. Before introducing each case study, I will devote a section of each chapter providing background information, which deals specifically with issues that are vital to formulating my pastoral/spiritual care plans for each hypothetical subject and/or his/her family member(s). For example, case study #1 involves my providing pastoral care to an adolescent Jehovah’s Witness (JW) and, because some readers may be only somewhat, or not even at all, familiar with the beliefs, doctrines, and public health practices of JW’s (i.e. refusal of blood transfusions), I believe that it is necessary and useful to enlighten my readers with relevant information pertinent to this and the other three case studies.

It is necessary for my readers to understand the following: although the four Christian ethics of care case studies are hypothetical/fictional, the analysis and discussion of them are

strongly influenced by my personal experiences as an oncology chaplain, at Massachusetts General Hospital (MGH), in Boston, MA. Although every good pastoral/spiritual caregiver must have a foundational knowledge of pastoral care and counseling (PCC) strategies found in academic literature, I espouse that nothing substitutes for real world interactions with suffering clients/patients, in which the PCC strategies can not only be utilized to help others, but also one's individual growth and creativity as a pastoral/spiritual caregiver can flourish, while being strengthened with each and every conversation.

Finally, because we live in the digital age, I will also analyze and discuss three films, *Milk*, *Wit*, and *Ghost*, which not only supplement three of the four case studies (the first case study is preceded by an actual medical case study relevant to it), but can encourage my readers to view how various mediums, such as films, can add to their pastoral/spiritual toolkits. The analysis and discussion of each of these three films will occur following the conclusion of case studies #2, #3, and #4, and the issues involved in each film expound upon vital themes that predominate the case studies.

### **Originality of Topic and Expected Results**

Although I have read and researched numerous authors' pastoral care and counseling (PCC) academic texts and scholarly articles devoted to providing useful PCC strategies to pastoral/spiritual caregivers, I have yet to find one that emulates the Christian ethics of care's five-point framework and its practical applications to pastoral/spiritual caregiving. This work is also unique because of its format. Whereas many excellent PCC texts, such as *Counseling Families Across the Stages of Life: A Handbook for Pastors and Other Helping Professionals*, create hypothetical/fictional scenarios involving the actions of a fictional pastoral/spiritual caregiver, this paper digs deeper by demonstrating how an individual's religious beliefs or

spirituality can have a profound impact upon a client's/patient's autonomy and decision making. By a pastoral/spiritual caregiver taking the time to research and better understand the client's/patient's religious beliefs, doctrines, and even public health practices, it allows him/her to not only formulate and implement a better pastoral/spiritual care plan, but it also can lead to a breakthrough in just communicating with the suffering individual. This also applies to not only gaining and possessing a general knowledge of a client's/patient's secular lifestyle, interests, and even sexual orientation (as in case study #2), but to "dig deeper" by researching root causes that contribute to the suffering sometimes caused by external causes and human perpetrators.

## **Literature Review**

The literature included in this brief review, although not exhaustive, will include academic works in the areas of pastoral care and counseling (PCC), Christian religion, LGBTQ issues, gender-role socialization, moral and ethical theory, a novel that addresses theodicy, creative pastoral care, and others that influenced the creation of the Christian ethics of care theory/model, along with those relevant to the case studies and their background information. I will pay special attention to those resources that better influenced my understanding of compassion, attention, respect, prayer, and empathy (CARPE) that is the five-point framework embedded in the Christian ethics of care.

*In a Different Voice: Psychological Theory and Women's Development*, by Carol Gilligan, is a book on gender studies that had a profound impact upon the creation of the Christian ethics of care theory/model. Although Gilligan's book is primarily recognized as a criticism of Lawrence Kohlberg's stages of moral development of children, she coins the phrase "ethic of care," and makes an argument that men and women have different voices. The author asserts that women are more closely aligned with the value of care in their thinking and actions



than men, and that women have more of a propensity to listen and show their emotions, as opposed to their male counterparts, simply because of gender differences. The theme of gender studies and embodiment is also highlighted in Judith Butler's *Gender Trouble: Feminism and the Subversion of Identity*. Butler argues that stable gender identities are merely an illusion and that sex and gender are culturally constructed. Therefore, she urges her female readers to take performative action to destabilize and "trouble" gender categories; by doing so, women can free themselves from culturally imposed terms, such as sex and gender, and find out who they truly are on the inside.

The concept of gender-role socialization and its influence upon anti-LGBTQ attitudes and violence is explored in case study #2 and, in Maurianne Adams' *Readings for Diversity and Social Justice*, she argues that we must all make a concerted effort to not just openly discuss social inequality issues with one another, but to make a concerted effort to educate others to fight against injustice, while educating others how it exists all around us. It is an excellent work that defines and explores gender roles, and examines how we are socialized by society's adherence to strict conceptions of gender, which encompasses our identity and how we are perceived by others. For example, society regards heterosexuality as the accepted norm and/or standard of behavior for men and women in their relationships, and gay individuals and their relationships as inferior, via their engagement in non-normative behavior. Because gender roles are rigid categories, gay individuals are sometimes met with contempt, and even violence, if they openly display their sexual orientation and "effeminate" mannerisms in public settings.

Another influential text on anti-LGBTQ behavior and gender-role socialization's negative impact upon it is C.J. Pascoe's *Dude, You're A Fag: Masculinity and Sexuality in High School*. She argues that, in U.S. society, we espouse rigid, traditional gender roles that put

pressure on our male teenagers to grow up quickly, which causes them anxiety and distress when not living up to them. Her work is interesting because she espouses that hegemonic masculinity, which can be generalized as males supporting gender inequality, is exhibited toward males who do not conform to our society's approval of heterosexual behavior and/or possess no identifiable masculine/feminine modes of behavior. Because of gender-role socialization, it follows that some teenage males would cross the threshold into expressions of toxic, destructive masculinity to prove their manhood, and this theme is also echoed in Gary D. Comstock's *Violence Against Lesbians and Gay Men*. Finally, I highly recommend Michael J. Nakkula's and Eric Toshalis' *Understanding Youth: Adolescent Development for Educators* to all parents, educators, and others who want an answer to the following question, which is "So, what can educators and students do to promote a healthy school environment that is sensitive to the needs for gay students to find a safe space from harassment and violence, while educating students that their school will not tolerate anti-LGBTQ behavior and/or violence?"

Because this work was influenced by pastoral care and counseling strategies and techniques, other PCC works were researched and explored to provide a framework for the Christian ethics of care theory/model. They not only aided me in understanding fundamental concepts and practices that form the foundation of "what makes a good pastoral/spiritual caregiver," but these works were also instrumental in the creation, analysis, and discussion of the four Christian ethics of care case studies, and also helping me to formulate pastoral/spiritual care plans for the suffering/grieving individual and family member(s) under my hypothetical/fictional care. First and foremost of these works, which gave me the idea of creating case studies to test the effectiveness of my Christian ethics of care five-point framework (CARPE), was Andrew J. Weaver's, Linda A. Revilla's, and Harold G. Koenig's *Counseling Families Across the Stages of*

*Life: A Handbook for Pastors and Other Helping Professionals*. For professional pastoral/spiritual caregivers, I assert that this is a vital text for evaluating how they would perform under similar circumstances, as the counseling protagonist, in each fictional scenario. The work not only provides valuable statistics related to each PCC scenario, but also comments upon how the suffering individual should be treated within the faith community. The authors stress that prayer and religion provide positive health benefits for patients, and their reflections upon prayer influenced my decision to include prayer as one of the five moral/social primary elements of CARPE. Attention to a patient's words and needs is also another element of CARPE, and Emmanuel Y. Lartey's *In Living Color: An Intercultural Approach to Pastoral Care and Counseling* is a work that focuses on pastoral care and counseling in different cultural contexts and in a diversity of cultures. His work argues the importance of the healing pastoral care function, and he emphasizes that healers must strive for their presence, words, and activities to become channels through which the love, support, and help immanent in transcendence is mediated.

I must remind my readers that all of us are spiritual caregivers, and that we all, at some point in our lives, have extended comfort and healing to those who needed it. However, not everyone has read academic texts that specifically address pastoral care, so I feel compelled to introduce a few PCC references that will provide non-professional pastoral/spiritual caregivers an introduction to the world of pastoral care and counseling. One such text is *An Introduction to Pastoral Care* by Charles V. Gerkin, which I chose as my primary text for providing a survey of the field of Christian pastoral care and counseling in chapter 1. His work is significant because he provides pastoral care and counseling techniques for a diverse population, who may or may not need Christian faith based counseling. As with Gerkin's book, Robert C. Dykstra's *Images of*

*Pastoral Care: Classic Readings* should also be considered as required reading for the newcomer being initially introduced to pastoral care and counseling. For any pastoral/spiritual caregiver, Dykstra finds it a useful spiritual practice for him/her to choose a metaphor for what defines your method of providing care for others. By doing so, it puts your method of caregiving into perspective, while allowing you to more closely identify with the needs of the client/patient. For the author, one such metaphor is that of the “solicitous shepherd.” Just as Jesus Christ referred to Himself as a shepherd tending the flock of man, the Christian shepherd also shares one thing in common with Christ, which is that a shepherd must have genuine concern for the person s/he is helping; otherwise, we are just wasting our client’s/patient’s time and possibly negatively affecting his/her functional wholeness.

The primary text that I chose to assist me in combining Christian pastoral ministry with the philosophical ethics of care is Cynthia Crysdale’s *Embracing Travail: Retrieving the Cross Today* in chapter 3. In her book, Crysdale focuses upon how the cross, the symbol of Christianity and the Christian Church, means different things to different people. Although many theologians view the cross as the mechanism used by God to redeem mankind from sin, via the death and resurrection of His Son, many embrace the cross and resurrection as a means to identify with Christ the Crucified, and see themselves as victims of sin and persecution. For these individuals, healing begins with embracing their suffering, which leads to (Christian) redemption. Finally, a classic text of PCC that was, and is, still groundbreaking is Seward Hiltner’s *Preface to Pastoral Theology*. Through his teaching and written works, Dr. Hiltner became an important figure in applying modern psychology to the work of the clergy. He wrote many influential pastoral care books and articles, and headed several programs in pastoral training. In this work, he regards healing, guiding, and sustaining as the three aspects of the Christian shepherding perspective. He

argues that the shepherd's solicitous concern for the welfare of the person(s) is a dominant concern, that there is some degree of recognition of need within the person(s), and that all pastoral caregivers possess some degree of receptivity to help, which can be regarded as concentrating on the welfare of this person or this smaller group. His work inspired me to choose the Christian shepherd, as my personal metaphor, when utilizing the Christian ethics of care in my future interactions with rehabilitation counseling clients.

As I will emphasize later in this introduction and throughout this paper, the Christian ethics of care pastoral/spiritual care theory/model (*hereafter referred to as the Christian ethics of care theory/model*) is a moral and ethical one, utilizing the moral/social five-point framework elements of compassion, attention, respect, prayer, and empathy. Four works deserve mentioning because they introduce readers to the world of ethical and moral theory, along with various approaches to view the world and our place in it, which many non-philosophy majors have never even heard of or be familiar (with). The first one is Lawrence M. Hinman's *Ethics: A Pluralistic Approach to Moral Theory*, which I use as the primary text for a general examination of ethical theory in chapter 2, and Hinman defines ethics and how it differs from morality. Various chapters discuss the dominant moral theories, such as the concepts of the ethics of duty, the ethics of rights, the ethics of character, etc., and, as a direct result of reading this book, it had a profound impact upon my writing; this is because it made me conscious of the useful necessity of defining the Christian ethics of care to myself and my readers. As previously mentioned, I consider the Christian ethics of care as an innovative and new theory/model to pastoral/spiritual caregiving. However, the concept of the Christian ethics of care was strongly influenced by what I consider is the pre-dominant book on the philosophical ethics of care, which I reference in the second half of chapter 2, and this is Virginia Held's *The Ethics of Care: Personal, Political, and*

*Global*. In her book, Held explores the concept of “care” and argues that it is a practice and a value. She views the ethics of care as an alternative to the dominant moral theories, such as those of Kantian ethics, utilitarianism, and the ethics of justice, which all value impartiality rather than how caring relations can influence our moral decision making and relationships with one another, within and outside the family household.

The primary text that I utilize and reference in chapter 4 is Karen Lebacqz’s *Professional Ethics: Power and Paradox*. In her work, Lebacqz provides her readers with a three-point framework for ethical decision making (action, character, and structure), and uses the praxis method by analyzing a case study involving an ethical dilemma, while using her aforementioned framework as steps for making an ethical decision. Another significant work in the field of ethical and moral theory is Barry Schwartz’s and Kenneth Sharpe’s *Practical Wisdom: The Right Way to Do the Right Thing*. I was particularly drawn to Schwartz’s and Sharpe’s chapter 5 entitled “Thinking with Feeling: The Value of Empathy,” which helped me to better understand not only what empathy is, but also how it differs from compassion. As stated by the authors of *Practical Wisdom*, a practically wise person does not just “mull over” doing the right thing, but s/he instinctively knows to do it without hesitation. Practical wisdom is a moral skill that does not just develop overnight. In order to act wisely in our personal and professional lives, our moral skills (such as developing empathy and compassion) are developed through combining our wisdom with our experiences; as a result, our moral decisions allow us to flourish.

Because my pastoral/spiritual care theory/model is based upon a Christian theological worldview, I also read and selected a few Christian religious works that were very useful to me when formulating the analysis and discussion of the Christian ethics of care (four) case studies, along with creating the pastoral/spiritual care plans for each one. One of the four pre-dominant

references that I found most useful was Harold W. Attridge's *The Harper Collins Study Bible (NRSV)*. This is his most well-known work and is considered the landmark, general reference *Bible* that offers the full text of the *New Revised Standard Version*, as well as in-depth articles, introductions, and comprehensive notes by today's leading biblical scholars for the Society of Biblical Literature. This work does not argue anything but presents the Hebrew and Christian Testaments in clear and precise verbiage. I found Attridge's work very useful because it possesses footnotes that aide layperson readers, divinity school students, and biblical scholars in their study of the *Holy Bible*. In order for myself and readers to contemplate each of the five moral/social elements of CARPE taken from the Christian Testament, I include the verbiage from each chapter and verse(s) at the beginning of four of the eight chapters in my dissertation (one is also included at the beginning of this work's appendix). In some sections of my work, I read aloud to a client/patient from Maggie Oman's non-denominational book *Prayers for Healing: 365 Blessings, Poems, & Meditations from Around the World*. As a chaplain (cancer center) intern at Massachusetts General Hospital (MGH), I frequently read appropriate passages from this book, and also gave out free copies of it to oncology patients, usually after meeting, conversing, and praying with them. *Prayers for Healing* is a book of 365 blessings, poems, and meditations from around the world and, along with prayer, it can be used as a daily devotional for people who are healthy or overwhelmed by disease, illness, grief, and/or suffering.

Finally, as a former United Methodist (I have been recently confirmed as an Episcopalian), my Protestant spiritual care philosophy has been strongly influenced by two primary reference texts. Reverend Brian K. Milford's *The Book of Discipline of the United Methodist Church* (2016) is the Methodist Church's text for proclaiming the "laws and plans" by which United Methodists govern themselves and pastors govern their congregations. The

General Conference meets every four years to amend and add components to the *Discipline*, and they acknowledge that it is not an infallible document; rather, it is the most current reflection and guide on how United Methodists should live their lives and states what is expected of the clergy and laity. Brian O Sigmon's *The Book of Resolutions of the United Methodist Church* (2016) is a more informal, reference document that United Methodists can use for "spiritual guidance," and it states the Church's official stances on social policies affecting their members in everyday life.

As I will emphasize in my work, the Christian ethics of care can be practiced and utilized not just by Christians, but also by anyone, regardless of their religious beliefs, spirituality, anti-religion stance, etc. It can also be applied to any client/patient, not just in a professional and health care clinical setting, but also in daily life by any pastoral/spiritual caregiver. As I will argue later, we live in a pluralistic world, and interfaith dialogue played an important part in helping to shape my ideas on how we all, no matter how strongly we cling to our religious faith, doctrines, and beliefs, share the common capacity to simply extend love, caring, and support to those who need it the most. I relied heavily on three works that allowed me to embrace religious pluralism, while still holding true to my Christian religious ideals.

The first of these works is Huston Smith's *The World's Religions*. In his book, Smith provides his readers with a general overview of the world's major religions, delves into the history of each one, and discusses how the adherents view the world, and one another, through the coherent theological world view that each faith tradition instills in its believers. His chapter entitled "Christianity" was a valuable resource for my dissertation because Smith not only describes the basic doctrinal beliefs and practices of Christianity, but also includes a very detailed summary of the three great branches of the Christian Church (Roman Catholicism, Eastern Orthodoxy, and Protestantism). Although most Christians view Jesus as a Divine figure,