

Living in the Extended "Third Chapter" of God's Story

We can think of the biblical story as being told in four chapters: (1) creation, (2) rebellion and sin, (3) redemption and (4) new creation. Actually chapters two and three overlap, and chapters three and four run parallel for a while. But eventually chapter four, the new creation, will be the full resolution of this age-long story. The rebellion and sin of the second chapter will be over, and the redemption of

²³Eliade, *The Sacred and the Profane*, pp. 111-12.

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chapter three will be completed. It is to this third chapter, where sin and rebellion, redemption and the beginnings of the new creation are being played out all together, that we now turn—the extended and complex third chapter.

The church as Christ's body on earth keeps and tells the story. Those who respond to Christ's call are his disciples. He told his followers, "You did not choose me but I chose you. And I appointed you to go and bear fruit, fruit that will last" (Jn 15:16). Practical actions of care are "bearing fruit." They are signs of our faith in the end of the story. John, the writer of the book of Revelation, heard these words from heaven: "Death will be no more; mourning and crying and pain will be no more" (Rev 21:4). The sure hope that one day God himself will heal creation has inspired Christians through the ages to work in hope. Christian nurses are

Chapters in the Biblical Story

- Creation
- Rebellion and sin
- Redemption
- New creation

participants in God's story.

Today, as nurses take up our roles in God's story, Jesus is still with us (Mt 28:20). After his ascension he poured out his Spirit, enabling his followers to bear witness to him by word and deed. Peter explained to an amazed crowd at the first Pentecost, "This Jesus God raised up, and of that all of us are witnesses. Being therefore exalted at the right hand of God, and having received from the Father the promise of the Holy Spirit, he has poured out this that you both see and hear" (Acts 2:32-33). After healing a crippled man a few days later, Peter explained to puzzled religious leaders that it was the name of Jesus that had healed the man (Acts 3:15-16).

The presence of Jesus enables Christian nurses to persevere in hope in very difficult circumstances. His Spirit guides us as we respond to him. It was the Spirit of Jesus who urged Elaine to talk to Mary Ann in the opening story. Elaine could not assure Mary Ann that her husband would return. She was not even certain how her own marriage would work out. Elaine offered the hope of God's presence instead.

We might ask, "So what good is believing God's story if we may not get what we desperately need or want?" People sometimes answer this question by glibly saying that everything works out for the best in the end. But these words are not true. Awful things usually lead to awful results. For example, abused children often become abusers themselves.

What then is a better response? The apostle Paul wrote to Christians suffering for their faith, "We know that all things work together for good for those who

love God, who are called according to his purpose" (Rom 8:28). These words, often spoken as bland and useless assurance, are addressed to lovers of God, members of his kingdom. The promised good is God's long-term purpose and not necessarily our immediate desires. The goal of God's story is creating a new humanity, new people who love him. God is working in his people, making them like Jesus Christ (Rom 8:29). So the good that God brings out of bad things comes when he uses them to make us like Jesus. That may take a long time. Jesus said our first goal in life should be to seek the kingdom of God and his righteousness (Mt 6:33). What we should fear most is losing our souls, not our lives (Mt 10:28).

But God is not concerned only with his long-term goal for us. He suffers with those who have chronic pain. He grieves with the mother whose child is dying. He desires the wonderful processes that heal our bodies so they function. Jesus said, "Are not two sparrows sold for a penny? Yet not one of them will fall to the ground apart from your Father. And even the hairs of your head are all counted. So do not be afraid; you are of more value than many sparrows" (Mt 10:29-30).

What Elaine can promise Mary Ann is that nothing can separate her from the love of God, not even the breakup of her marriage. Nothing that happens must cause us to lose our souls. Nothing can make Jesus turn away from us. His loving presence is constant (Rom 8:39).

Christians have found hope in this assurance through the centuries. This is the hope that will sustain nurses in the changing health care system. This is the hope that we can offer our patients when all other hopes are lost.

Hopeful Living in Hard Times

When Jesus' disciples asked him about the future, he told them that the dates and times of future events were not for them to know. They were to simply get on with the tasks at hand, trusting God for direction and empowerment. They

were to be witnesses for Jesus wherever they lived and worked (Acts 1:6-8). Jesus himself modeled this almost casual attitude toward life. He did not schedule his activities as modern people do. He went from place to place seemingly without preplanning. He was open to the interruptions of individuals along the way—people like blind beggars, untouchable lepers, mothers wanting their children to be blessed.

Yet there was a consistency to his life that reflected his mission. He left one place after healing many when still more were gathering to see him. "Let us go on to the neighboring towns, so that I may proclaim the message there also; for that is what I came out to do" (Mk 1:38). He did speak often of going to Jeru-

salem and predicted that he would be captured, executed and then vindicated. Jesus possessed an inner coordination and purpose that directed his life. He was not driven to achieve a goal, yet he moved steadfastly toward what he knew the Father had in store for him. The unity of his life sprang from his understanding of the way in which God carries out his purposes.

Living in God's true story, learning how he works out his purposes, trusting when we can't see him working: these all enable nurses to live in hope. We want to bear this hope to patients and colleagues (Eph 1:20-23). We do not need to merely "hope in hope." We know the God of hope who fills us with peace and joy in believing, so that we may abound in hope by the power of the Holy Spirit (Rom 15:13).

Phyllis Karns is one such bearer of hope. She tells the story of Joanne, a thirty-five-year-old woman with a terminal illness. Joanne's greatest concern was for the care of her children after her death.

Phyllis showed her two instances in the Bible where mothers gave their children over to the care of others in less than ideal situations. One was Hannah, mother of the prophet Samuel, who allowed him to be raised in the household of a corrupted priesthood (1 Sam 1:24-28). The other was Moses' mother, Jocebed, who relinquished her son to be raised by a heathen princess in a climate of wealth, power and pagan religion (Ex 2). Each of the mothers was willing to trust God to be faithful in overseeing the growth and development of her child and to accept that God truly loved and would take care of the child.

Phyllis prayed with the dying mother, who was able to trust Jesus as Lord of the future for her children as well as for her own life after her death.²⁴

Story as a Way of Knowing

We have focused thus far on living in God's story as the only way to find the hope so important in nursing. But story is also a way of knowing, a way of discovering truth. Nurse educator Patricia Benner writes of the power of story for nursing as ethical practice.²⁵ Theologian Stanley Hauerwas argues that narrative is central to explain the truth of Christian life both for learning our identity and for learning moral truth.²⁶

Stories give content to moral words like love and justice, courage and tem-

perance. But how do we know when stories are true stories, not necessarily true in the sense that they actually happened but true in the sense that they tell us right things? For example, if we tell a story about "good" nursing care where a nurse refused a patient's request that would lead to her or his death, how can we know that it is truly good? Perhaps another nurse telling the story would label it bad care, saying that the patient's wishes should have been followed.

It is God's story that shows us the way. We continually test the smaller stories of our lives against his story. How do they fit within it? Do they continue to tell God's story, or do they belong to another story of sin and rebellion? The amazing thing is that God actually invites us to help tell his story by our lives.

God's story also teaches us who we are: historical beings dependent on God and others. We often introduce ourselves by telling the story of our lives. However, it is not only others who learn to know us by our stories; we learn to know ourselves. Many fearful nursing students have been amazed to discover that they actually knew more than they thought about patient care. Likewise, patients who trembled at the prospect of a painful treatment have come through amazed at their own strength. This is why telling stories to children and adults can be a powerful source of encouragement.

Because God is telling his story in our environment, we can have hope, we can know ourselves, and we can know moral truth. The key for nurses is to live within his story and to tell it to ourselves and each other over and over. To learn it well.