

The Emergent Soul

the Rev. Edmund Robinson

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The poet Mary Oliver asks, is the soul solid, like iron, or tender and breakable like a moth? The poet Erica Funkhouser asks whether it is unnatural to conceive of the soul as something egg and sperm could never make. These questions may seem very poetic and abstract. Indeed, much of the whole discussion of science and religion may seem terribly abstract. Until, that is, the day arrives when you have to confront a question like terminating life support for someone you love. Or dealing with that person dying by more natural processes. Or watching a personality slowly change as a disease takes hold. Or having to decide or help someone else decide whether to end a pregnancy.

Suddenly the questions of what is life and who has a soul are no longer abstract, but they are terrifyingly present, and they are so huge that you simply can't get a handle on them. Your mixture of love and guilt and despair can overwhelm your ability to think fruitfully about them.

Have you ever noticed how much common ground we share with Roman Catholics on social issues? Many Roman Catholics will, like many UUs, oppose the death penalty, try to narrow the gap between rich and poor, seek peaceful solutions to conflict, and try to protect the environment. Where Roman Catholics and UUs will often differ are on the end-of life issues like euthanasia and assisted suicide, and on abortion.

There are many reasons why this might be so, but I don't think it's because UUs value life any less highly than our Catholic neighbors. I think UUs ask different ethical questions than the Roman Catholic tradition. My Catholic friends and acquaintances often cite the sanctity of life, and the base their stand on abortion on the question of when life begins. We UUs, by contrast, have as our first principle the affirmation of the inherent worth and dignity of every "person." So our ethical obligation doesn't turn on whether it is human life, but on whether it is a human person we're dealing with.

What is a person? Two years ago, I audited a wonderful class at Harvard Divinity School, taught by a philosopher of science named Phil Clayton, who suggested there were three approaches to this question, which we might call the *imago dei*, the gradualist and the social constructivist.

In Genesis, on day seven, God creates humans in his own image. Biblical anthropology is grounded in that passage: humans were created in the image of God. This has some strong implications for us. God is usually depicted as eternal and unchanging. To say that humans are created in God's image is to say that being a human person is something you either are or aren't, like a light switch that has only two positions, on and off. This has been the Roman Catholic view: the spiritual soul of every person is "immediately created" by God. Pope John Paul's encyclical letter *Donum Vitae* opens with the words "The gift of life which God the creator and Father has entrusted to man, calls him to appreciate the inestimable value of what he has been given, and to take responsibility for it." The human body "cannot be considered as a mere complex of tissues, organs and functions," for it "exists in substantial union with a spiritual soul." He adds in *Gaudium et spes* "though made of body and soul, man is one".

This is the traditional top-down conception of the person. Think of Michelangelo's

famous painting on the Sistine Chapel ceiling – God reaches out to a listless Adam and imbues him with soul. This top-down view of what is a person can be contrasted with two others: the gradualist view and the social constructivist view.

The gradualist view says that becoming a living person and ceasing to be a living person are processes that extend over time. In this view, brain science can describe what is happening with the various neurological systems, how they are created during the fetal development, and how they shut down at the end of life. Science does not undertake to tell us at what point personhood is created or disappears, and the gradualist approach takes the framework provided by science and tries to mold answers that make sense in terms of the story science tells.

The third approach, social construction, says that the definition of who is a person and when a person comes into being and ceases being is always a matter of social agreement, there is no objective scientific view that is valid for all occasions and cases. It is social, cultural, and ethical values which determine personhood.

Science, as I said, doesn't recognize a soul. It doesn't undertake to tell us what a person is. The closest science comes is the concept of consciousness.

And consciousness, from a scientific perspective, is an emergent property of the brain. What do I mean by that? Emergence, a concept very central in the present dialogue between religion and science, is the idea that a system of anything has properties that are greater than the sum of its parts. A good example is an ant colony: individual ants are very stupid; an ant colony exhibits a kind of collective intelligence. And you can think of the neurons on your brain as like the individual ants. Theologians can speak of the subjective sense, the sense of me in here, as generated by a soul and yet when they try to describe it or define it, it is elusive. From a naturalistic perspective, the sense of me is an emergent property of the actions of my neurons over time. For a long time, brain science did not speak to ethical issues at all. It first had an influence on the question of the definition of personhood in 1968. Prior to that time, medicine said death was the irreversible stopping of breathing and heartbeat. But in 1968, a committee at Harvard Medical School recommended adding another factor in the definition of death, the concept of brain death. This idea has now been passed into law every state and several foreign countries; the law says a person is dead if he or she has either an irreversible cessation of breathing or heartbeat or "irreversible cessation of all functions of the entire brain, including the brain stem." In other words brain death is added to heartbeat death and breathing death. But note that this definition requires the whole brain to cease functioning. What happens when the brainstem, the autonomic parts, keep functioning, but the cerebral cortex, the seat of memory and consciousness and reasoning, are gone? Then you have a body that still lives after the person is dead, the twilight condition known as persistent vegetative state.

I want to tell you about a man in my former congregation in Staten Island whom I will call Bob; he was a creative vibrant man in his late forties, a talented storyteller, actor and director who made his living as an arts administrator. His wife, whom I will call Dorothy, was also a talented artist, who made her living in cultural administration, and they had a daughter, age eight, and a son, age twelve. They had been friends of the church for years, but just formally joined shortly before I arrived.

Dorothy had been trying for years to get Bob to take better care of himself: he was overweight and didn't get enough exercise and ate all the wrong foods and had high blood pressure. She finally convinced him to go to a doctor, who prescribed blood thinners, and

medicines to lower cholesterol and blood pressure. At the time he got these prescriptions, Bob was up to his eyeballs directing a community children's Christmas play, and he put the prescriptions on the refrigerator with magnets to remind himself that he needed to get them filled when he could find the time. The play was a great success, he stepped in for a cast member who had had to drop out and Bob stole the show as the villain. Then two days after New Years, he collapsed in his driveway as he was about to drive his daughter to school. He had had a stroke.

There followed eight months of hospitals and nursing homes. Bob was in a persistent vegetative state. He was not completely nonreactive: he would open his eyes and if I was standing on his right, he would look vaguely in my direction. If I got up right in his face and said "Hi Bob," he would sometimes reward me with a slight curl of his lip. He could squeeze my hand in his left hand. When I played music for him, sometimes I would feel that he heard it and appreciated it.

The stroke had severely impacted Bob's hypothalamus; for a while, the nursing staff had trouble controlling his blood sugar and blood pressure, and he was on a respirator for several months. After that, his physical symptoms stabilized. The hope was that once his brain could regulate his body, his higher functions would come back. But after seven months, doctors offered very little hope that there would be any recovery of discernible cognitive functions. After the stroke, he never gave any indication of having an inner mental life.

Was Bob a person? He wasn't the person he had been, but was he a person in any sense? From the point of view of *imago dei*, the answer would have to be yes. He was still a child of God. He looked much the same as he had before the stroke – you could prop him up and take a picture and it would look somewhat like he did in the old days.

Yet from a gradualist point of view there is significant doubt that he was still a person. The same questions that Hamlet asks of Yorick's skull could be asked of him - where are your stories now, where are your jests?

For the sake of argument we can postulate that Bob had sensory feelings; he seemed to react slightly to pain, and thus we may infer that he took pleasure in simply being in a comfortable bed with light and colors and sound. Perhaps he was dimly aware of the difference between day and night.

Against these possible human attributes we weigh the huge losses. He showed no recognition of his family members. He seemed to have no memory or consciousness of past present or future. He had no discernible will and did not act beyond the autonomic motions of his body. He was fed, hydrated and drained entirely through tubes.

Science can't tell us whether Bob was still a person, but it can tell us that he was far down the path from what he was. In light of cases like Terry Schiavo's, some thinkers are now proposing that the concept of brain death be modified. The present definition of brain death involves the cessation of all brain functions; this is referred to as whole-brain death. What some people say is needed is a concept of higher-brain death, which would say that you would consider someone dead when higher-brain functions such as memory and speech and recognition have gone even though the brainstem may still be functioning.

What about the social constructivist approach? Officially, of course, Bob was still what society defines as a human being. He had a social security number and driver's license, and was receiving disability payments.

But what about the in-person interactions? Evolution has given us all a sense of the presence, the personhood of other people. We are who we are not in isolation and not in some abstract sense, but in relationship to others. Some of our most basic instincts are to recognize that we are dealing with another person and to identify who that other person is. So when Terry Schiavo's father said that he felt her present, we can all understand the feeling.

In the first few weeks after Bob had his stroke, I and other visitors tried to talk to him in the second person. Since this did not meet with any response, it became more and more difficult. Playing music for him might feel like an intimate performance, or it might feel like a solo practice. Everyone was affectionate towards him and most would hold his hand, and most of us did continue to talk directly to him, but most of us I think had the sense I have, which is that, in Gertrude Stein's words, there is no there there. The person we knew and loved did not seem present with us in that nursing home.

By this time you may be wondering what the context is for this question of Bob's personhood. For it would be one thing if it were simply an abstract exercise. But it was not. Dorothy had sought my help and counsel: a decision had to be made on terminating life support, and I saw the question of Bob's personhood as intimately intertwined with the question of what to do about him.

And in that crucible of decision I realized that the gradualist approach doesn't really give us any better answers on whether to discontinue life support than does the *imago dei*. *Imago dei* would say, keep him alive at all costs and no matter how slim the odds of cognitive recovery, he still has his immortal soul. That was not a very satisfactory answer either. And a key factor making it unsatisfactory was Bob's own wishes.

Bob had for years been a participant in the church men's group, a group of guys who got together on Monday night to drink beer and discuss whatever came up. The men's group happened to meet in the middle of the Terry Schiavo case, as the conservative politicians and religious leaders in this country were falling all over themselves to thwart the will of the courts and interfere in a most private family struggle. The members of the group discussed what they would want to be done with them if they ended up like Terry Schiavo. Of the five or six men present that night, Bob was the most adamant that he would not want to be kept alive in a vegetative state.

He didn't just rest with expressing his opinion in the men's group. He also formally signed a Health Care proxy, giving his wife Dorothy the power to decide his health care in the event he was incapacitated from going so. The proxy specifically stated that if he were ever in a vegetative state with no substantial prospects for recovery, she was authorized to refuse heroic measures to save his life and to withdraw life support systems, including artificial respiration, nutrition and hydration. It was as strong a health care proxy as it was possible to execute.

Now I said that we had three approaches to what is a person: the immortal soul in the image of God or *imago dei*, the gradualist and the social constructive.

What we haven't taken into account yet is that, whatever approach is taken of what a person is must take into account two aspects of personhood, the inside and the outside, or, put another way, the person as subject and the person as object. As subjects, we feel that we have a will, and we act. These attributes we might call agency – persons act and are thus agents.

But if we consider Bob as an agent, we realize that he has declared himself for the social constructive approach. All we need to do is grant him the authority, while he is still in his right

mind, of refusing treatment to prolong his life, and then allow him to envision a future state in which he would not be able to make such a choice and to declare his wishes.

And it is the unimpeachable and formal declaration of Bob's own wishes that allowed Dorothy to move forward confidently to terminate life support as the medical opinion indicated that the prospects for Bob's recovery of cognitive function are remote. And it allowed her minister to support her in this endeavor. She or I may have made a different choice if it were up to us. But the highest love we could give to Bob is to yield to his wishes.

Interestingly, we had a clash of approaches with the Roman Catholic nursing home in which Bob was housed. They were willing to withdraw the respirator and did. Bob's friends gathered in his room, expecting death to be imminent/ But, against the medical predictions, Bob was able to breathe on his own. So we asked them to withdraw food and hydration. The nursing home was initially agreeable to doing this, but then they changed their minds after discovering that Pope Benedict, in response to a question from American Catholic Bishops, had issued a specific directive in September of 2007 saying that nutrition and hydration should not be withdrawn from comatose patients except in extraordinary circumstances.

So here was a clash of approaches in action. Reasoning from *imago dei*, the Pope had arrived at a blanket rule. Bob and his family were not Roman Catholics, but as long as he was being cared for at a Roman Catholic institution, his life and death would be determined by Catholic philosophy, as it should be. One cannot ask a religious institution to violate its own religious precepts. So in the end, Dorothy had to bring Bob home to die, which he did in early August.

As I have discussed this case, and Dorothy is very willing for me to discuss it publicly, several people mention to me that comatose patients sometimes make miraculous recoveries, wake up and start speaking years after their accidents or strokes. Those cases will always make the news, and so reports of them will be seen in the popular press with regularity. You can never completely eliminate the possibility of recovery. The medical opinion in Bob's case was that the chances of cognitive recovery were remote, and this was enough to indicate to Dorothy and to me that honoring Bob's clearly expressed wishes should be paramount.

It was not a decision that I reached lightly. I spent fourteen years of my life trying to keep a death row convict from being executed. The news reports are full of stories of doctors and therapists working oh so patiently with brain-damaged soldiers from the Iraq war. I do not take life cheaply. But I believe that a life belongs in the first instance to the person who lives it. I am not prepared to honor all suicidal wishes, but I am prepared ferociously to fight for the right to terminate life support in a severely impaired state, as a matter of honoring the freedom, the autonomy, of the individual.

Is there a soul, and if so, who has it? Maybe I'm no closer to the answer to that question than I was before I started speaking. But we may have answered a different question, because I think the lesson of Bob's case is that loving a person does not mean keeping him alive at all costs. Loving a person, whether that person is now present or absent, can mean letting that person go.

As Mary Oliver says,
To live in this world
you must be able
to do three things:

To love what is mortal;
to hold it
against your bones knowing
your own life depends on it;

And, when the time comes to let it go,
to let it go.
Amen.

Readings:

Some Questions You Might Ask” by Mary Oliver¹

Is the soul solid, like iron?
Or is it tender and breakable, like
the wings of a moth in the beak of the owl?
Who has it, and who doesn't?
I keep looking around me.
The face of the moose is as sad
as the face of Jesus.
The swan opens her white wings slowly.
In the fall, the black bear carries leaves into the darkness.
One question leads to another.
Does it have a shape? Like an iceberg?
Like the eye of a hummingbird?
Does it have one lung, like the snake and the scallop?
Why should I have it, and not the anteater
who loves her children?
Why should I have it, and not the camel?
Come to think of it, what about the maple trees?
What about the blue iris?
What about all the little stones, sitting alone in the moonlight?
What about roses, and lemons, and their shining leaves?
What about the grass?

“Aperture” by Erica Funkhouser²

Is soul the wanderer that scours the world
for proof of a superior location?
Or is this guest the town librarian
lashed to her loaded shelves, a dismal girl?

¹*House of Light*, Beacon Press, Boston (1990) Also: *New and Selected Poems* (1992), p. 65

² From “Earthly,” Houghton Mifflin 2008

And what if she's genetic – the family clown,
our agitated genie, a knot of pressure
in the bones that hastens toward exposure?
Will I know how to talk the time-bomb down?

I was conceived beside a western lake,
a sapphire aperture in spruce and fir.
Is it unnatural to conceive of her
as something egg and sperm could never make?

Light plucked from light, she chose me – hollow tree –
to cultivate invisibility.