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Bible study ***3***

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A Different Kind of Knowing: Médecine de la Personne in a digital age

1 Corinthians 2 vs 6-11

6 We do, however, speak a message of wisdom among the mature, but not the wisdom of this age or
of the rulers of this age, who are coming to nothing. 7 No, we declare *God's wisdom*, *a mystery* that
has been hidden and that God destined for our glory before time began. 8 None of the rulers of this
age understood it, for if they had, they would not have crucified the Lord of glory. 9 However, as it is
written:
"What no eye has seen,
what no ear has heard,
and what no human mind has conceived"
the things God has prepared for those who love him -
10 These are the things God has revealed to us by his Spirit.
The Spirit searches all things, even the deep things of God.
11 *For who knows a person's thoughts except their own spirit within them?*
In the same way no one knows the thoughts of God except the Spirit of God. 12 What we have
received is not the spirit of the world, but the Spirit who is from God, so that we may understand
what God has freely given us.

Corinth and the Digital Age

We live in a world obsessed with knowing things. Once upon a time, we could respond to a difficult factual question by saying: "Oh I'm not sure" or simply: "I don't know". Now we say: "I'm not sure, just a minute, …I'll Google it". Information stored digitally saves us from the terror, or the embarrassment, of *not* knowing, missing out, or being wrong.

In this letter Paul is writing to a church living in a Greek-inspired culture of celebrating knowledge, the skill of argument and thinking. He is telling the church not to feel dismissed, or ignorant, because the kind of knowledge that is truly valuable holds mystery within it. And this knowledge is not easily accessible, not produced by humans and is hidden wisdom; the wisdom that is not understood by the world.

Within the cosmopolitan and wealthy Roman colony of Corinth it was popular to go to hear speakers who could hold a crowd in the forum; who used their exceptional powers of persuasive oratory to impress and win people over. These were the "sophists" - travelling intellectuals who attempted to convince listeners to follow their particular way of thinking. The elite classes vied to be seen to be connected to whoever was the latest fashionable sophist, and paid for his presence at events, for his attendance at dinners, and for the private education of their sons.

Plato described sophists as paid hunters after the young and wealthy, as merchants of knowledge, as athletes in a contest of words, and purgers of souls. From Plato's assessment of sophists it could be concluded that sophists did not offer true knowledge, but only an opinion of things. Indeed, Plato described them as only “shadows of the true”.

The sophists were skilled at convincing the audience that they knew what truth was, and what was the correct view of life and human behaviour. Paul was instructing the Corinthian church - itself made up of Jews, Greeks and other nationalities - that this form of guidance was not the whole story.

It strikes me that these popular speakers seem remarkably similar to what are called "influencers” on social media. (Who do *you* follow?)

Are many of these expert podcasters also “shadows of the true” as Plato says?

Could we say that these words are Paul's warning - not to be caught up in the "wisdom of this age, or the rulers of this age, who are, (thankfully – my words) coming to nothing!

So perhaps the tsunami of social media pressure, Artificial Intelligence solutions, data-led information and the increasing robotic interventions will, eventually, come to nothing?

It's my understanding that he was telling them that there are truths and knowledge far beyond the limited thinking of these orators. In an era of digital profiles, beyond the summation of data about a person – there lies our patient: the person, the child, the adolescent before us in the room.

“11For who knows a person’s thoughts except their own spirit within them.”

I am thinking about what we know… and what we don’t know.

Not knowing in treating mental health

Back in 1985 many psychotherapists were intrigued by the book by Patrick Casement, a psychoanalyst, titled “On Learning from the Patient”. He argued that, too often, the therapist (we could say doctor, psychiatrist, nurse, physiotherapist) enters the consulting room ready to explain and thereby impart their years of experience and certain knowledge to the patient. Patrick Casement suggested that often we have a fear of uncertainty which drives us to want to appear sure and knowledgeable in the face of the person seeking our help. We want to reassure them that the information is known and available.

Even with puzzling cases we don't want to appear baffled by their presentation.

How often do we say to ourselves: "I really don't know what is going on here "?

Casement writes:

"It is all too easy to equate not-knowing with ignorance. This can lead ***therapists*** *(professionals) to seek refuge in an illusion that they do understand."*
But if they can bear the strain of not-knowing they can learn that their competence as ***therapists*** *includes a capacity to tolerate feeling ignorant or incompetent, and a willingness to wait… until something genuinely relevant and meaningful begins to emerge." (1)*

The famous psychoanalyst Wilfred Bion (2) also spoke about the importance of letting go of fixed knowledge:

"Discard your memory; discard the future tense of your desire; forget them both, both what you know and what you want, to leave space for a new idea. A thought, an idea unclaimed, may be floating around the room searching for a home."

Recently I was asked to present at a Training Day for junior and qualified paediatric colo-rectal surgeons because I had been working with one of the consultants for a few years as a hospital-based child psychotherapist. This involved offering reflections on the child patients' emotional lives and thoughts about their bodies and their identities.

I came second in the line-up, following a senior colo-rectal surgeon explaining various ways to correct cloacal anomalies.

I have to say, he was such a good teacher, I began to think I understood how to tackle the different problems that the urologist and rectal team face. This gave me a whole new perspective on the complex medicine of the physical body, and what *I, as a mental health practitioner* really **don't know**. What a great deal of information you medical practitioners have had to learn!

My talk was about how children, through drawings, express their feelings about their bodies that don't work properly, (like a rocket, but it is broken) and about what they think of the surgeries ("This is me, throwing a chainsaw into the doctor's mouth – see how you like it !").

Afterwards, I was approached by another senior surgeon, about to go back to Munich to set up a clinic there, who told me about a young girl he had operated on since infancy. She was now 8 years, and he had always thought they had a very good relationship as she went through all her operations and recoveries. The trouble was, he explained, she now was cold and distant with him and would not speak to him much. This caused great sadness to him, and he was at a loss to explain the change.

He said: "I just don't know "

I was surprised and encouraged that this very senior surgeon, could ask how to think more broadly from a child psychotherapist. (Sadly, I don't know the end of this story, although I was thinking about how developmental changes would affect this little girl's feelings about her body and surgery on very private parts of it).

So, I think the first lesson from this passage is to not be afraid to approach a patient not knowing what they need, and to be open, perhaps, to be surprised. I find this very difficult myself as I know I take refuge in my knowledge of all the children, teenagers and parents whom I have seen now locked away in my own "database" of memory.

All of this was eloquently discussed by Kathy in her Bible Study “The Art of Compassion in 2018, so I am grateful to her for being so honest as to admit that the tendency we often have, is to draw upon all we know from training and experience, to offer the solution, to “fix the problem”.

I am concerned that in my psychological field, the algorithm of AI therapy does exactly this.

An online report about these digital therapies was titled: “‘Personalized Care Through Data Insights”.

This report described how AI excels at analysing large datasets to identify patterns and provide ‘personalized care’ to the distressed or troubled patient.

This comes largely in the form of suggestions for steering away from negative thinking and adopting positive and supportive self-help practices.

I have been trying to imagine the AI generated response ever being: “Well, now, shall we just think about that for a moment…”

I am repeating a quote from Kathy’s study, citing a patient of Paul Tournier’s who wrote: *‘Those who impose upon us their ready-made solutions, those who impose upon us their science or their theology, are incapable of healing us’*. (3)

I fear that some of the help generated by the digital innovations may offer practices and directives, but not actually heal, as is achieved in a real person-to-person encounter, which at times seems more of a mystery, and hard to measure.

At best, AI therapy is a facsimile of a relationship between therapist and client, which although giving some immediate relief – especially when someone feels desperate in the middle of the night – may not entirely succeed in stimulating longer term change and healing.

Professor Sherry Turkle (4) from MIT’s Technology and Health project, agrees with Tournier’s patient*:*

“What do we forget when we talk to machines? We forget what is special about being human. We forget what it means to have authentic conversation. Machines are programmed to have conversations “as if” they understood what the conversation is about. So, when we talk to them, we, too, are reduced and confined to the “as if”.

And, in my speciality, working largely with young people’s mental health, it is a huge task to challenge their addiction to the words of the social media, and YouTube celebrities whom they follow. This is their version of following “the sophists”. For them it is quite alarming to sit with silence, to allow whatever thoughts rise to the surface, and to wonder…

Not knowing, or inaction for them, can feel like an uncomfortable void. So, they turn to the screen or phone to fill that gap, with something interesting or entertaining. Believing that the avatar knows what they need, they are perhaps the most vulnerable group of AI therapy users.

I am not sure that the best solution then, is to provide more mental health “Apps” to continue their reliance on digital solace.

The best cases for the use of AI psychological support seems to point to these services being cheaper, available 24/7 and accessible through your smartphone. At times, it has to

be said, people using the services seem to feel they are talking to a real person, who cares about them, due to the ability of Generative AI to put all the pieces of their conversations together. (5. UKCP report)

Of course, this idea of embracing "not knowing" was proposed centuries ago by the anonymous 14th Century Christian Mystic who wrote to a student in the work: "The Cloud of Unknowing" where he advocates aiming towards "The Cloud of Forgetting" (meaning temporarily setting aside one's knowledge and intellect), and "The Cloud of Unknowing" (accepting that God dwells beyond human understanding).

We rely these days on so much data that is in "the Cloud", but this cloud – the Cloud of "*All* Knowing" - can leech out of us any sense that our own thoughts or intuitions have any meaning or significance. You will never 'know' as much as the data sphere with its zettabytes of data!

Or in the past world of Celtic Christian history, we hear about the somewhat alarming practice of *Peregrinatio*, or spiritual voyaging, where seafaring monks set sail, or pushed off in their small boats called coracles, with no rudder or map to determine where they would end up. This is how St Columba found the Scottish island of Iona, believing he would know his destination when he found it. These saints just **did not know**. They simply trusted that the Spirit blows where it wills.

This practice was called "*seeking the place of your resurrection".*

Helped by the Spirit of God

However, Paul also writes that we are not abandoned to a blank space where we are at a loss, confused or helpless. We also have the Spirit to help and guide us.

"The things God has prepared for those who love him –
these are the things God has revealed to us by his Spirit."

Things that are bigger and have more depth and more riches. Better than the philosophies of those compelling sophists, or indeed, the improved memory, or fitter body, or healthier lifestyle proposed by the highly successful social media stars of today.

But does the world of the Spirit only apply to our spiritual lives? Is there a split between knowledge of the world – science, human philosophy, law, medicine, geography etc and how God's Spirit operates?

Does the Spirit work within the digital world?

God gives the Spirit to enable us to understand spiritual things, to grasp the much larger picture of our lives than we imagine. but what if these words also apply to everything – every kind of understanding. After all, the spirit of God is in all things and through all things not just set aside to help with issues of personal faith.

"But there is a spirit in man: and the inspiration of the Almighty giveth them understanding."
Job 32 : v8

"*The Spirit searches all things, even the deep things of God. [11] For who knows a person's thoughts except their own spirit within them? In the same way no one knows the thoughts of God except the Spirit of God."*

I am wondering if this consideration "who knows?" also has something to say to us who aim to practice Medicine of the Person – where true healing and support of people happens within relationship – the vital addition to the knowledge of best treatment options - drugs, therapies, surgeries etc

We may not know, and certainly the digital tools and data bases do not precisely "know a person's thoughts".

"*[11] For who knows a person's thoughts except their own spirit within them?"*

So, a patient, a person who is sick, or is in mental turmoil, may have a knowledge of their own condition that may not be immediately apparent to us.

This knowledge of themselves may be deeper and far more complex than could be determined by an algorithm which predicts "how to treat depression" or maximises "patient satisfaction".

What do they need from us?

We are offered a portion of the Spirit's understanding. We can be simply human, as they too, are simply human.

"*[12] What we have received is not the spirit of the world, but the Spirit who is from God."*

… "*And the fruit of the Spirit is love, joy, peace, patience, kindness, goodness, faithfulness."*
Galatians 5: v22

Quite often, when I am sitting with a patient where I am puzzled, or feel stuck in the work, I feel myself rushing to explain their condition to grasp the nearest bit of knowledge to hand.

Then I try to say to myself, "I don't know" and maybe pause to ask the Spirit to work.

I think there has to be a state of uncertainty in order to reach out for extra help, extra understanding.

And then the requirement of me is to listen, and heed the inner prompting which, in itself, is a calming and focussing process.

And sometimes, when the patient themselves is in the grip of fear of the unknown, we must simply stay with them and accompany them with empathy and compassion.

An open mind, an open heart and the willingness to not know all the answers…a different kind of knowing. A kind of love.

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4. **Sherry Turkle,** “Reclaiming Conversation: The Power of Talk in a Digital Age” (2016) New York, Penguin.
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