



RELIGIOUS WELLNESS AND TRAUMA: ONE FAMILY'S EXPERIENCE

At some time in their life, every person is faced with trauma. What form the trauma takes is not the issue. When it occurs it is an awful experience.

Generally these people are not adequately prepared to handle the trauma in such a way as to minimize the devastation inherent within the very nature of the experience. *The Meaning of Wholeness: Disability and Spiritual Dignity* was the title of a weekend theology seminar at Conrad Grebel College, University of Waterloo in Waterloo, Ontario, Canada. The seminar focused on issues relating to persons with physical disabilities and was sponsored by the Mennonite Central Committee, (Handicap Ministries Section). It attracted theologians and other interested church people from across North America.

The accompanying three presentations formed the initial discussion for the weekend deliberations. The papers, as a unit, are published not to promote or negate any particular religious attitude or spiritual issue, rather to demonstrate the impact of religion upon the lives of individuals and their families.

RAYMOND REMPEL, B.A., MS.

Throughout his lifetime Ray has been an active member of the Mennonite faith community. After their son, Jeremy's accident, along with his wife Elsie, they co-founded the Head Injury Association of Niagara. In 1986 he left a successful career as an insurance broker and was the co-founder and executive director of the Ontario Brain Injury Association. He has also been a leader in the ongoing development of a national head injury association in Canada and more recently has taken a leading role in the organization of an international symposium designed to study the status of support for persons who live with the effects of traumatic brain injury. Ray has become a leading advocate and spokesperson for Canadians who live with the effects of Traumatic Brain Injury.

JEREMY REMPEL, AGE 16.

Jeremy was traumatically brain-injured in a bicycle/automobile accident at age nine. Following a lengthy period of coma he has gradually re-learned and recaptured much of what he once knew and could do. With the support of

numerous healthcare professionals, his parents and his siblings Sheri, Kimberly, and Vic, along with his current trainer/coach Lori Simpson he has been able to develop a full and exciting life.

Sustaining partial paraplegia, and hemiplegia, he lost significant levels of fine motor skills. He has difficulty with balance and walks somewhat. He has though, discovered the freedom that a good ultra-light wheelchair can provide. Jeremy has learned well to live in a world where his biggest disabilities, inconsistent memory function, and confusion with directions and numbers are very significant handicapping conditions.

High on the list of what he considers important in life are sports and music. As an elite athlete and a wheelchair sprinter, he has successfully represented Canada in Europe and throughout North America. In the off-season Jeremy competes in 10K road races.

Jeremy is a student at the area high school in Niagara-on-the-Lake. Along with his family he attends a local Mennonite church in Niagara.

JEREMY REMPEL. HIGH SCHOOL STUDENT, WORLD CLASS CEREBRAL PALSY WHEEL CHAIR ATHLETE

Hello, my name is Jeremy Rempel. Seven years ago I was in a motor vehicle-bicycle accident which left me with some deficits. A deficit is a problem that you might have with various parts of your body and various functions that you might regularly perform. Earlier, on coming out of coma and in the years following my accident, my deficits were much more severe and obvious. There was a time when I could not speak and was paralyzed from the neck down. I had many people working on me. I was bedridden for many months. During this time I had very little to do.

As is common with head injured persons I have very few memories from that acute and post-acute phase of my recovery. The diary that was kept during this time says that when a friend asked me what I thought about while lying in bed all day long my response was, "God". People frequently imply that I must be bitter about my accident.

That kind of comment really interests me. There were times when I was younger that I sometimes would have those thoughts. But I have come to realize that being a complete person does not mean that you have to run, or be good at math or be able to understand instructions that you read in a book. I think that I used to take things for granted. I now realize that anybody could become disabled at any time in their life. So we enjoy life with what we have.

This kind of thinking has given me an opportunity to be part of the fastest CP relay team in the world. I have worked out five days a week for the past couple of years with my coach who is Lori Simpson. On really cold days I pump weights and in summer I wheel around a track.

Two summers ago I was in the World Games in Europe. Our men's relay team made a new world record in the 4 by 100 meter relay. Then we flew home with the gold. I have also been picked to be on the shadow team for the Olympics in Seoul Korea in '88 which is a big honour for me. Along with track, I also play on our school hockey team who have had the honour of playing the Calgary Flames. And every time we play them we beat them. The reason we beat them all the time is because they do not know how to use their chairs worth beans. We have also been involved in hockey tournaments.

Through this I have been able to become best friends with Eric Averink. Eric is a classmate of mine. Not many people are as physically disabled as he is. Nobody has a sense of humour or personality like him. He is also a great guy who is a very smart and intelligent person. I could go and recount to you the things that fill my life. I think that

if you look at what I can't do and then look at what you can't do we would both have some pretty big limitations. As well, when we look at what we can do we have some awesome opportunities.

RAYMOND G. REMPEL, B.A., M.A. PARENT OF PHYSICALLY DISABLED CHILD, CO-FOUNDER, ONTARIO BRAIN INJURY ASSOCIATION

Where does one begin? Jeremy and I are both somewhat overwhelmed with the opportunity that the organizing committee has given us. To have an opportunity to articulate our theology, as it has developed to this point in our journey, is "good stuff".

I must preface what will be said tonight with a little history of the Rempel family and their "walk" up until August 27th, 1980. Ours was a family that had been faithful attendees and participants in Mennonite congregations from the time of our marriage in 1962. As the children developed, they grew up with Sunday School, Vacation Bible School and Church Youth Groups and took advantage of whatever opportunities were presented to them through the church. My personal education included, among other things, a Liberal Arts Degree from Tabor College, a Mennonite Liberal Arts College in Central Kansas.

Customary to Mennonite interpretation of discipleship, Elsie and I had both been baptized upon the confession of our faith. Subsequent to Jeremy's accident both of his older sisters received baptism as well. Whatever it was we had been taught, we believed.

Interestingly, in retrospect, when in crisis, as we began to ferret out what, in fact, we did believe, we had difficulty sorting out what we had learned through our Anabaptist teachings and what we had assimilated from the religious milieu that had been a part of our experience to that point in time. It would be naive to imply that it is only what one is exposed to out of their inherited religious experience that has validity. However, I would indicate that, what we did not have to fall back upon, was a published review of what had systematically developed and evolved within our religious community, as a theology of suffering or, if you may, disability, into which we had grown up and which we had embraced as our own. What had we been exposed to at that period in time, and what were the messages that we were receiving at the time of Jeremy's accident and during the ensuing months and years? Our children had been taught, within the "hallowed walls," so it had to be true, that "God answers prayer; Jesus will protect you; there really are guardian angels; and God is a righteous God and does rightly punish those who indeed need punishment." Further, "God is in control and he allows things to work out for your 'good' in ways that we do not always understand." Perhaps most pervasive of all, was that bit of conventional wisdom that went, "Did you ever think that perhaps God needs Jeremy more than you".

As parents we were aware of the concept of laying on of hands and of the mysticism that surrounds some of the thinking associated with the concept. We had also heard the sermons on "faith", trust in God, and very conflicting interpretations of the themes coming out of the stories of Job. We "knew" that God does not give you burdens greater than that you can bear. We had heard about how God can and does heal when he deems healing to be "to his glory." We were asked to "search our hearts and to determine what it was that God was 'trying' to teach us" through this horrible experience.

Immediately following the accident and at perhaps our most vulnerable time, we were encouraged to initiate a "healing" service for Jeremy. We were regularly being assured that "strange and mighty things can be accomplished through prayer".

I could go on and recount for you additional comments and philosophies that were presented to us, or that came back to mind from sermons, discussions and various forums of the past. You, however, have the picture of the situation in which we found ourselves. Another area that needs to be mentioned as an item to be discussed at some depth is the glib statement that, "You are lucky that you have your faith in God to see you through this time." Other variations of this theme are, "What do people who have no faith in God do during a crisis like this?" and "Without God you surely couldn't go on."

Now I'm not here to determine for you all those in this world who have faith in God and those who don't have faith in God. What I will tell you is that, very quickly on, and even today we continue to meet persons who have lived through and are in the process of living through horrendous trauma and who have no interest in discussing or admitting to a faith in God or a reliance on that "inner source of strength" that is alleged to be available through Him. And they are living very well!

Sunday, August 24, 1980 was a very typical day in the lives of the Rempel family of Town Line Road, Niagara-on-the-Lake. As a family, we attended church and Sunday School in the morning, had a good time with friends in the afternoon and evening and called it a good day! Monday, the 25th was a big day. Number one son and only son, Jeremy Michael Rempel, woke up to be nine years old. Both Mom and Dad had to work on Monday so we planned for a birthday party for Wednesday, the 27th, a day that we could both "take off." The Party was to begin at 1:30. There were to be about 8 kids in attendance.

Johnny and Jimmy lived nearby so they arrived early. An ideal activity for these three waiting youths was to "do a bit of bike riding." At about the same time and at the same location, a young driver of a pick-up truck and her sister were engaged in conversation as they travelled down Town Line Road. Witnesses recount that Jeremy was flung to the side of the road and into the ditch, stood up for a brief moment, and then collapsed.

What happened in the ensuing months? Was it God who "saw him through" to only partial recovery? Was it God who created this miracle of partial recovery? Was it God who allowed this event to occur? Did God guide the hands of the skilful Hindu neurosurgeon? If God was in the corner of the neurosurgeon why didn't He bless the rehab people as well? Did God in fact, guide Jeremy through partial rehab recovery and then give up? Was it that He gave up because one or more of us had started to doubt? Some people have said that the rationale for the existence of the structure of "the church" is that "the body", as brothers and sisters are there for support, companionship and nurture. In our case, we experienced this as reality in a very powerful way through the creation of the 'Bedside Brigade', a group of persons, some from our congregation, but many from the larger community, who faithfully made the hour long trip to the hospital twice daily for the numerous months involved. This was through the initiation of a few friends. We have seen a much more common theme, however, in our experiences of the past seven years. What we have observed, is that, in many instances some of our very needful church friends, and associates go "lacking" with virtually none of this "caring" input from those of us who make up the church body. In fact, there could be said to be a kind of accusatory attitude in many instances that negate the opportunity to develop support.

So what was our experience? It is extremely difficult to answer that question. As stated earlier, it has been frustrating not to have at our fingertips a layman's guide to our systematic theology. One of our early conflicts was, "how do we pray?" We were at the stage, rightly or wrongly, where we viewed prayer as a pretty ineffective means of reasonable communication with God. One could say that public prayer was, in our minds, akin to the level of conversation that you can have with any friend in a roomful of people. Meaningful dialogue in most settings is an experience restricted to pretty small groups, generally occurring in groups of two.

An additional factor that weighed heavily on us was that God had put his laws, the laws of nature, into effect. We had just been witness to some of the least pleasant results of these laws. Would he now abort some of these Laws that had been in effect for millions of years because the Rempel family had been devastated?

What brought this into focus for me was Mrs. Changsavang. The Changsavang family were Laotian refugees sponsored into Canada by the Bethany Mennonite Church. They arrived the same summer as Jeremy's accident. Mrs. Changsavang came with a husband and son who had been psychologically devastated, shell-shocked to the layman, and four other apparently healthy children. In those many hours, days and weeks at the I.C.U., I would think of her, and her friends and relatives still in Laos. Then, frequently my mind would wander to the kinds of grief and trauma that mankind has been party to since the development of the frontal lobe. I knew in my mind that as much as I'd have liked a miracle cure, I did not have the right to wish it, to test our relationship with God in that way. In my understanding, I would have been discounting my view of God.

I have been asked, "Why then believe? What good is God if you can't count on Him when you need Him?"

You have just listened to what Jeremy had to say. Did you hear him? He talked about himself as a total being, a fulfilled and complete person. "But he's disabled," you say, "He can't be complete as long as he has these obvious afflictions." You're right, he doesn't look as though he has just stepped out from the pages of the Sears catalogue. He wears no polyester suit and the left shoulder is not quite in line with the right shoulder. In fact, he is quite significantly left-side hemiplegic. Why can he speak about himself as a whole and healthy person?

The more time that I spent talking with God and some of our mutual friends the more I have come to realize that Jeremy, better than I, can intelligently speak to the issue of wholeness. You see, he, more vividly than I, has experienced brokenness. I think that I have observed both of these phenomena, but I don't seem to have lived both. So I can speak to the issue based upon my observations but he can speak scientifically.

A good friend who is wheelchair bound, when confronted with the opportunity for a prayer of healing, responded, "You're much too late, I've been healed." "Well then get up and walk," was the reply. "I don't have to walk any more, I've been healed," was the never to be comprehended response. So, in answer to my friend who asks "what good then is God to you," my response is that He gives me dignity and purpose as one of His children.

A question that is equally important, is "What good am I to God?" We have come to discover that a part of glorifying Him is to enhance what He set in motion, and further, to be a part of His dynamic energy and desire for all of mankind. It's exciting to discover that my relationship is not in place so as to take advantage of Him. It is exciting to see how awesome some of the spin-off benefits of that relationship are to us.

What is wholeness? Is it only a healthy mind and a healthy body at age 23? Face it, by 35 you tire a little more quickly. By 50 the back frequently acts up, and often by age 30 professional athletes can no longer keep up with their younger peers. So when do we become "broken?" I believe that brokenness, and wholeness, coexist within each of us. What we unfortunately too often do is to deny the "brokenness" dimension of our existence.

I said that Jeremy can speak to the subject with more validity than I can. Though they have both always been part of me, I've had the questionable luxury of "getting away with" being able to deny the reality of brokenness.

So how did we handle the issue of "prayers of healing?" We responded that we had expressed our feelings and desires to God and had received the assurance that, in his personal way, Jeremy would be able to enjoy life. To insist to God that this was not good enough, would, in our mind, have been an affront to God, and we respected Him too much to get deliberately involved in that kind of confrontation. In some of the more inane comments, we

just bluntly stated that, for example, if God wanted to “teach us lessons”, he wouldn’t zap some young innocent kid.

And what about that “inner strength” available to those who believe? Years ago a non-churchgoing friend who works in I.C.U. had told us of one of the most horrific death scenes she had ever seen. It was the death of an elderly local minister and the awfulness of that experience to the family in attendance. As we talked about her experience, we decided that we who are left are selfish by nature, and sometimes, for whatever reason, have a hard time “letting go.”

With that and many other experiences to draw on, in those early unsure weeks we often spoke with God and others about those good nine years that we’d had, and how so many people don’t have nine good years out of a much longer lifetime. We met other people who, though not expressing any religious sentiment, spoke about the quality of relationships and their equal fragility. What appears to us to have more validity than the mystical “faith” concept is the quality of the relationship of the parties involved. And if God happens to be one of the parties in that relationship, so much better and secure it will be.

I could go on. However, my task, as I understand it, was to present to you our journey, albeit a sketchy journey and in some ways a journey just barely begun. I do, in summary, wish to say a few more things. You, as church leadership, over the centuries, have encouraged us to “read the Word.” To encourage us to read the Word without the necessary teaching and assistance in interpretation is a somewhat irresponsible position. By default, without Anabaptist interpretation, many of our laity, as well as some of our clergy, have taken the line of least resistance and have incorporated into their theology anything that has seemed to be similar and popular.

It appears as though we have opted for the easy answers and that there is little room for expressions of doubt, emotion or fear and anger. If one cannot ascribe to the cliché of Christianity, as practiced in most settings, he quickly becomes isolated.

My perception is that there are too many times in one’s spiritual walk that neither black nor white are acceptable shadings. Our family has experienced this. My plea to you, as theology leaders, students of scripture and pastoral clergy, is to not allow us the false security of a glib and selfish theology. So much of contemporary Christian teaching appears to emphasize a type of cheap, “what’s in it for me” kind of theology. Our family experience has been that, in crisis, this type of theology was truly counterproductive. It may be easy to teach. It may be popular. We had to find more. We are sure that we discovered that what is currently popular, is totally inadequate. Rather than letting us settle for something so woefully inadequate, please lead us back in time to where we are able to appreciate and explore the excitement of the mysteries of God, His Son and their counterpart, the Holy Spirit.

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Ray and Jeremy Rempel’s presentations together raise the central questions about suffering and disability with which any theology or any philosophy of life must come to grips.

They raise the age-old problem of evil and suffering which has plagued believers in God’s goodness and omnipotence throughout history, and which seems never to find a fully satisfactory answer. But they are not ready to accept many of the glib and easy answers to this question, which abound in our society, even among Christians.

They are right to point out that Christian theology in general, and Mennonite theology in particular, has not been very helpful to its members in providing satisfactory answers or directions.

They raise the question too, of what it means to say that someone is “whole” or “disabled” (“healed” or “unhealed”).

They raise the question of the different images society has of “wholeness” and “disability”, as well as the different images those who are “disabled” in some way have of themselves.

One cannot help but be profoundly moved by the way in which these family members tell their story and interpret it for themselves and for us. We are moved by the realism and honesty in their story, as well as by the faith and courage. There is no attempt to deny the reality and the inexplicability of the suffering they have had to live through, but neither is there a giving in to despair. There is no giving in to the temptations of the martyr complex on the one hand, or the hero complex on the other.

These two issues—the problem of evil and suffering, and the problem of the images of wholeness and disability are very closely intertwined. This is because one way in which people deal with the problem of suffering is to see it always as something which God either actively inflicts upon people as judgement for sin, or passively chooses not to remove or heal because of some lack of faith or other moral failure. The first view is a part of the “Suffering Is Really a Good In Disguise” theory. The second is more subtle. It does not see God as the source of suffering, and even sees God as an enemy of suffering—the Healer, the Great Physician. Yet it sees God’s choice not to heal as due to our moral failure. This viewpoint is held by many Christians in our day, who believe that: 1) It is God’s will that we should not suffer disease or disability, 2) God is able to heal all suffering and disability, and 3) if we have enough faith, God will heal us.

Again and again this view leads to self-deception, guilt, or despair, because often healing does not come. What then can one conclude when healing does not come? One must either heap upon oneself the guilty burden of faithlessness and self-blame, or claim a false healing where it has not been granted. Or, as sometimes happens, it leads to despair and doubt, even hatred of God. This is the response of the “friend” whom Ray Rempel quotes as asking, “What good then is God to you if you can’t count on Him when you need Him?”

But healing does not always come in the way we want it to come, if at all. I doubt that the responsibility for this can be laid with either God or the suffering victim. I find myself in complete identification with Ray in his poignant observation that the family felt the inappropriateness of demanding God’s “healing” for Jeremy in the context of their awareness of the suffering of the Laotian refugee family who had come into their church. The Rempel’s recognition that they had no greater claim upon God for the healing of their suffering than did this family, whose experiences of horror and tragic death could never be recompensed and whose loved ones could never be restored, is an important one. It reminds us that, whatever the power of God to prevent and remove evil in this world, that power is not exercised always or solely on behalf of those who deserve it or request it, in the way they request it. In this world the innocent and the righteous do indeed suffer along with everyone else, and the reasons for this are hidden from us. If anything on this subject can be learned from the Book of Job, it is this sense of humility about our ability to answer this vexing question. Our consolation as Christians lies in the fact that God, too, experiences suffering and evil. This is the powerful message of the Christian symbol of the suffering Christ, the Son of God, on the cross.

What about our concepts of “disability” and “wholeness?” What do these words mean for us? How do they condition the way we view ourselves and others upon whom the vagaries of life have imposed certain limitations? The first thing to note here is that the words “health,” “wholeness,” “illness,” “disability,” and related terms are

not scientific terms that describe what is biologically “natural” or “unnatural.” We often assume that they are, and so we also assume that there is some natural definition of what it is to be fully “whole” or “healthy.”

But this is not so. These words are highly value-laden. They reflect hidden judgements of what we want ourselves to be and what things we want to do. They reflect, in other words, an image of an “ideal” person. This image is usually a social construction—it is put forward in the literature, the film, and the mass media of the society. It is personified in the society’s heroes, the actors and actresses, the sports heroes, and the other models of social or economic success.” These judgements vary greatly from age to age and from culture to culture. The ideal of femininity portrayed by the slender, small-hipped model of fashion and movie magazines would be viewed by most cultures of the past, or of other parts of the world as truly “sickly.” They would be “disabled” because of the unsuitability of such bodies for both childbearing and surviving long periods of food shortages or cold. Yet we in a society with different needs and values consider obesity virtually an illness.

That sickness and disability are relative to our expectations is illustrated by the following story. A doctor answers her phone to hear an agitated voice at the other end of the line. “Doctor, please come right away. I was planning to leave on a ski trip today, but when I woke up my muscles were so stiff and sore I could hardly get out of bed. Once I got up I was so weak I could hardly bend over to pack my suitcase, and when it was packed I could barely lift it off the floor. Is there anything you can prescribe for me?” “First,” said the doctor, “Let me get some information about you. What is your weight?” “175 pounds,” was the reply. “Your age?” “I’ll be 97 next month.”

The point of this story is its illustration of the fact that “health” and “wholeness” are relative terms, at least in part. They are relative to what our values are—what we want to accomplish at any given time. And the social ideals of health and “wholeness” we hold up and often worship—the Playboy ideal of trim, youthful, unblemished sexuality, the TV images of beauty and handsomeness that excludes any excess flesh or wrinkles at any of the wrong places, which identifies happiness with a certain narrow range of activities—usually requiring youthful, athletic bodies and lots of beer (the contradiction is rarely noticed); which defines as “diseases” to be treated and cured, both fertility (for which various birth control technologies are the “cure”) and infertility (for which in vitro fertilization, artificial insemination, and surrogate mothers are the “cure”), as well as a host of other physical and mental states from bad breath and split ends to depression and menstruation. Of course, all of these things are “illnesses” or “disabilities” only because they are obstacles in the path of the goals adopted by modern Western culture, obstacles for which we have discovered medical “cures.”

Thus, “disability” need not mean the same thing as “suffering” nor the same thing as “evil”, even though it usually brings with it a greater or lesser amount of suffering. This is the important point in Jeremy’s story about how he has turned disability in one area into ability in another, and in Ray’s story about the friend in the wheelchair who had already claimed healing. These are direct challenges to our human images about wholeness and who is “healthy”.

This is why Ray Rempel’s use of the word “brokenness” to refer to what has happened to Jeremy and his family is a good one—better than “disability” or “handicap.” It is a good word because it reflects two important aspects of the reality which they, and all of us who experience these things, have to face.

First of all, “brokenness” connotes the fact that the afflictions that befall our bodies and minds, which we call “illness” and “disability,” involve the breaking up of our aspirations and goals, as well as the smashing of our ideal image of ourselves. Jeremy’s accident involved not just the breaking of a part of his body, but the destruction of many of the hopes and dreams that he had set for himself and that had been set for him by his family and community. The things we count as “illness” and “disability” are the things that interfere with the goals we have. If

your goals include running the 100 metres in the Olympics, then you will see your flat feet as a “disability” or “illness.” If, however your primary goal is to avoid being drafted into the army, your flat feet are a distinct asset.

This, of course, is why our society is greatly expanding the concept of “illness.” We consider things to be illnesses that years ago were not viewed as such. This is due in part to the fact that medical technology has advanced so rapidly, giving us the ability to alleviate the conditions of our bodies and minds that interfere with our personal goals and ideals. Before we discovered plastic surgery techniques, we didn’t consider “cauliflower ears,” wrinkled facial skin, or other drooping parts of the anatomy to be subjects for medical therapy, as we increasingly do. Soon, we shall be calling these things “illnesses,” just as we have come to call the depression experienced by the wives of upwardly mobile junior executives who are constantly uprooted and moved from community to community as the company dictates. We call it an “illness” because we have discovered the “cure”—miracle drugs like valium.

Second, the word “brokenness” is a good one because it captures the reality of the pain and the suffering produced when our ideals of “wholeness” and the fulfilled life are shattered to pieces. We human beings cling tightly to the ideals for which we strive. This is just because part of the very definition of our humanness—that which distinguishes us from all other animal life—is the fact that we have ideals that we formulate and set for ourselves, and which provide the very meaning of our existence. The breaking of these dreams, therefore, goes to the very heart of our human existence. It can undermine all that we think makes life worth living. The accident or the illness which removes the possibility of being what we want to be can be felt as worse than death itself. This is precisely because it is a kind of death—the death of the person we think we are or hope to become. The word “brokenness” captures the pain and trauma of this tragic reality.

All of us have experienced this kind of brokenness in our lives. It is not just the brokenness of the limitations forced upon us by accident or disease. There are the limitations of body forced upon us by circumstances—by poverty, discrimination, broken relationships, war, political oppression, and so on. The world is full of people whose dreams and ideals have been shattered by these factors. We have all been “disabled” from doing the things we dreamed of doing and believed we had a “right” to do—some of us much more than others, of course.

When this happens to us, we can either despair, by continuing to embrace our broken, unattainable goals, and in so doing, define ourselves forever as sick and disabled, or we can redefine our goals, taking into account our new set of limitations. This is not an easy thing to do. As we have already said, the giving up of a dream is, in fact, one of the most difficult things for a human being to do. This is one of the reasons why it is so difficult to build a new ideal and to formulate a new vision of what will give meaning to one’s existence.

This is what is so moving in Jeremy’s story. Both Jeremy and his father bear witness to the reality of the pain and the suffering which comes with the breaking of an ideal of wholeness. But they also give witness to the fact that there is more than one ideal of wholeness and meaningful life. Jeremy clearly has been able to reconstruct his ideals in light of the limitations forced upon him by circumstances (yes, we Christians too can talk of “sheer circumstances” for not all that befalls us is God’s doing. Remember that God too struggles against evil and suffers evil). He can claim “healing” because he has rediscovered a new “wholeness” to his life. This is no sham wholeness, no self-deception that the old ideal can still be attained. It is a renewal of the human spirit made possible, with God’s help, in the rediscovery of what is valuable. Jeremy has discovered that he is “whole” in ways that others around him, even the professional hockey players who are among the idols of our society, are not whole. “They don’t know how to use their [wheel]chairs worth beans.” “I have come to realize,” he says, “that being a complete person does not mean that you have to run, or be good at math or be able to understand the directions I read in a book.”

He is, of course, exactly right. Those things are part of being a “complete human being” only for those who think they are necessary components of a meaningful human life. They may be necessary components in our society of being the top salesperson for IBM, or the winner of a Hollywood “Oscar.” But they are not the necessary components of a meaningful human life. It is not an easy thing to identify those things that are essential to meaningful human life, but Jeremy’s dad is surely right when he suggests that relationships with others may be one of the most important ones. This is one that seems to be pushed to the side of many of our prevailing social ideals of “wholeness.”

Finally, I think Ray Rempel expressed the central source of inspiration for the Christian who experiences the serious brokenness of an ideal of wholeness. For while we are always tempted in such situations to ask of God “What good are you to me now,” the question which goes to the heart of the rebuilding of a new life of meaning is really “What good am I to God?” There are many ways to serve God and in so doing to serve one’s neighbour. It may not be the way we originally hoped we would do it, but it can be another way that God preserves for us, even within the limitations imposed upon us by the vagaries of life. This is our faith. It is a faith which I see reflected in Jeremy Rempel’s story.

Authors: Jeremy Rempel, Raymond G. Rempel and Conrad Brunk .