FINDING GOD IN ILLNESS

Beth R. Crisp

MUST ADMIT THAT 'finding God in all things' was not the phrase on my mind when I awoke on the first morning of an eight-day retreat realising that I was sufficiently ill to require medical attention. However I do remember, later that morning, pondering the notion that undergoing various medical tests, including an ECG, had not been mentioned in any of the texts I had ever read about Day One of the retreat experience. I have subsequently learnt of retreats for people with chronic illnesses, and have even been told stories of deaths occuring during retreats, but my own experience of becoming seriously ill while on retreat was seemingly rare, if indeed it ever happened. But whether or not people become ill while on retreat, a corollary of increasing lifespans in recent decades is that many of us will face episodes of serious illness at some stage in our lives. In addition to the tasks of getting better or learning to live with illness, the maintenance of faith may demand that Christians attend to the question of where God is for them in times of illness.

Becoming Ill

When I became ill, my retreat director encouraged me to rest in the hope that I would regain enough strength to drive the 850 km home by the end of the week. At this stage there was no reason to think that my illness was anything but a short-term problem from which I would recover in a few days. Besides, I was not up to doing much more than resting. Nevertheless, I was grateful to be given explicit permission to forget about spending my time praying and just to get the rest I needed. Around this time, I faced the fact that I had been inculcated with the belief that the 'good retreatant' did her four hours of prayer a day, in

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addition to going to mass and any other communal prayers. I had to learn that I could find God and, even more, that God could find me, in the semi-conscious resting state which characterized much of my day. This was certainly not one of the ways in which I thought I would be deepening my faith when, completely well, I had departed from home just a couple of days earlier. In a very powerful way I was being confronted with the truth that,

Spiritual experiences are relational, in the widest sense. They create a bond with God. We learn to listen. We are truly familiar with only one side of the relationship: our own. But spirituality is a bond with God. Spiritual experiences may be extraordinary or quite mundane in form

Becoming ill is often accompanied by disappointment, which emerges with the realisation that certain expectations are not going to be fulfilled. In my case, one of the first disappointments was the discovery that I was too ill to spend the days that I had put aside for contemplative prayer as I had intended. Was this disappointment just a case of the evil spirits having a field day? That is certainly one possibility, but what I would like to believe is that I was as disappointed as I would have been after waiting expectantly for months to spend some time with any dear friend, though the friend in this particular case was God.

But there were still plenty of ways for the evil spirits to make their presence known. This time I had become ill when I was a (very long) day's drive from home, in a community who were able to care for me, but what about the future? I regularly travel, often far from home and by myself, and I could sense fears emerging as to whether there would be people who could look after me if I were to become this sick on some of the trips I had planned over the subsequent year.

However, these fears did not last and, even in the midst of illness, I could sense that good things were happening for me and that God was right there. I have often found it difficult to let people love and care for me: one conversation about this occured less than a month before I became ill. And at a time when I was so ill that any concentrated prayer

Monika Renz, 'The Experience of God in Suffering and Dying', The Way, 46/2 (April 2007), 59–74, here 63.



was impossible, I came to the stark realisation that good things were happening, in that I was allowing people I did not know well to care for me and accepting their love and care. Although I was having trouble standing, let alone walking, part of me was making giant steps.

Diagnosis

While there was no disputing I was ill, speculation as to the cause varied widely over the first few days. Did I have an infection or virus which would clear up in time? Had I had an anxiety attack? Feeling no better than on my initial presentation to a medical practitioner, on my next visit I was lucky enough to encounter a doctor who guessed my condition and was able to arrange blood tests and get the results sent to my own doctor at home in Melbourne, Australia. Within a few days, it would be confirmed that I did in fact have Graves Disease, an auto-immune disease caused by an overactive thyroid. Although for many people this condition does not result in their becoming seriously ill, my experience has been different.

Not being sure what is wrong can stimulate numerous rational and irrational fears, but knowing what is wrong is also far from easy. In my case, as I had previously suffered from this disease more than a decade and a half before, I knew that I would eventually resume a state of full health. At one level I was thankful that, despite some of my symptoms being shared with much more persistent conditions, my prognosis was infinitely better. However I also expected that the coming months would bring struggles that I would have preferred not to deal with. Although high doses of medication would see my thyroid resuming normal levels of regulation within two to three months, my previous memories were of it being a year or so before I *felt* fully well. Also, the medication has some potentially unpleasant side-effects, and I could expect to be on at least a low dosage for a year or more. Around this time there is a note scribbled in my journal: 'Dear God, Why me? Why now?'

Being Ill

In a very short period of time, I had gone from leading an active life, on a career trajectory that was 'onwards and upwards', to a condition in which the daily process of getting up and dressed felt like a major project. I was constantly exhausted and my mind felt foggy and lacking in clarity, with the result that prayer had become not much more than a word or two at most. Some months later I recalled this experience when I read the words '... when they are suffering in hospital, even people who are skilled in meditation cannot carry on meditating'.²

At the height of the illness, having difficulty walking, I found myself reflecting on how this was something I once had to learn how to do, and that each day, as my health improved, it seemed as if I was undertaking a refresher course in walking. Similarly, I had some sense of feeling as though I needed to relearn how to pray, or at least how to pray in these new circumstances, in a debilitated body.

Around this time I was given a book of prayers and reflections by Michael Hansen, a Jesuit who suffers from chronic fatigue syndrome.³ Many of the thoughts in this book resonated with my own unarticulated feelings. For example, in one of his reflections Hansen has written:

I cannot accept that I am sick in this way. I cannot go back to where I was—my body won't take me there. I cannot go forward. This half-way place, this barren place of the spirit has paralysed me. My hard-won life's wisdom is useless.

I do not know what to do. I have no more prayers, no more words. My mind is black frustration.⁴

Elsewhere Hansen offers a prayer which begins:

Lord, help me to accept the limitations of my life now. Help me to accept the reality of my illness

When I feel angry and frustrated give me the grace to feel the strength of these feelings and then let them go. Help me to see that my feelings of anger and fear are signs of life.⁵

² Renz, 'The Experience of God', 64.

Michael Hansen, The Land of Walking Trees: Meditations for the Seriously Ill (North Blackburn, Victoria: CollinsDove, 1993).

⁴ Hansen, The Land of Walking Trees, 27.

⁵ Hansen, The Land of Walking Trees, 81.

Although they are designed to be read in numerous short bursts, I went through Hansen's prayers in an afternoon. Notwithstanding the substantial differences between my illness and Hansen's, finding words which expressed how I was feeling was enormously liberating and, within a day or so, words started to appear once more in my own prayers.

At some point in an illness a common response of survivors is to want to take control and fight the condition by whatever means available. Family, friends and God may all be summoned as potential allies in the fight against the illness, not just by Christians but by people of many religious persuasions. In my case, I became clear that I wanted to take control of my condition rather than let it manage me, however irrational this might seem in hindsight. One day I found myself praying

Dear Jesus

I have a battle to fight this illness and I need you as part of my team—urging me on, pulling me forward, cheering for me when the going is tough.

For several years, I have struggled with the fact that my circle of friends is more of a diaspora than a concentrated community. But, through e-mail, I went about enlisting the support of my friends, strewn as they are around the globe. They responded by telling me how they were 'saddened' and 'shocked' to hear of my news. Around this time I attended compline one evening and we sang the hymn 'The day you gave us, Lord, is ended'. I was particularly struck by the verse:

Across each continent and island As dawn leads on another day, The voice of prayer is never silent, nor dies the strain of praise away.⁸

The voice of prayer never being silent was indeed my experience at the time. Both individual friends and the worshipping communities of

⁶ P. McGragh, 'Reflections on Serious Illness as Spiritual Journey by Survivors of Haematological Malignancies', European Journal of Cancer Care, 13 (2004), 227–237, here 231.

⁷ Huey-Ming Tzeng and Chang-Yi Yin, 'Learning to Respect a Patient's Spiritual Needs Concerning an Unknown Infectious Disease', *Nursing Ethics*, 13 (2006), 17–28, here 24–25.

⁸ Words by John Ellerton as found in Together in Song: Australian Hymn Book II (East Melbourne: HarperCollinsReligious, 1999).

which they were a part had offered prayers for me in a number of different time-zones, which was very touching.

Throughout this time, God was finding me in the reality of an unexpected illness. I realised later that, for years, one of the great unspoken fears I carried with me was that my friends would not be there to support me when I needed them. The 'God of Surprises'," to quote the title of a well-known book in Ignatian circles, did not disappoint and my long-held fear was conquered. So once again, much to my surprise, I had found God in the midst of illness.

Slow Improvements

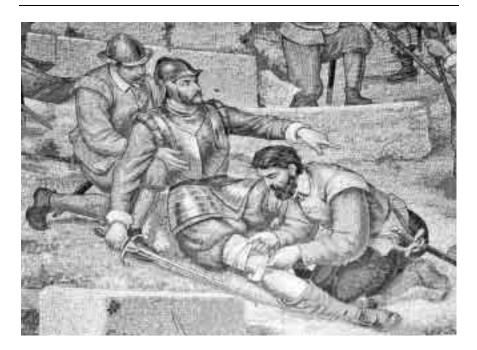
Unlike becoming ill, which seemed to happen overnight, becoming well was a much slower process. Every few days I would feel somewhat better and give thanks for small improvements. As the weeks went by, I gained more of an understanding as to how sick I had actually been, which helped me to understand why it felt as though I was taking so long to get well enough to resume most of my normal activities. Something useful I was told at this time was that, in the Constitutions of the Society of Jesus, Ignatius decreed that Jesuits who were ill should abide by their doctor's orders rather than carry on regardless with their usual regime:

Great care should be taken of the sick. Their illness should be reported to the infirmarian, and if he judges it to be of moment he should inform the superior and a physician should be called Furthermore, his order should be followed, as far as possible, in regard to the regimen and medicines, without the sick man intruding himself in anything other than in exercising his patience and obedience, by leaving the care of everything else to the superior and his ministers, by means of whom Divine Providence directs him.¹⁰

Ignatius knew something of illness himself, so he knew what he was talking about, and his advice is just as applicable to the rest of us when we are impatient with illness. I am not sure if it was providence, coincidence, or just the fact that medication can take a while to take effect, but the day when I first began to feel immeasurably better, a week

 $^{^9}$ Gerard W. Hughes, God of Surprises, new revised edition (London: Darton, Longman and Todd, 1996).

¹⁰ Constitutions III. 2. G. [304].



St Ignatius wounded at Pamplona

or so after being told of Ignatius' advice, was the Feast of St Ignatius. In response to my e-mail sharing this good news with an overseas friend came the message, 'It's great to be able to share such an important day with you especially knowing that your health is looking up. We'll keep praying for you!' As it would be several more weeks before I could resume a normal level of activities, a delay which was becoming increasingly frustrating, the promise of continued prayers was a great encouragement.

As my health improved and I re-engaged with life beyond the domestic sphere, this was reflected in the focus of my prayers. I realised that, although my physical capabilities were still somewhat limited, one thing I could do was to pray for those I knew in their active pursuits for God's kingdom. The thought of being able to do something special for my friends—to pray for them—brought me much consolation.

Eventually there was a breakthrough and I had a day when I felt better than I had done for many months. Although I was still in treatment, and I knew that there would still be ups and downs to come, it was impossible not to feel thankful as I enjoyed the delicious feeling of having newly and unexpectedly fallen in love with life again. A spark

within, which had almost been extinguished, was now flaming with a joyful passion for living.

A consequence of feeling better was that I was able to increase my level of activity substantially and almost to forget that I was still recovering from a serious illness. However I would often overdo things, and would end up in a state of exhaustion, disappointed that I was not as well as I had wanted to believe. It was difficult to keep praying for recovery while feeling such disappointment, and instead I prayed that I should not become too discouraged. At one point my journal records,

> I know such times will pass and are perhaps not unexpected after a time of illness, but ... I am glad that my knowledge of God doesn't rely on whether or not I sense God's presence in the midst of the day to day struggles.

Nevertheless, I was grateful that there were a number of people who provided reassurance and encouragement at these times when I was not really ill but not really well either.

Wise counsel was not always immediately welcome, even though in retrospect I would often come to appreciate it. After a few months I began thinking about the possibility of doing another silent retreat, but the question kept arising as to whether I was well enough. While there are never any ironclad guarantees of good health, it was suggested that embarking on a retreat when my health seemed quite unstable would not be a good idea. As a consequence of my illness, I had been leading a very quiet life for some months, and rather than retreating from interactions with others, it was important to mark my ongoing recovery by re-emerging into the social world for a while. Also, my experience was that retreats could be mentally demanding even when I was ostensibly well. Furthermore, if I were to persist in a retreat in a week when I was not well, there was potential for negative longer-term consequences for my spiritual life. Rather than feeling inadequate or guilty for the things that I could not do, it became clear that I needed to adjust my expectations in general, including those concerned with my spiritual life, to realistic levels at this point.¹¹

As the months went by and I battled the ups and downs of illhealth, I started to question whether what I was experiencing was the

¹¹ Renz, 'The Experience of God', 62.

original disease, another unrelated and as yet undiagnosed condition, or consequences of the medication I was on. Like many people who have a serious illness, I found that medication could vary between seeming like a blessing and a burden. Too little medication and I was at risk of symptoms re-emerging, but too much led to other difficulties. Furthermore, while the dosage could be problematic, the medication was known anyway to have side-effects which for some patients could be a further trial to endure.

At a time when I felt quite unsure about my own medication and about whether God was with me in the midst of this situation, I read with interest the story of a woman with a mental illness who had chosen not to take her medication because she believed that it was 'evil and could be poisoned'. Her case worker, who had observed that, whatever else was going wrong in this woman's life, she went to church daily, asked if she would be willing to take her medication if a priest first blessed it. Once her medication was blessed, the woman became compliant with the treatment regime she had been prescribed. Having my medication blessed is not something I could imagine wanting for myself, and for many people it might not be a good thing, but in a new way this story challenged my thinking about where God was in my illness and its treatment, and for that I could be grateful.

Remission

St Francis Xavier went to many unfamiliar places in his travels through Asia. At a similar age to Xavier's when he died, my experience of a serious bout of illness has also involved a journey into unknown places, although my prognosis has been much better than his. Apart from regular monitoring and maintaining a low dose of medication, within a few months life returned to normal, with no outward signs as to how ill I had been. If anything, much enforced rest meant that I now felt better than I had done for a long time, and the general view of those around me was that I looked very well. However, like many people who have experienced a health scare, the impact on me was substantial. In particular, it forced me to focus on what is important in life, ¹³ which for

 ¹² Charles A. Rapp and Richard J. Goscha, The Strengths Model: Case Management with People with Psychiatric Difficulties, second edition (New York: Oxford UP, 2006), 156.
¹³ McGragh, 'Reflections on Serious Illness', 233.



me is my relationships with God and with my friends. Ultimately, many of my relationships, including my relationship with God, were strengthened by my illness, but I know that illness can have the opposite effect.

Seemingly glowing health, while it is much appreciated, can readily mask the reality that my illness will undoubtedly return. I was lucky enough to enjoy more than a decade and a half between the first two episodes and, while I hope to enjoy another lengthy remission, I have to accept that in all likelihood I will experience further periods of debilitation. In the meantime, I pray that the many wonderful lessons learnt during my period of illness will remain with me, both in times of health and sickness.

I have sought to explore here some of the spiritual implications of an episode of serious illness. While such implications are well established for individuals who have a life-threatening condition, have to come to terms with ongoing disablement or have an illness so severe

¹⁴ See McGragh, 'Reflections on Serious Illness'.

¹⁵ Emily K. Schulz, 'The Meaning of Spirituality for Individuals with Disabilities', *Disability and Rehabilitation*, 27 (2005), 1283–1295.

that they have a period of hospitalisation, ¹⁶ the spiritual implications of less severe but nevertheless serious illnesses often go unacknowledged.

Health-care providers are increasingly being encouraged to recognise the spiritual impact of serious illness, and the promotion of spiritual well-being tends to be seen as a strategy or mechanism for 'coping' both for patients¹⁷ and for service providers. ¹⁸ Although I have no doubt that a rich spirituality was a great resource in dealing with my illness, to confine spirituality to being a resource fails truly to recognise the spiritual issues which emerge in the context of illness. For me these ranged from existential questions, as I sought to understand what was happening to me and where God was in this unexpected mess known as illness, to practical issues such as needing to find a way of praying which was compatible with the limitations I was enduring.

Undoubtedly being on an Ignatian retreat at the time I became ill gave me the stimulus to make connections between my illness and its effects on my spirituality, as did a subsequent invitation from the then editor of *The Way* to write this paper. Nevertheless, as I have attempted to show, there were spiritual implications at all stages of my illness. This contrasts sharply with one article I have read which suggests that coping with illness is a three-part process—coming to terms with illness, struggling to gain control, and assessing meaning in life—with only the last of these relating to spirituality. More plausible, but for me still debatable, is the claim that '... the full significance of the illness spiritual journey is not appreciated or realised until well past the treatment phase'. ²⁰

My final concern is not to romanticise the impact of illness on the development of spirituality. Like many people who survive a serious illness, I would prefer to have the growth which occurred as a result of my illness to have come about in some other way.²¹ Illness is not

¹⁶ Harold G. Koenig, Linda K. George and Patricia Titus, 'Religion, Spirituality and Health in Medically III Hospitalized Older Patients', *Journal of the American Geriatrics Society*, 52 (2004), 554–562.

¹⁷ Wendy Greenstreet, 'From Spirituality to Coping Strategy: Making Sense of Chronic Illness', *British Journal of Nursing*, 15 (2006), 938–942.

¹⁸ Jacinta Kelly, 'Spirituality as a Coping Mechanism', *Dimensions of Critical Care Nursing*, 23 (2004), 162–168.

¹⁹ Ming-Shium Tu, 'Illness: An Opportunity for Spiritual Growth', *Journal of Alternative and Complementary Medicine*, 12 (2006), 1029–1033.

McGragh, 'Reflections on Serious Illness', 234.

²¹ McGragh, 'Reflections on Serious Illness', 235.

something which should be wished upon anyone. For those who ultimately can find something positive emerging from the experience, this may come after,

... considerable times of cynicism and doubt. Excessive and unrelieved pain, distressing physical symptoms and being asked to endure unacceptably aggressive and invasive treatment interventions²²

After enduring such experiences, it seems almost miraculous to think that some people manage to find God in illness.

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²² McGragh, 'Reflections on Serious Illness', 236.