Praying for a Cure: When Medical and Religious Practices Conflict

Peggy DesAutels
University of Dayton, pdesautels1@udayton.edu

Margaret P. Battin
University of Utah

Larry May
Washington University in St. Louis

Follow this and additional works at: http://ecommons.udayton.edu/phl_fac_pub

Part of the Christian Denominations and Sects Commons, History of Philosophy Commons, and the Other Religion Commons

This Book is brought to you for free and open access by the Department of Philosophy at eCommons. It has been accepted for inclusion in Philosophy Faculty Publications by an authorized administrator of eCommons. For more information, please contact frice1@udayton.edu, mschlangen1@udayton.edu.
The health-related choices made by Christian Scientists are often criticized as being irrational. It is difficult for those who are medically oriented to understand how Christian Scientists can rationally justify avoiding medical treatments that are known to be effective. What is especially confusing to the observer of such choices is that Christian Scientists are, for the most part, well educated and otherwise rational individuals. In this chapter, I analyze the nature of the choices made by Christian Scientists and argue that such choices are neither irrational nor the result of unethical church practices.

In chapter 1, Margaret P. Battin maintains that Christian Science institutional practices result in a Christian Scientist’s inability to make an autonomous and informed rational choice when faced with a life-threatening illness or injury. I respond here to Battin’s criticisms of Christian Science and argue the following:

1. The Christian Scientist’s decision to pursue spiritual means for treatment does not resemble in structure the calculation of risk found in medical decision making, and therefore base-rate information on success rates for healing a particular disease is inapplicable.

2. The Christian Science institutional practice of publishing only accounts of healing successes does not equate to an unethical encouragement of Christian Scientists to make choices from an inadequate basis; rather, the recounting of healings is an integral part of Christian Science worship and is instructional to other Christian Scientists.
on how to achieve a mental state that, when achieved, always results in both spiritual advancement and physical healing.

3. The primary choice a Christian Scientist makes is not ultimately one of choosing between alternative health care regimes; rather, it is one of choosing between very different worldviews. Making such a choice is more a matter of conscience than of pure rationality.

Battin’s Critique of Christian Science Practices

Margaret P. Battin’s main criticism of the Christian Science Church is that it fails to provide base-rate and other relevant information on the effectiveness of Christian Science in healing specific medical conditions. As a result, adherents are unable to make a rational choice between a medical approach to healing and a spiritual one. Battin’s criticism rests on the view that a health-related choice made by a Christian Scientist resembles in structure any other prudential calculation under risk:

The choice to accept treatment from a Christian Science practitioner rather than a medical doctor, or not to accept treatment at all, resembles in structure any other prudential calculation under risk: Various possible outcomes—cure, continuing illness, incapacitation, and death—are foreseen under specific valuations and under more or less quantifiable expectations about the likelihood of their occurrence.¹

In her view, just as the decision of which alternative medical approach to take should be based on the success rates of each medical alternative, so the decision of whether to use a Christian Science approach or a medical approach should be based on the success rates for curing that particular condition using Christian Science and the success rates of each of the medical alternatives. Although the Christian Science Church has published a large body of anecdotal evidence for the successful healing of physical conditions, many of which were medically diagnosed, Battin claims that when Christian Scientists are supplied with such anecdotes without accompanying anecdotes of failure, they are encouraged by their church to miscalculate the risks involved in choosing a Christian Science approach. Battin holds the view shared by many philosophers of science that anecdotal evidence is a much less rational basis for decision making than is base-rate information or experimental evidence that makes use of control groups.

As Battin continues with her analysis of the rationality of a Christian Scientist’s choice for healing, she admits to some complexity. She notes that Christian Scientists do not themselves view their choice for treatment as a
risk with a preset chance for success; rather, they view their choice as the need to assess their own ability to achieve a certain mental state that, when achieved, will always result in healing. “The devout Scientist believes that the risk of death from disease correctly understood and adequately prayed for is nil. But what the Scientist, devout or otherwise, is not encouraged to assess in making risk-taking choices is how likely it is that he or she will correctly understand and adequately pray for release from the condition.” Battin claims that even when the Christian Scientist’s choice is viewed in this very different way, the church fails to provide evidence (anecdotal or otherwise) that would help a Scientist assess whether he or she can achieve the correct mental state.

Battin also admits that the ends desired by a Christian Scientist may be more than just a cure for a particular disease. She acknowledges that when a Christian Scientist has as a higher priority the goal of increasing spiritual understanding when seeking spiritual means for healing, the pursuit of this more central goal results in there being a different type of health-related choice than merely choosing between alternative methods for curing disease, and that the type of information needed in order to make this choice would also be different:

If a believer approaches a Christian Science practitioner not to get well but in order to deepen his or her faith—as many devout Christian Scientists clearly do—then it is not so clear that these constraints apply [my emphasis]. Many Christian Scientists conceive of healing not as an alternative medical system at all but as a process of prayer that is part of the effort to achieve a certain spiritual condition of which a side effect, though not the central purpose, may be the restoration of health.

But even after noting that many Christian Scientists do have goals other than merely curing a diseased condition, Battin argues that “by the very fact that it [the Christian Science Church] distributes testimonials that recount favorable recoveries using Christian Science healing” and “by asking Blue Cross to cover the services it renders” that “Christian Science announces and promotes itself as an alternative healing system.” Here she seems to be arguing that although a devout Christian Scientist does not view a health-related choice as a choice simply between alternative methods for curing disease and thus may not view base-rate information on alternative cures as relevant to this choice, some people would view Christian Science simply as an alternative healing method (as a result of the way Christian Science promotes itself) and would need success-rate statistics in order to decide whether to use this method.
In summary, Battin has three main criticisms of the Christian Science Church (with an emphasis on the first):

1. The Christian Scientist’s health-related choice should be viewed as resembling any choice with quantifiable external likelihood of success; therefore, the church is at fault for failing to supply the success-rate information needed to make that choice.

2. Even if the Christian Scientist’s choice is viewed as the need for an individual to assess his own ability to successfully carry out a healing method that always works when correctly executed, the church is ethically remiss for failing to inform adherents of the conditions that must obtain in a successful attempt.

3. Even though devout Christian Scientists do not view a health-related choice as a choice simply between alternative methods for curing disease, nondevout Christian Scientists and non-Christian Scientists are encouraged by the church to view Christian Science as an alternative healing method. Thus the church should, but does not, supply a healing-success record for outsiders to rationally assess this alternative for healing particular ailments.

In showing what is wrong with Battin’s views, I first explore the nature of the choices Christian Scientists actually make and then determine the information most needed as a basis for making these choices. I show that base-rate information is irrelevant to a Christian Scientist’s decision-making process and that anecdotal accounts of Christian Science healings published by the church play an important and ethically-responsible role in both the Scientist’s and the non-Scientist’s decision-making process. Finally, I argue that the choice of both Christian Scientists and non-Christian Scientists is not one of simply deciding between alternative approaches to curing disease but is one of deciding between alternative worldviews. The choice to adhere to a Christian Science worldview is as rationally defensible as the choice to adhere to the worldview held by medical scientists.

The Goals of a Christian Scientist

In order to determine if a Christian Scientist can and does make rational choices, it is essential to know the ends being pursued by a Christian Scientist. Once the ends are clear, it can be determined if the chosen means to reach those ends are rational. Of course, it can always be argued that such ends are really not better than some other set of ends,
but such an argument becomes one of value rather than rationality. And since Battin is addressing whether Christian Scientists are supplied the information needed to make rational choices, not whether the goals of Christian Scientists are worth pursuing, I focus in this section only on defining the goals themselves and not on their value relative to others’ differing goals.

Since Christian Science is first and foremost a religion built on the teachings and life of Jesus, a Christian Scientist’s goals are religious in nature. Christian Scientists attempt to follow Jesus’ example in his understanding of spiritual reality and in his demonstration of it. Christian Scientists believe that Jesus’ understanding of God and of man’s true spiritual nature enabled him to heal both sin and sickness and that anyone’s increased understanding can bring about similar results. But the primary goal for a Christian Scientist is to gain a more spiritualized consciousness; all positive results from achieving this goal are “added unto” him or her. Pursuing spiritual consciousness as a priority is in direct agreement with Jesus’ teaching: “Seek ye first the kingdom of God . . . and all these things shall be added unto you.” The supreme good in life that a Christian Scientist pursues is similar to William James’s characterization of the good pursued in all religious lives: “Were one asked to characterize the life of religion in the broadest and most general terms possible, one might say that it consists in the belief that there is an unseen order, and that our supreme good lies in harmoniously adjusting ourselves thereto.” Christian Scientists would certainly agree that their “supreme good” comes from “harmoniously adjusting” to an ordered, harmonious spiritual reality—from understanding and living a life that better reflects the qualities of a God that is defined as “Mind, Spirit, Soul, Principle, Life, Truth, Love.” Christian Scientists also expect and experience such materially tangible good results as physical healings after successfully adjusting to spiritual reality and becoming conscious of it. Mary Baker Eddy, the founder of the Christian Science Church, writes in the textbook studied daily by practicing Christian Scientists, “Become conscious for a single moment that Life and intelligence are purely spiritual—neither in nor of matter—and the body will then utter no complaints.”

Christian Scientists certainly expect healthy bodies, but only in the sense that healing material conditions is a way to demonstrate the goodness and power of God. In his recently published book, Richard Nenneman, a former editor in chief of The Christian Science Monitor, explains the goals of a Christian Scientist as they relate to “healthy bodies”:
For what does one pray? We have said that prayer is primarily not one of petition. If one is praying to see more of God's kingdom on earth, the prayer will usually be specific. But the demonstration the Christian Scientist is making is not one defined by the limits of the material senses—a healthy body, a better job, a bigger house, a kinder husband, or a more generous employer. These may be the things we think we need. On examination, however, a sincere Christian is forced to admit that what he or she really needs, and the only thing he or she needs, is a fuller consciousness of God's presence and power.¹⁰

Although a Christian Scientist may originally be motivated to pray because of an inharmonious physical or mental condition, the Christian Scientist is taught to reexamine his or her desires and to desire first and foremost additional spiritual insight, since such insight produces a much deeper and more lasting sense of well-being—a sense of well-being not contingent on particular material conditions.

Since Battin argues that the Christian Science Church "announces and promotes itself as an alternative healing system" by publishing positive accounts of healing, it is important to point out here that Christian Scientists are directly told that Christian Science is not to be viewed in this way, both by Mary Baker Eddy in her textbook and by authors published in the Christian Science periodicals—the very periodicals containing accounts of healing. Mary Baker Eddy writes that "the mission of Christian Science now, as in the time of its earlier demonstration, is not primarily one of physical healing. Now, as then, signs and wonders are wrought in the metaphysical healing of physical disease; but these signs are only to demonstrate its divine origin."¹¹

An article published in the Christian Science Journal describes the healing of a blood condition using Christian Science, and the author of the article goes on to state that as grateful as Christian Scientists are for such healings, they don't regard spiritual healing simply as an alternative to medical or other forms of treatment. Healing is seen both as worship—a substantial way to glorify God—and as scientific proof that reality is wholly spiritual and good. Put another way, each healing of a disease, an injustice, or a sinful habit is seen as a yielding of the mistaken belief that everything is merely matter, to the reality of Spirit as the primal and only substance and cause.¹²

Christian Science does not simply "announce and promote itself as an alternative healing system." Rather, it views healings as a demonstration that reality is spiritual and as an important by-product of an increased understanding of this spiritual reality. If Christian Scientists' primary goal is
increased spiritual understanding and if they view physical healing as a secondary benefit resulting from such increased understanding, then choosing means that result in the curing of physical conditions but fail to increase their understanding of or demonstration of spiritual reality could not be considered rational.

Base-Rate Information in a Christian Scientist’s Life

Clearly, if the end pursued by a Christian Scientist is a more spiritualized consciousness, then physical healing success-rate information is of little value in the pursuit of that end. For example, an individual pursuing an advanced understanding of calculus would hardly need to know how many before her attempted such an understanding and failed to achieve it. But even assuming that such information were available, it is relevant to that individual’s decision-making processes only to the degree that it points to an impossibility (or extreme unlikelihood) of that individual’s achieving the desired understanding. If such understanding is her goal, she has no other choice but to attempt to learn calculus. No one else can learn it for her. A medical patient relies on someone other than himself to cure his illness and thus has a number of alternative experts and material methods from which to choose (each with an accompanying success-rate external to the patient). But the Christian Scientist must take responsibility for advancing his own mental state. A Christian Scientist believes that such advancing can only occur through his own study, prayers, and acts or through the help of a Christian Science practitioner’s prayers. Just as a student can only advance in calculus through study and practice, so a Christian Scientist can only advance through study, prayer, and practice. A Christian Scientist is certainly able to explore alternative religions or philosophies in a quest for increased spiritual consciousness, but it would not be rational to pursue medical means for such a quest, since medical practitioners make no claim to spiritual expertise.

This does not mean that Christian Scientists martyr themselves in pursuit of spiritual healing. They do expect that when they have reached a better understanding of spiritual reality, they will also be healed. There is no doubt that there are those Christian Scientists who in especially alarming situations may question their ability to achieve the spiritual growth necessary for healing. And there are also those who may not wish to dedicate themselves to what they perceive to be too much spiritual effort necessary for healing a condition known to be easily cured by medical means. But in neither of these cases would base-rate information on the success rate of a
Christian Science approach to healing make the decision to pursue medical means any easier or more informed.

In this section, I have argued against Battin’s assertion that an ailing Christian Scientist faces a choice that “resembles in structure any other prudential calculation under risk” in which “various possible outcomes... are foreseen under specific valuations and under more or less quantifiable expectations about the likelihood of their occurrence.”14 As Battin herself points out in a later section of her chapter, Christian Scientists do not view themselves as making choices for which specific success rates external to themselves are relevant. Rather, they choose to live a religious way of life with spiritual growth as a goal and with physical healings as one additional benefit from gaining an increased understanding of spiritual reality.

The Role of Healing in Christian Science

Christian Scientists share and publish anecdotes of healing as a way to worship and praise God and as a way to show that a Christlike understanding of spiritual reality is being and can be demonstrated via physical healings. It is important to note that accounts of healing are never presented in isolation. They follow theological articles in the periodicals, just as such healing accounts included in the final chapter of Science and Health follow seventeen chapters of exposition of Christian Science. Healings are clearly viewed as the fruitage of increased spiritual understanding and as proof that Christian Science, when properly understood and applied, brings about tangible and often dramatic positive results.

The healing accounts themselves are instructive and often contain details of the Christian Scientist’s experience of healing—details of what thoughts and actions resulted in a changed physical condition. The writers of such testimonials often begin their accounts with descriptions of failed approaches at healing the particular condition. They then describe the approach that finally results in healing. Sometimes failed approaches include attempted medical means and sometimes failed approaches include Christian Science study that fails to result in the mental state needed for the physical condition to be healed.

There is no doubt that such failed approaches are only included as part of what led up to an eventual healing using Christian Science and that such accounts are published within and as part of the belief system of Christian Science. But there is also no doubt that the writers are Christian Scientists and wish to encourage others to pursue Christian Science or remain committed to using it. The writers are convinced that Christian Science brings
about physical healing as a side effect of advanced spiritual consciousness. Over and over, such writers follow their account of physical healing with such comments as, “While I fully appreciate the release from my physical troubles, this pales in significance in comparison with the spiritual uplifting Christian Science has brought me.” Or “all of this [a child cured of a medically diagnosed terminal illness] is, however, nothing to compare with the spiritual uplifting which I have received, and I have everything to be thankful for.” Many testifiers stress that only when they gave up seeking mere physical relief in favor of advancing their spiritual understanding did a physical healing result and that in the end the spiritual advancement was much more valuable to them than the physical healing. It is also significant that many healing accounts are of nonphysical conditions such as loneliness, suicidal tendencies, or relationship problems.

Christian Scientists choose to share such accounts and choose to listen to and read such accounts within the context of a religious community—a community in which individual members commit to worshiping together and to helping each other better understand and demonstrate their jointly held religious beliefs. Sharing accounts of healing is a way to encourage others to use Christian Science as a means to both spiritual advancement and physical healing. Accounts of healing are often instructive regarding actions and mental states that brought about the healing and often describe unsuccessful approaches that preceded the eventual healing. Thus, in direct contrast to Battin, I argue that published accounts of healing are not presented by an “ethically remiss” institution simply as evidence that Christian Science is more effective at healing physical conditions than a medical approach to healing. Rather, such accounts are shared among members of the Christian Science community as part of their worship, as encouragement to others, and as instruction on how the study and practice of Christian Science can bring about both a greater (and valuable in itself) understanding of spiritual reality and an improved (but secondary) physical health.

Christian Scientists are faced daily with media accounts of disease and with a dominant medical paradigm claiming that certain diseases will cause death if not treated medically (or in many cases will cause death even with medical treatment). It is challenging, to say the least, for a practicing Christian Scientist not to catch society’s fear and concern. Shared accounts of successful healing using Christian Science are one way to assure others that discouragement, apathy, or fear can and should be overcome and to help others gain a stronger sense of hope and expectation in the healing efficacy of a more spiritual way of life—a way of life that according to Christian
Scientists (and many medical professionals) results in physical healings that cannot be explained by medical scientists using a primarily materialistic theory of disease.

Battin contends that the Christian Science Church presents itself as offering an alternative health care system. In one sense, she is right, but only when health is viewed as exemplified in both one's spiritual and one's physical state. The Christian Science "alternative" is a religious alternative in which the spiritual and physical condition of a patient are inexorably linked. In this view, the patient's mental condition is of primary importance and plays a causal role in that patient's physical well-being. In other words, the Christian Scientist's view of "health" and "healing" is much broader than the secular medical view that health equates to physical well-being and that causes of disease equate primarily to biological causes.

Battin acknowledges that Christian Scientists view both the causes and the nature of disease very differently but also argues at one point that Christian Scientists accept and the church promotes "a variety of external similarities" that reinforce the claim that the Christian Science Church functions as an alternative to medical institutions. She lists the following similarities: Christian Scientists call practitioners when they have "discom- fort ing symptoms," practitioners are listed in the Yellow Pages, appointments are made with practitioners, practitioners are paid at rates similar to physician's rates, and "Blue Cross will pay the bill."16 I have two points to make here: First, as I have already shown, Christian Scientists themselves do not view these external similarities as reasons to view the church as an alternative to medicine. Rather, the content of what they read in both Science and Health and published accounts of healing directly tell them not to view Christian Science in this way. Second, although some Christian Science institutional practices can be viewed as externally similar to medical institutional practices, many more of its institutional practices are quite clearly dissimilar. When all Christian Science institutional practices are taken into account, it is quite obvious that the institutions to which the Christian Science Church presents itself as an alternative are other church institutions. Christian Science church buildings, published periodicals, and institutional advertisements in the Yellow Pages all present the Christian Science Church as a church—a religious institution. On Sunday morning, neither a Christian Scientist nor anyone else would view the choice to be made as one of driving to either a hospital or a Christian Science Church. And when a Christian Scientist is experiencing "discomf ort ing symptoms," she does not at that point choose between a medical institution and the Christian Science Church. Rather, she has already chosen her religious
alternative—she has already chosen her worldview, way of life, and the religious institution designed to promote that way of life.

**Differing Worldviews**

Many, including Battin, would agree that Christian Scientists do indeed make *subjectively* rational decisions. Within the context of a Christian Scientist’s beliefs and goals, choosing Christian Science as a means to achieving advanced spiritual understanding, as well as the physical healing that accompanies this understanding, can be viewed as rational. But many question the objective rationality of the belief system of Christian Science itself. Is it rational to think that there is, in fact, a spiritual reality? If there is such a reality, is it rational to think that we can know or experience this reality to any degree? And even if a few individuals such as Jesus (or other high-visibility religious figures) were able to glimpse and to demonstrate the healing effect of an understanding of this spiritual reality, is it rational to expect just anyone to be able to understand and demonstrate this reality? Such questions and their possible answers go well beyond the scope of either Battin’s or my project, but I do wish to address them, if only briefly, because a skeptical reader would most certainly have such questions. Battin herself, although claiming not to be challenging the verity of Christian Science beliefs, clearly writes from the perspective that a Christian Scientist’s choices are at best subjectively rational but certainly not objectively rational. The rationality of the Christian Scientist’s belief system is also relevant to Battin’s and my project when the choice a Christian Scientist must make when deciding whether to turn to medical care is viewed as a choice between two very different sets of premises about the nature of the world and more specifically about the relationship between disease and certain mental states.

Although space does not permit me to address fully the issues and debate that surround making a choice between two very different belief systems or theories, I wish to highlight how such a choice can be viewed as being ultimately a matter of individual conscience rather than objective rationality.

Christian Scientists and medical practitioners can be viewed as practicing within two different belief systems—as adhering to two very different theories about the nature of the world and as holding very different premises about the cause of and cure for physical conditions. Practices built out of these two theories both appear to produce healing results, although as has been emphasized throughout this paper, the practice of Christian
Science also produces what Christian Scientists term advanced spiritual understanding. Christian Scientists experience healing results for themselves, observe healings in family members, and learn of others’ healing experiences at Wednesday services and through Christian Science periodicals. Even Battin acknowledges that it cannot be assumed that “Christian Science healing is in fact less effective than conventional medical therapy.”¹⁷ Thus it can be argued that Christian Scientists and medical practitioners hold to two very different and conflicting sets of premises, each of which when practiced appears to bring about results.

Several philosophers have noted that certain practices based on ideologies that conflict with Western medical science do in fact bring about cures that cannot be explained within the medical paradigm. Paul Feyerabend, in his writings on the need for society to defend itself against science, points out that arguing that medical science “deserves a special position because it has produced results . . . is an argument only if it can be taken for granted that nothing else has ever produced results.” He continues by asserting that effective methods of medical diagnosis and therapy do exist outside of the ideology of Western science.¹⁸ William James also comments on the healing results achieved outside of science in Varieties of Religious Experience. In a chapter devoted to “healthy-minded” religions James lumps Christian Science in with other “mind-cures,” noting that “religion in the shape of mind-cure . . . prevents certain forms of disease as well as science does, or even better in a certain class of persons.”¹⁹ And Michael Polanyi, in his writings on faith and science, has noted that “Christian Science succeeds in contesting effectively even today the interpretation of disease and healing by science.”²⁰

Even though Christian Scientists have accumulated a large body of well-documented evidence for healing results, the evidence for the truth of Christian Science as a theory comes both from such materially tangible healing evidence and from religious experience. Evidence for the existence of spiritual reality and even for mental causes of diseased physical conditions is by its very nature different from evidence used to verify physical theories within the physical sciences. In describing the reality sensed as a result of religious experience, William James writes, “It is as if there were in the human consciousness a sense of reality, a feeling of objective presence, a perception of what we may call ‘something there,’ more deep and more general than any of the special and particular ‘senses’ by which the current psychology supposes existent realities to be originally revealed.”²¹

Although Christian Science and medical science are based on significantly different theories, there is some evidence that can be shared and
discussed between those adhering to these different theories. This evidence would include the already existing documentation of physical cures achieved by those adhering to the Christian Science worldview. Evidence for these medically unexplainable cures can be found not only in anecdotal accounts but in before-and-after X rays and in documented before-and-after medical examinations. I do think a discussion between those holding to medical theories and those holding to the Christian Science worldview would be useful and beneficial to both groups, but Christian Scientists run into several potential difficulties in such a discussion. If they present evidence for physical cures to medical institutions and thus stress this evidence, they can easily be viewed as presenting themselves as a mere alternative to secular medicine. And just as importantly, such a discussion would be asymmetrical. The political, economic, and epistemic power lies with medical science institutions and not with a marginalized religious institution.

In attempting to determine the types of acceptable evidence for medically unexplainable cures or for Christian Science as a theory, secular medical scientists understandably wish to “set the rules” on what counts as valid evidence. Those within the Western science paradigm argue that evidence is most convincing when it is produced within controlled experiments and observed by skeptical onlookers. But Christian Scientists would argue that the achievement of certain mental and spiritual states cannot be “objectively” controlled and observed in the same way that physical scientists control and observe physical phenomena. As a result, evidence for Christian Scientists comes much more from their own individual experiences and from accounts by those whose lives they trust and respect. As already pointed out, both physical-healing evidence and religious-experience evidence go into their choosing a paradigm so different from medical science.

Once Christian Science and medical science are viewed as being two very different theories with differing premises and differing types of evidence that count as verification for these theories, the possibility of rationally choosing between these two theories becomes remote. As Thomas Kuhn points out, there are “significant limits to what the proponents of different theories can communicate to one another,” and “the same limits make it difficult or, more likely, impossible for an individual to hold both theories in mind together and compare them point by point with each other and with nature.”

The inability to hold two very different theories in mind together not only results in a difficulty in choosing between the two theories but also
points to why Christian Scientists do not attempt to “mix” medical and Christian Science means when faced with a health-related choice. Christian Scientists who have chosen to address their health-related concerns using the Christian Science worldview put themselves at epistemic risk when they turn to medical institutions and thus attempt to mix Christian Science premises and views with very different medical premises and views.

In the end, the main choice a Christian Scientist must make (and then commit to) is one between two differing worldviews. Deciding between two theories (each with its own internal consistency, empirical verification, and demonstrated beneficial results) becomes a matter of individual responsibility or conscience. Christian Scientists can be viewed as participating in what Polanyi terms “a community of consciences jointly rooted in the same ideals recognized by all” in which “the community becomes an embodiment of these ideals and a living demonstration of their reality.”23 As members of this community decide whether to remain within this embodiment of ideals, they decide based less on pure rationality than on what they perceive to be the value of the qualities and reality lived by other members of this community. They must depend on what general impression of rationality and spiritual worth others within this community exhibit. I argue that choosing between the belief system of Christian Scientists and that of medical scientists can only be accomplished using such impressions of rationality and judgments of spiritual worth so described by Polanyi.

Conclusion

A Christian Scientist makes health-related choices that may appear irrational to those who adhere to the worldview held by medical scientists. But when the goals of Christian Scientists are carefully examined, their “irrational” choices are easily seen as rational choices for means to achieving their goals. And when it is acknowledged that Christian Scientists offer positive accounts of healing to those who share their goals as part of religious worship and as encouragement and instruction for others in the achievement of shared goals, it can easily be argued that such positive accounts form neither an inadequate nor an unethical basis for rational choice. The choice that the Christian Scientist must make is a choice to live either by the values and worldview held within the Christian Science community or by the values and worldview held within the dominant medically oriented community. The making of this choice is a matter primarily of conscience.
Notes

2. Ibid., 99.
3. Ibid., 122.
4. Ibid.
5. Some moral theorists claim that questions of value can be answered using rationality. However, this is not the focus of either Battin’s arguments or my own.
13. When a Christian Scientist asks a Christian Science practitioner for help in achieving a more spiritualized consciousness, the practitioner prays for the Christian Scientist with the expectation that her prayers will result in the caller’s experiencing a heightened sense of God’s presence. Nevertheless, the caller is expected to be pursuing increased spiritual understanding himself (unless he is unable to do so).
15. The two quotations cited are found in separate accounts of healing included in the final chapter of *Science and Health*, 610, 614.
17. Ibid., 97. Battin quotes from a report produced by the Christian Science Church containing an empirical analysis of medical evidence in published Christian Science accounts of healing from 1969 to 1988. The authors of this report assert that over 10,000 physical healings were published in this period and that 2,337 were of medically diagnosed conditions. For more detail of the types of conditions reported as healed and of the ways in which such healing accounts are verified, see “An Empirical Analysis of Medical Evidence in Christian Science Testimonies of Healing, 1969–1988” (available upon request from the Committee on Publication, The First Church of Christ, Scientist, Boston, Massachusetts).
19. James, *Varieties of Religious Experience*, 122. James also wrote a letter to the *Boston Transcript* in March 1894 defending the right of the Christian Scientist or any other mind curer to practice healing: *I assuredly hold no brief for any of these healers, and must confess that my intellect has been unable to assimilate their theories, so far as I have heard them given. But their facts are patent and startling; and*
anything that interferes with the multiplication of such facts, and with our freest opportunity of observing and studying them, will, I believe, be a public calamity.