Ethical Currents:
An Aesthetic Response: Job, Suffering, and the Healing Power of Divine Beauty

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The Book of Job has long served as an invitation for reflection upon some of the deepest existential questions affecting the human heart, especially about the nature and purpose of human suffering, loss, and pain. According to Jewish literary scholar, George Steiner, Job’s unfolding demand for nothing less than a divine response to his plight intimates at least three categories of discourse with which most of us are likely familiar. First, says Steiner, “Job’s inquiry is ontological,” in the sense that Job “questions the being of Being,” levelling doubts about the goodness of reality itself.2 Second, Job’s inquiry is epistemological, as Job longs for deeper knowledge and insight, seeking to clear away the confusion about why his Creator would allow such calamities. Finally, says Steiner, the framework of Job’s questioning is explicitly theological, since Job is ultimately led to raise his complaint against God himself, the One who made him and brought him to being.

Yet, as Steiner observes, when the living God finally does appear in the book’s climax, God’s response to Job will have nothing to do with any of these all-too-human discursive categories. Instead, Steiner writes, “[God’s] reply is that of a Maître brandishing the catalogue raisonné of his œuvre. Its category is that of the aesthetic.”

My purpose in this essay is to explore this “aesthetic response” of God to Job in more detail, and to consider the practical relevance of “theological aesthetics” in the clinic today. God’s response to Job exhorts all of us, especially those engaged in medicine, to embrace a more capacious interpretation of the sufferer’s process of healing in which the spiritual senses should be expected to be as active as the bodily senses. Job’s experience suggests that perceptual encounters with Divine Beauty can be part and parcel of a profound transformation within the human creature, whereby a new relation to this worldly suffering is possible. In considering the practical implications of such a theology for medicine today, I will hardly conclude that health care providers are somehow directly responsible for inaugurating these kinds of spiritually transformative moments for their patients and families. Surely, though, there is more we can do to create the occasions for such transformation in our various centers of healing. I will offer a few suggestions in this regard before my conclusion.
JOB AND THE LIMITS OF REASON

By and large, previous attempts to read Job for the sake of informing clinical responses to suffering have focused on how clinicians specifically should approach the phenomenon of communicating with patients who are facing difficult diagnoses. Attention has often been drawn to Job’s conversations with his friends, who are said to supply several examples about what not to do in the course of clinical consultation — at least not if we hope to express genuine concern for the whole person before us.

For example, Fr. Joseph Tham recently turned to Job in an article aimed at carving out a space for spirituality and religious hope to be reintroduced to the contemporary, “secular” hospital setting. Tham highlights the discourse of Job’s three friends (Eliphaz, Bildad, and Zophar), and the friends’ collective failure to offer any meaningful insight to Job’s existential dilemma. In particular, Tham notes their tendency to avoid any direct contact with God, since they prefer instead to speak about God in the third person, but never invoke God directly. Only in the case of Elihu, the fourth and last speaker, do we find a willingness to exalt God paired with a more nuanced approach to questions about divine justice and Job’s suffering, such that, according to Tham, Elihu “plays a prophetic role of speaking on behalf of God, … preparing him for God’s subsequent theophany.” For Tham, Elihu succeeds where the others fail, and we are given to learn how spiritually-minded clinicians should use speech and language strategically, making space for a divine encounter similar to the experience of Job. Accordingly, when Tham turns to consider the crucial moment of encounter between God and Job, he again puts the spotlight on the communication dimension, this time discussing the effect of God’s own discourse with Job — the way in which God’s questions seem deliberately designed to procure Job’s “stupefaction.” Tham concludes that the point of God’s appearance is to cross-examine Job’s intellect and to humble his reason, chastening his attempt even to grasp at God’s purposes behind the scenes.

According to this overall reading, the Book of Job underscores how the reality of suffering utterly boggles the human capacity to reason one’s way through it. As Tham puts it, Job shows us how “suffering is a reality that is not questioned but affirmed. No answer is offered at the end of the book; God’s presence and omnipotence are sufficient.” Thus we do well, says Tham, to learn from Job: accept the limits of our own finitude, humble our reason, and embrace the mystery of suffering by welcoming God into it.

To be sure, these are important reminders, but there is arguably something missing from this predominantly logocentric exegesis, so concerned with the discursive aspects of our experience with suffering and our communication with sufferers. What seems to be missing is a deeper consideration of Job’s final transformation, which, recalling Steiner, has more to do with Job’s aesthetic, perceptual confrontation with God in creation than it does with the humiliation of reason per se. Job may indeed be seeking a divine response to his various levels of questions (i.e., the ontological, epistemological, and theological), but these latter forms of analysis are not what finally bring Job to that pivotal moment of metanoia. Rather, it is God’s “aesthetic response” that ushers Job into a new order of perception,
which is at the same a veridical experience of healing for Job, at least in the spiritual and existential sense. Having perceived a God made visible, Job’s own senses are transformed; he is given a new relation to his plight, precisely through being given a new relation to God. Before continuing in this direction more explicitly, though, I should explain what I mean by suggesting we read Job through this lens of “theological aesthetics.”

**JOB AND THE RHETORIC OF DIVINE BEAUTY**

In referring to theological aesthetics, I am appealing most directly to the work of twentieth-century Roman Catholic theologian, Hans Urs von Balthasar (d. 1988). Balthasar’s version of theological aesthetics represents a particular attempt to curb the effects of Kantian philosophy, which effectively solidified the broader Enlightenment tendency to separate our perceptual apprehension of reality as such — i.e., the knowledge gained by direct, sensory experience — from the conceptual knowledge of reason’s operations and our powers of reflection. Put differently, Kant’s philosophy erected an ostensible barrier between our perceptions of the natural world “out there” and our internal constructions of the same. Consequently, said Balthasar, the premodern sense for beauty — as an objective, ontological facet intrinsic to reality as such, the perception of which can rapture us in a participation with something truly transcendent — sadly collapsed in the modern period, becoming merely a function of one’s individual sense of “taste.”

Balthasar’s theology was largely concerned with remedying this situation by provoking contemporary people into a more comprehensive sense of beauty in this more transcendent dimension. He urged, for instance, that our capacity to perceive and respond to inner-worldly beauty is in fact an analogy of our capacity to perceive and respond to God’s own self-revelation. Missing out on such a crucial connection (between beauty and revelation), he opined, was spiritually fatal. As he puts it, “We can be sure, that whoever sneers at [Beauty’s] name as if she were the ornament of a bourgeois past — whether he admits it or not — can no longer pray and soon will no longer be able to love.” In another place he puts it this way, “An apparent enthusiasm for the beautiful is mere idle talk when divorced from the sense of the divine summons to change one’s life.”

More recently, Eastern Orthodox theologian David Bentley Hart has rearticulated these same ideas but contextualized them within our postmodern context. In his book, *The Beauty of the Infinite: The Aesthetics of Christian Truth*, he argues that, however forcefully postmodernity has sought to deconstruct the legitimacy of any and every truth claim, our ongoing appreciation for perceptible beauty in the world remains. (Just think of the last time you were truly arrested beyond words by the sight of a starlit sky, a vast mountain range, or a magnificent piece of artwork.) Such experience with a beauty beyond words serves as a theological defense against the suspicion that all rhetoric is inherently violent, or that “every discourse is reducible to a strategy of power.” Instead, beauty should remind us that not every
form of persuasion is inherently deceitful and self-serving; there is a form of rhetoric that is fundamentally grounded in an “ontology of peace.”

In short, with Balthasar, we should be able say that beauty does indeed confront and challenge us, sometimes radically so, to change our lives. On the other hand, with Hart, we are invited to appreciate that change as something ultimately performed within us by the very Source of beauty itself, calling us to a place of peace, even if, in many cases like Job’s, such peace awaits us only on the far side of much pain, confusion, and loss.

**JOB AND THE TRANSFORMATION OF THE SENSES**

Returning to the text of Job with all this in mind, it should be clear that of all the things Job suffers from, he surely does not suffer from our modern preoccupation with the boundary separating perceptual from conceptual knowledge. The anthropology woven throughout this Hebrew text is foreign to that of post-Cartesian Western philosophy. For Job, *to see is to know*. The concept embodies the percept, and vice versa, in ways that should provoke our attention.

Consider just a few comments drawn solely from Job’s thirteenth chapter, in his reply to Zophar the Naamathite. Speaking of the purported wisdom of his friends and the knowledge they think they offer, Job replies by first connecting his senses with their knowledge, and then explaining his need for knowledge of another order: “Look, my eye has seen all this, my ear has heard and understood it. What you know, I also know; I am not inferior to you.

But I would speak to the Almighty, and I desire to argue my case with God” (Job 13:1-2). A bit later, he doubts if his companions’ words possess any real significance in comparison to a possible direct encounter with God, and he imagines what they themselves would do if given this latter opportunity: “Would not his splendor terrify you, and the dread of him fall upon you? Your maxims are proverbs of ashes; your defenses are defenses of clay” (Job 13:11-12).

Most importantly, though, notice Job’s clairvoyance about what his own, perceptual confrontation with God would mean to him, personally, regardless of the anticipated consequences: “Though he slay me, yet will I hope in him; I will surely defend my ways to his face” (Job 13:15). This demand for a face-to-face encounter is repeated six chapters later, and again, the crucial role of the senses is impossible to miss: “I know that my redeemer lives, and that at the last he will stand on the earth; and after my skin has been destroyed, then in my flesh I will see God; I myself will see him with my own eyes — I, and not another. How my heart yearns within me!” (Job 19:25-29).

As Providence would have it, Job does not have to wait for his skin to be destroyed. After many words have been shared and wisdoms pronounced by human tongues, the theophany of God comes to Job in the whirlwind. The most vibrant display of creation’s diversity is conjured by and through the living Word of the God now personally present to Job. Retrieving Steiner’s commentary about this “aesthetic” response from God in these sections (chs. 38-41), he writes:
Like some ultimate Leonardo, the Deity in *Job* promenades us through a gallery of masterpieces, of rough sketches, of enigmatically encoded patterns, of grotesques and anatomies. In sequences and cross-echoes whose delicacy and numbing power . . . have defied millennia of explication and hermeneutic analysis, God’s address to Job comes out of an artist’s workshop. Prize exhibits, opus numbers.\(^\text{12}\)

Indeed, only after the Master has brandished this *œuvre* is Job brought to profess his genuine humility, and his story of restoration begins: “Surely I spoke of things I did not understand, things too wonderful for me to know. ‘You said, ‘Listen now, and I will speak; I will question you, and you shall answer me.’ My ears had heard of you but now my eyes have seen you. Therefore, I despise myself and repent in dust and ashes” (Job 42:3-6).

By the time Job finally utters these words of *metanoia*, the Edomite has already been through a remarkable transformation. It clearly does involve the humiliation of his reason, yet Job’s constructive experience of “healing” has more to do with his perceptual encounter of the living God in his midst than it does with quieting his creaturely desire for knowledge, meaning, or purpose. The Creator interrogates his creature, but he does so *through* the diverse forms of creation as such, and thus Job is able to say: “My ears had heard of you. . . but now *my eyes have seen you*. Therefore, . . .” We can rightly surmise that Job’s actual, material circumstances have not changed at this point. The losses remain; the sores still weep. What has changed is Job himself, as an awesome and awful beauty has manifested before his very eyes. In the process, his entire person is transformed, including his senses; the world to Job looks different.

**JOB AND THE CLINIC TODAY**

In this final section, I will offer a few suggestions for what this biblical theology might mean in terms of contemporary medical responses to suffering. The first suggestion is, in fact, a word of caution. Nothing would more readily belie a posture of receptivity to transcendent beauty than to think we could rationally dissect Job’s experience, extract its component parts, and then re-package it all in the form of a prescriptive object of therapy, ready for use when needed. These lessons from Job hardly imply that health care providers should somehow take responsibility for inaugurating the same kind of transformation for sufferers today. At a more fundamental level, learning from Job at least means attending further to the dynamic range of our perceptual faculties. We are all capable of a profound participation, not just in this-worldly experiences of pain and suffering, but also in more-than-this-worldly forms of divine beauty, or simply put, grace.

Thus, as we connect this overall theology to the daily practices of medicine, we are obliged to attend more to the phenomenology of perception at work in our patients’ specific experiences in our various sites of healing. Such critical attention should serve as a consistent focus within clinical ethics as a field of research. For instance, there is already an abundance of empirical literature aimed at testing and evaluating the existential effects of verbal communication models between clinical staff and patients in a variety of cases
and contexts, such as the disclosure of a cancer diagnosis in the exam room, and so forth. Yet when it comes to the aesthetic dimensions contextualizing all this interaction — by which I mean the particular images within one’s field of vision, the various sounds in the background, the objects of touch, etc. — I think it fair to conclude that we still have not thought proactively enough about how this perceptual order conditions patient experience in dramatic ways.13

This is unfortunate, for the sufferer is already struggling enough as it is, without also being besieged, if I may use the term, by careless aesthetics. Eric J. Cassell has written: “Suffering influences perception by changing the individual’s total focus toward the source of suffering. The entire apparatus of perception, including the assignment of meaning, then contributes to the suffering. As this occurs, the person begins to adapt to the threat, and the nature of the person begins to change.”14 I hope to have made the case that we should at least have an expectation that beauty can often arrest and reverse such a debilitating transformation — but only if given the chance. Creating opportunities for such aesthetic encounters thus begins by giving more critical attention to the ways in which our contextual spaces are already influencing patient perception in certain ways, whether we mean them to or not.

To be sure, many facilities do exemplify the very finest degree of aesthetic coherence and intentionality, conscientiously incorporating what is being called “evidence-based design.”15 And when they do not, this is often the result of real-world limitations of budgeting, space, and resources constraining what we are able to accomplish. Nevertheless, beyond the dictates of necessity and function, many of our clinical spaces simply appear thoughtlessly designed and haphazard, not just by necessity and function, but again, by carelessness. One is often reminded of that classically-80s dystopian film by Terry Gilliam, Brazil, in which strange mechanical objects, oversized ventilation, obnoxious advertising and noisy gadgets are constantly preventing characters from performing the most basic of movements and conversations. Though conditions quite naturally reflect the ongoing integration of technology and medicine in today’s society, what gets lost in all this attention to the body is the patient’s own perspective, especially of those liminal spaces in and between procedures and labs and so forth, moments that often impress the memory far more than we may realize. To be sure, the enculturation of medical professionals with the tools of their trade, or the resignation of overworked associates towards suboptimal conditions they feel disabled from changing, are understandable phenomena in themselves. Yet these factors still do not justify any lack of consideration on our part of the patient’s overall perception of our places of healing. The one who is suffering is already hypersensitized to every stimulus, vulnerable to every subtlety.

As I hope to have made plain, there is far more at stake in our facilities’ conversations about “aesthetics” than simply deciding what pictures look best on this or that wall in the waiting room. Yet, even when it comes to that particular topic of art and décor, there should surely be more of a shared, theological conversation underwriting such choices. It may bear reminding, for instance, that Matthias
Grunewald’s famous, but disturbingly grim, Isenheim altarpiece was originally hung in the hospital ward. While we may not wish to go to such lengths to “confront” our patients with this kind of beauty, it may not be entirely out of bounds to recommend putting a halt to the kitschy sentimentalism that pervades so many of our spaces. Such an aesthetic may in fact be preventing those in pain from engaging their plight in the way of Job, which is to say, pressing the Creator to somehow be made present on that supra-rational level described above. I was intrigued by a recent article dealing with this very question of “jolly art” in the hospital, in which it was argued that there is some neuroscientific evidence to support the idea that, instead of placid tableaux of soft landscapes being conducive to patient healing, hospital art should in fact be more arresting and provocative to viewers, inviting them to more actively and existentially engage its interpretation. This phenomenon could undoubtedly serve as part and parcel of patients’ holistic interaction with their respective conditions, as our specialists in art therapy already realize.

Finally, then, and on an individual level, those engaged in health care should be encouraged and empowered to practice a keener sensitivity to this other-than-sentimentalized kind of beauty, for the sake of their own formation and for the sake of their patients. Such a practice ought not be confused with simply greater exposure to or familiarity with art, though of course, that might be a help. Above all else, though, we are talking about cultivating what is essentially a spiritual discipline; a willingness to work at remaining open to the divine in our midst — in our surroundings and environment, yes, but also in and through the people who come to share spaces with us. Temptations to operationalize our vocations and close ourselves off to the happenings of the present are pervasive. It takes courage to “stay open.”

As a practical step in getting motivated in this direction, one of the best hours you could spend watching television, in my opinion, is an interview between Bill Moyers and Sr. Wendy Beckett. Sr. Wendy became somewhat famous for a series she hosted on the BBC about the history of art. In her interview with Moyers, though, Sr. Wendy roams broadly through a host of fascinating topics, and no doubt better communicates the substance of the “heady” theology I otherwise tried to present above, about our receptivity to beauty and what it means for our spirituality. When asked, for example, about what her personal practice of aesthetic contemplation has done for her, she replied that, while it has given her joy, it has also “increased my capacity to accept darkness and pain, and not be too bewildered by them.” She goes on:

> It has, I hope, made me a more sensitive and alert person. The one fatal thing is to be a zombie. And I think we’re all in danger of living part of our lives at zombie level. But I think art helps one to be perpetually there, as it were … because God’s coming every moment, but we’re not receiving Him every moment of course, we’re not even noticing that He’s coming. We’re drifting through.

In this way, beauty invites us day by day and moment by moment, to remain attentive and avoid “zombiedom,” lest we miss those
occasions in which an apparently ordinary conversation, procedure, test, or consult could become something deeply transformative.

CONCLUSION
This essay has sought to uncover how an appreciation of God’s “aesthetic response” to Job’s suffering exhorts all of us, especially those engaged in medicine, towards a more capacious interpretation of the patient’s process of healing through suffering, such that the patient’s spiritual senses are expected to be as active as the patient’s bodily senses. It was from a depth of pain and struggle in both body and spirit that Job found the boldness to demand a divine response to his condition, his questions, and his confusion. Like so many others in the grip of suffering, he longed to know what he had done to deserve it all: “I loathe my very life; therefore I will give free rein to my complaint and speak out in the bitterness of my soul. I say to God: Do not declare me guilty, but tell me what charges you have against me” (Job 10:1-2). The Scriptures disclose for us, however, a God who disregards such an invitation and prescribes instead a more radical form of therapy, subjecting Job to a transformational encounter that ultimately reorders his entire field of perception. Beyond the limits of reason, Divine Beauty persuades Job in the most holistic sense of the word, moving him from his prior relation to his suffering into a new relationship, not just to his suffering, but to the Creator himself.

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ENDNOTES

1 George Steiner, Grammars of Creation (New Haven: Yale University Press, 2001), 47.
2 Steiner, Grammars of Creation, 47-8.
5 Tham, “Communicating with Sufferers,” 86.
6 Tham, “Communicating with Sufferers,” 93.
7 Tham, “Communicating with Sufferers,” 89.
11 Hart, The Beauty of the Infinite, 3: “Christ is a persuasion, a form evoking desire, and the whole force of the gospel depends upon the assumption that this persuasion is also peace: that the desire awakened by the shape of Christ and his Church is one truly reborn as agape, rather than merely the way in which a lesser force succumbs to a greater, as an episode in the endless epic of power.”
12 Steiner, Grammars of Creation, 48.
16 Jonathan Jones, “Should hospital art be jolly – or should it portray the truth about pain? The Guardian, August 19, 2014,https://www.theguardian.com/artanddesign/jonathanjonesblog/2014/aug/19/hospital-art-jolly-pain-wellbeing-kitsch-grunewald. The author points to the research of Semir Zeki, a neurobiologist at University College London, who has done some intriguing work on the way our brains respond to visual stimuli.
17 “Sister Wendy in Conversation with Bill Moyers” (WGBH Educational Foundation, Boston, 1997), 46-47.