

# The Christian Science Tradition

## Religious Beliefs and Healthcare Decisions

Edited by Deborah Abbott

Revised by Stephen Gottschalk

The Church of Christ, Scientist, was founded in 1879 and reorganized in 1892 by Mary Baker Eddy, a Congregationalist who had experienced a dramatic healing in 1866 while reading a biblical passage about Jesus' healing powers. For many years, Eddy had had limited success in achieving health using a wide variety of methods, most notably homeopathy and the mind-cure methods of Maine healer Phineas Quimby. The moment of her healing represented a breakthrough not only in her search for health but in her understanding of the nature of reality. The essence of her 1866 discovery, which she called Christian Science, was that reality is, in truth, spiritual, and that the material world is only the human mind's primitive, distorted view of reality, which she understood as God's kingdom, always at hand. Eddy spent the next several years developing an extensive theology and metaphysics to help others understand the implications of her discovery; the first edition of her magnum opus, *Science and Health with Key to the Scriptures*, was published in 1875 under the title *Science and Health*.

The metaphysical and theological basis of Christian Science is distinctive; comprehending it can require time and careful study. Adherents of Christian Science, called Scientists, are considered "students" and are

### Contents.....

The Individual and the Patient-Caregiver Relationship	5
Family, Sexuality, and Procreation	6
Genetics	8
Organ and Tissue Transplantation	8
Mental Health	9
Medical Experimentation and Research	9
Death and Dying	10
Special Concerns	11



Part of the "Religious Traditions and Healthcare Decisions" handbook series published by the Park Ridge Center for the Study of Health, Faith, and Ethics

---

*Deborah Abbott, M.P.H., formerly with the Park Ridge Center, is currently affiliated with Georgia State University.*

*Stephen Gottschalk, Ph.D., is a scholar in the field of religious studies, specializing in Christian Science.*

expected to spend time each day studying the Bible and *Science and Health*. Through this study, they seek to change their view of reality and to understand more fully the true nature of God. One of the major principles of Christian Science is that because God is not the cause of sin, sickness, and disharmony, these can be overcome through a deeper understanding of divine truth. Christian Science teaches that God could not create disharmony; therefore, because God is the creator of all things, it follows that disharmony is not in accord with God's will and has no ontological reality—however real it seems to conventional human perception. Another major principle is that the miracles of Jesus (including his healings, resurrection, and ascension) exemplify ultimate freedom from the bondage of physical laws and that we, too, should strive to free ourselves from the delusion that mortality and the suffering it entails are divinely instituted and in consonance with God's will. Jesus' miracles do not represent exceptions to the laws of nature but rather illustrate what can happen when one is able to see the reality of God shining through the difficulties that only appear to be true. When Jesus was confronted with a diseased person, for instance, he did not see the physical appearance as a fixed reality; rather, he discerned the presence of a spiritual individual perfectly created by God. The clarity of Jesus' vision brought immediate health to the individual. To Christian Scientists, Jesus represents perfect understanding of and harmony with God and therefore stands as the model for all time.

Christian Science, though distinct in many ways, has more links to traditional Christianity than its critics (and some of its adherents) may have supposed. Mrs. Eddy, for example, teaches that the Father, Son, and Holy Ghost are three aspects or offices of one God, signifying God as Father-Mother; Christ as divine manhood; and the Holy Comforter as God's sustaining power, which Mrs. Eddy believes has been revealed through Christian Science. Christian Science is "Christian" in that it grew out of the Christian tradition, relies heavily on the Bible, and

upholds Jesus as the Savior and "Way-shower"; it has always distinguished itself from other metaphysical traditions (to which it is often compared) by its focus on Christ Jesus and its Christian roots, and especially by its emphasis on the need for redemption. Christian Science is "scientific" in that Eddy believed that her discovery embodied a truth so real that it could be repeatedly verified by anyone willing to practice its "divine Principle" according to its fixed rules for demonstration.

## FUNDAMENTAL BELIEFS CONCERNING HEALTH CARE

Christian Scientists believe that all illness and suffering are ultimately illusory. Obviously, Scientists feel sick and experience disease as others do, but they believe illness results from a mistaken view of the nature of reality, indicating a need for spiritual renewal. One prominent Christian Scientist has framed the issue in this way:

This [understanding] does not deny that within a strictly physical framework of causation, certain conclusions are warranted—for example, that many infections have a bacterial origin. And a Christian Scientist would not presume to question the accuracy from a medical standpoint of a competent diagnosis. What a Christian Scientist does question is the physical framework of causation itself . . . To take a medical analogy, a Christian Scientist regards all forms of disease as symptomatic of an underlying condition that needs to be healed. This is the healing, or spiritual wholeness, that he or she seeks to effect through prayer.<sup>1</sup>

Prayers therefore focus not on the symptom, the sickness, or disease, but rather on the underlying condition—flawed human perception and estrangement from God. Through their prayers and practices, Christian Scientists hope to align human understanding with God's divine, disease-free reality, thereby restoring spirituality to the

human spirit and destroying the illusion of disease. A renewed relationship with God is the primary goal. Physical healing is simply a natural by-product. Eddy wrote, "Healing physical sickness is the smallest part of Christian Science. It is only the bugle-call to thought and action, in the higher range of infinite goodness. The emphatic purpose of Christian Science is the healing of sin; and this task, sometimes, may be harder than the cure of disease; because, while mortals love to sin, they do not love to be sick."<sup>2</sup> Despite her view of bodily healing as secondary to the healing of sin, Eddy still saw it as a vital part of Christian salvation. Christian Science periodicals regularly publish dramatic personal accounts of healing. Since 1900, over 53,900 such accounts have been published, most involving physical healing.<sup>3</sup>

According to Christian Science, drugs do not have real power; they are effective only insofar as they are supported by general human faith in material cause and effect. "Certain results, supposed to proceed from drugs, are really caused by the faith in them which the false human consciousness is educated to feel."<sup>4</sup> Because this faith is fundamentally misguided, the effect can only be temporary. Eddy explained, "A hypodermic injection of morphine is administered to a patient, and in twenty minutes the sufferer is quietly asleep. To him there is no longer any pain. Yet any physician—allopathic, homoeopathic, botanic, eclectic—will tell you that the troublesome material cause is unremoved, and that when the soporific influence of the opium is exhausted, the patient will find himself in the same pain, unless the belief which occasions the pain has meanwhile been changed."<sup>5</sup>

Christian Scientists and others in need of healing often rely on Christian Science practitioners, professionals who are committed to the ministry of healing. This ministry involves consultation with the sick, discussion of Christian Science principles, and prayer. In addition to treating physical ailments, practitioners often treat alcoholism, anxiety, stress,

family difficulties, and other such problems. All practitioners listed in Christian Science periodicals have undergone an intensive two-week course of training and are committed to full-time ministry. Consultation with a practitioner often occurs over the telephone, and he or she normally receives a modest fee.

Christian Science nurses complement the work of practitioners with nonmedical physical care. They provide spiritual support; feed and bathe patients; help patients use canes, walkers, and wheelchairs; prepare meals; and provide other nonmedical care. Especially important is their mission of maintaining a mental atmosphere conducive to spiritual healing. Christian Science nurses do not receive any information about medication or physical therapy as part of their training. (See "Pain control and palliative care," below.)

More than thirty Christian Science nursing homes and sanatoria are located in the United States and Canada. Most major health insurance companies cover the cost of Christian Science care, including practitioners' fees; unreimbursed payments are deductible as medical expenses for the purposes of federal income tax assessment.<sup>6</sup>

Among Scientists, sole reliance on Christian Science treatment is clearly preferred over the use of medicine and medical treatments, although individual Christian Scientists are permitted to decide for themselves which kind of care they receive. Christian Science teaches, however, that while both medicine and Christian Science seek the healing of the patient, they rest on very different bases and are therefore incompatible with each other in practical situations. It makes little sense, Scientists believe, to administer medical treatment to a patient while at the same time denying the ultimate reality of matter and the reality of material cause and effect, which is the basis of medical treatment.

Therefore, the two methods should not be used simultaneously—not to satisfy some standard of "purity," but for the welfare of the patient. If anyone under Christian Science treatment chooses to seek medical treatment, the

practitioner will discontinue work on the case, although he or she may still visit or pray for the patient in a general way. If a practitioner chooses to seek medical care personally, the practitioner must temporarily remove his or her name from practitioner listings.

The strong tradition of rejecting modern medicine does not apply in all situations. Christian Scientists regularly engage the services of medical professionals under certain circumstances, most notably in childbirth. Many Scientists either give birth in a hospital or arrange to have a doctor or certified midwife in attendance at home births; if complications arise, Scientists may accept a variety of drugs or other medical treatments, including cesarean sections. Eddy recommended medical oversight of labor following a widely publicized 1888 incident in which a mother and child died while under the care of a Christian Science practitioner, who was, in this case, the mother of the patient; Eddy held that the practitioner had not taken the requisite medical training to handle the case professionally. Other situations in which Christian Scientists commonly interact with health officials and professionals include receiving legally required vaccines (unless legal exemption is available), obeying public health laws involving quarantines and the reporting of infectious and communicable diseases, participating in mandatory physical exams, and using the services of dentists; many employ doctors to set bones and will use narcotics to quell severe pain long enough to apply Christian Science methods.<sup>7</sup>

With respect to surgery and the setting of bones Eddy wrote, “Until the advancing age admits the efficacy and supremacy of Mind [i.e., accepts Christian Science], it is better for Christian Scientists to leave surgery and the adjustment of broken bones and dislocations to the fingers of a surgeon, while the mental healer confines himself chiefly to mental reconstruction and to the prevention of inflammation. Christian Science is always the most skillful surgeon, but surgery is the branch of its healing which will be last acknowledged.”<sup>8</sup> In practice, although many Christian Scientists allow medical professionals to set broken bones or extract teeth, Scientists commonly reject surgery in favor of treatment by Christian Science prayer. Scientists believe that eventually Christian Science principles will become widely accepted and traditional medicine will become more spiritually and less physically based.

#### **INSTITUTIONAL AUTHORITY AND INDIVIDUAL CONSCIENCE**

Christian Scientists believe that individuals must determine for themselves what they believe and practice. Those who choose to commit themselves to Christian Science are expected to learn and practice the teachings of the church as explained in the Christian Science textbook *Science and Health with Key to the Scriptures*. (See “Clergy, worship, and polity,” below.)

## THE INDIVIDUAL AND THE PATIENT-CAREGIVER RELATIONSHIP

**M**edical professionals should treat Christian Scientists with the same respect accorded to other patients, recognizing that they are less likely than other patients to be medically informed, to accept medical assumptions, or to accept medical treatments. Caregivers should also recognize that medical and hospital surroundings are unfamiliar to most Christian Scientists, and this unfamiliarity may in itself be disturbing to the patient and affect his case. When caring for Christian Scientists, medical professionals should share relevant medical knowledge, offer appropriate medical options and advice, and give Scientists the opportunity to decide how to proceed with their own care.

### CLINICAL ISSUES

#### *Self-determination and informed consent*

With respect to medical treatment, each individual is allowed to decide whether and when to seek medical treatment, although sole reliance on prayer is clearly preferred among Scientists. In lieu of giving informed consent to treatment, many will sign a waiver of medical treatment absolving the physician or healthcare institution of responsibility for the consequences of nontreatment.

#### *Truth-telling and confidentiality*

In the context of its teachings, Christian Science uses the word “truth” to refer to spiritual reality; the physical world, being a limited percept, is not truly real. Therefore, the “truths” of disease and medicine, while they may appear to be absolutely real, proceed from an ultimately erroneous and limited view of reality.

Sickness is part of the error which Truth casts out. Error will not expel error. Christian Science is the law of Truth, which heals the sick on the basis of

the one Mind or God. It can heal in no other way, since the human, mortal mind so-called is not a healer, but causes the belief in disease.

Then comes the question, how do drugs, hygiene, and animal magnetism heal? It may be affirmed that they do not heal, but only relieve suffering temporarily, exchanging one disease for another. We classify disease as error, which nothing but Truth or Mind can heal, and this Mind must be divine, not human. Mind transcends all other power, and will ultimately supersede all other means in healing.<sup>9</sup>

According to Christian Science, medical science rests on assumed truths which are profoundly challenged by the “truths” of the ultimately spiritual nature of man and the mental basis of disease, as portrayed in Christian Science. Therefore, clinicians should be particularly sensitive to the issue of truth-telling when interacting with Christian Scientists; clinician and patient should find and maintain an understanding about what level of discourse is appropriate for both parties. For example, clinicians should be aware that when Scientists forgo Christian Science treatment to seek medical care, their attitudes about their physical condition may differ significantly from their attitudes when they interact with clinicians for reasons commonly accepted among Christian Scientists, such as childbirth or the setting of broken bones. (See “Fundamental beliefs concerning health care,” above.)

Christian Scientists respect the confidential nature of medical records.

#### *Proxy decision making and advance directives*

Christian Scientists may or may not execute advance directives. By their commitment to Christian Science, they indicate a preference for Christian Science treatment over medical treatment.

## FAMILY, SEXUALITY, AND PROCREATION

**F**or Christian Scientists, marriage is the legally and morally appropriate context for procreation, but it is a human institution rather than a divine one. No marriages are performed by the church; Eddy stipulated that Scientists should be married by clergy from other denominations. She believed that, in a marriage, “separation never should take place, and it never would, if both husband and wife were genuine Christian Scientists.”<sup>10</sup> Although the church strongly emphasizes the healing of marital and other family difficulties, its members are no less prone to divorce than are Protestants as a group.

Eddy understood God to be beyond sexual characterization and referred to God as “Father-Mother God.” This understanding of God, along with the fact that Eddy was a female leader in a time of few female leaders, has provided a foundation for relatively egalitarian gender relationships within the Christian Science tradition.

Christian Science teaches that homosexuality is a condition that should be addressed with compassion and with efforts to heal rather than with either condemnation or uncritical acceptance. Sexual activity is appropriate only within the bonds of marriage. Known homosexuals and adulterers are unlikely to be elected to offices within the church or accepted as practitioners until full healing has occurred.

Eddy believed that as long as people understood themselves to be physical beings, they would be sexual creatures who could sustain humankind only through sexual reproduction. Once human thought was perfected, however, sexuality for its own sake would subside, humans would become immortal, and procreation as we know it would become unnecessary.

### CLINICAL ISSUES

#### *Treatment of children*

Adults in this country may legally choose to forgo medical treatment for themselves. But

when a guardian or proxy decides to forgo medical treatment on behalf of a minor or incompetent adult, many ethical and legal considerations arise. Because Christian Scientists have often rejected commonly accepted medical treatment for their children, they have been involved in an ongoing debate about the rights and responsibilities of parents in caring for their children. Defenders of Christian Science maintain that parents have a right to exercise their religious convictions and should not be punished for acting in what they judge to be the best interests of their children. They also point frequently to continuing evidence of physical healing through Christian Science treatment of children and adults. Critics, however, argue that no child should be “martyred” or denied important medical treatment on the basis of the parents’ religious beliefs. It seems that, due to heavy pressure and glaring publicity over the last few decades, Christian Science parents are now much more likely to seek medical treatment for their children at the outset of a physical problem—though this is by no means universal.

This debate certainly has implications for those who take temporary responsibility for the care of Christian Scientists’ children, including teachers, day-care providers, relatives, and friends. Ideally, such caregivers should reach a prior agreement with parents about how to proceed in cases of emergency. In the absence of such an agreement, caregivers should exercise their own judgment regarding the provision of emergency medical care to children. A spokesperson for the Church of Christ, Scientist, advises that “in cases of accident, Christian Science parents would not object to the administration of on-the-spot first aid for their children. But in some instances they might prefer, after careful consideration, to have Christian Science treatment rather than hospitalization, surgery, or extended therapy. Again, however, prayer and reasoned judgment amid the exigen-

cies of practical situations—rather than abstract criteria—tend to shape the choice of treatment in emergency cases.”<sup>11</sup>

The idea that parents would rely solely on prayer for the healing of their children seems foreign to many medical professionals. For Christian Science families, it seems very natural; teaching children to use prayer as a practical aid in all aspects of their lives is a common part of family life. Such aid may include finding a lost pet, conquering fear, or overcoming sickness. Christian Science parents often find that children are very receptive to this approach to handling problems and Scientists believe that children, through their easy understanding of God, are able to heal others.

Eddy taught that the thoughts and actions of parents can have profound effects, both positive and negative, on the physical well-being of their children. She wrote:

Mind regulates the condition of the stomach, bowels, and food, the temperature of children and of men, and matter does not. The wise or unwise views of parents and other persons on these subjects produce good or bad effects on the health of children . . .

Giving drugs to infants, noticing every symptom of flatulency, and constantly directing the mind to such signs,—that mind being laden with illusions about disease, health-laws, and death,—these actions convey mental images to children’s budding thoughts, and often stamp them there, making it probable at any time that such ills may be reproduced in the very ailments feared. A child may have worms, if you say so, or any other malady, timorously held in the beliefs concerning his body. Thus are laid the foundations of the belief in disease and death, and thus are children educated into discord.<sup>12</sup>

To Christian Scientists, the mental influences of parents upon their children are of much greater consequence than physical threats or medical treatments.

Published accounts and personal experiences of healing in children under Christian Science care demonstrate for Christian Scientists the effectiveness of such treatment for children. Reports include healing of children with medically diagnosed conditions such as chemical burns, pleurisy, stomach tumor, bowed legs, and bone disease. Because of these and many other experiences of healing, Christian Scientists believe that parents should have the legal right to choose this form of treatment for their children rather than medical treatment.

Others disagree. They cite cases in which children under Christian Science care have died as a result of conditions for which early medical treatment is normally successful, such as meningitis and juvenile diabetes, as proof of the importance of medical treatment. Because of this conviction, they believe that all parents have a duty to seek medical care for their children under certain circumstances.

Occasionally Christian Science parents in the United States have been criminally prosecuted for failing to seek medical care that others thought could have saved their child’s life. In recent years, the number of such cases has dramatically increased; during the period from 1983 to 1989, Christian Science parents were criminally prosecuted in seven separate cases in various states with various outcomes. Most of the verdicts have been appealed to higher state courts, but none has been appealed to the U.S. Supreme Court. In 1993, the first civil trial of a Christian Science parent began; in that case, the Minnesota Court of Appeals upheld the trial court’s award of \$1.5 million in compensatory damages to the deceased boy’s father, which were to be paid by the boy’s mother, his stepfather, and his Christian Science nurse and practitioner. The defendants filed a petition for writ of certiorari, a request for review, with the U.S. Supreme Court, but the Court refused to review it, thus making the Minnesota State Court of Appeals’ judgment final.

Most states have “religious exception” or “religious accommodation” provisions in their child welfare statutes that protect parents from

being judged negligent solely on the ground that they do not provide medical treatment for a child because of their religious beliefs.

Experience has shown, however, that the mere existence of these provisions does not automatically protect parents from prosecution by determined legal authorities. Current federal Department of Health and Human Services regulations require that all cases in which children are denied medical treatment be reported to state welfare authorities, regardless of the parents' religious intent.<sup>13</sup> States may or may not charge religiously motivated parents with medical neglect, depending on state laws, the attitudes of state authorities, and the circumstances of a particular case. Nevertheless, in all cases, states do have the authority to ensure that necessary medical services are provided to a child. Because this is such a controversial issue, the battles to define the rights and responsibilities of parents as they relate to the care of their children are likely to continue.

### *Contraception*

Most Christian Scientists would not use birth control pills because they are drugs, although this may not be their sole reason. Discretion is left to those involved.

### *Sterilization*

No official position was found on sterilization.

### *New reproductive technologies*

No official position was found on artificial insemination, gamete intrauterine fallopian transfer (GIFT), in vitro fertilization (IVF), or surrogate motherhood. Christian Scientists would generally approach fertility problems as they deal with other physical challenges—through prayer.

### *Abortion and the status of the fetus*

Abortion is rare among Christian Scientists, more because of its moral implications than because it is viewed as a medical procedure.

### *Prenatal diagnosis and treatment*

Discretion is left to those involved.

### *Care of severely handicapped newborns*

Discretion is left to those involved.

## **GENETICS**

**C**hristian Scientists believe that to examine or alter human genes is to focus on the physical rather than the spiritual and to concede that our physical substance, rather than our

relationship with God, determines who we are. About hereditary disease Eddy wrote, "The Scientist knows that there can be no hereditary disease, since matter is not intelligent."<sup>14</sup>

## **ORGAN AND TISSUE TRANSPLANTATION**

**M**ost Christian Scientists reject organ and tissue transplants for the same reasons that they reject other medical treatment.



## MENTAL HEALTH

**F**or Christian Scientists, mental illness, like all other ailments, arises out of a false understanding of the nature of reality and can be healed through right understanding. Speaking of the “arguments,” or prayerful affirmations of spiritual truth, used in Christian Science treatment, Eddy wrote:

The treatment of insanity is especially interesting. However obstinate the case, it yields more readily than do most diseases to the salutary action of truth, which counteracts error. The arguments to be used in curing insanity are the same as in other diseases: namely, the impossibility that matter, brain, can control or derange mind, can suffer or cause suffering; also the fact that truth and love will establish a healthy state, guide and govern mortal mind or the thought of the patient, and destroy all error, whether it is called dementia, hatred, or any other discord.<sup>15</sup>

### *Psychotherapy and behavior modification*

Psychotherapy and behavior modification are considered undesirable treatment for Christian Scientists suffering from mental illnesses because such illnesses can be treated with Christian Science prayer, as can any other illness.

### *Psychopharmacology*

“The supposition that we can correct insanity by the use of purgatives and narcotics is in itself a mild species of insanity.”<sup>16</sup>

### *Electroshock and stimulation*

Electroshock and stimulation are considered undesirable treatments for Christian Scientists suffering from mental illnesses because such illnesses can be treated with Christian Science prayer, as can any other illness.

## CLINICAL ISSUES

### *Involuntary commitment*

No official position was found on involuntary commitment.

## MEDICAL EXPERIMENTATION AND RESEARCH

**C**hristian Scientists believe that experimentation on humans is not appropriate.

## DEATH AND DYING

Christian Scientists regard death not as the end of being or of individual identity—nor as a sudden plunge into a heaven or a hell. Instead death is a transition to a new stage of existence and growth. They believe that, for individuals, “life in the hereafter involves growth in holiness, repentance and spiritual regeneration as does this life.”<sup>17</sup> On a higher level, they believe that once the last traces of sin and delusion disappear from the human mind, death itself will disappear.

### CLINICAL ISSUES

#### *Determining death*

“If you or I should appear to die, we should not be dead. The seeming decease, caused by a majority of human beliefs that man must die, or produced by mental assassins, does not in the least disprove Christian Science; rather does it evidence the truth of its basic proposition that mortal thoughts in belief rule the materiality miscalled life in the body or in matter. But the forever fact remains paramount that Life, Truth, and Love save from sin, disease, and death.”<sup>18</sup>

#### *Pain control and palliative care*

“If from an injury or from any cause, a Christian Scientist were seized with pain so violent that he could not treat himself mentally,—and the Scientists had failed to relieve him,—the sufferer could call a surgeon, who would give him a hypodermic injection, then, when the belief of pain was lulled, he could handle his own case mentally.”<sup>19</sup>

Christian Scientists in general and Christian Science nurses in particular are guided by Eddy’s teaching that “it is no more Christianly scientific to see disease than it is to experience it. If you would destroy the sense of disease, you should not build it up by wishing to see the forms it assumes or by employing a single material application for its relief.”<sup>20</sup> Thus, many commonly accepted forms of monitoring

patients and providing palliative care—such as using a fever thermometer, taking a pulse, applying heat or ice, or giving a backrub—are incompatible with relying on spiritual means for healing; Christian Science holds that if one is confidently relying on prayer for healing, he or she will not choose to use physical ways and means.

#### *Forgoing life-sustaining treatment*

Christian Scientists generally forgo most kinds of medical treatment because they choose to rely solely on Christian Science treatment, both for themselves and for their children. (See “Treatment of children,” above.)

#### *Suicide, assisted suicide, and euthanasia*

The Church of Christ, Scientist, has issued the following statement with respect to euthanasia:

Normally, questions about euthanasia are discussed within a medical context in which certain conditions or diseases are regarded as irreversible. Christian Scientists, on the other hand, do not consider any disease beyond the power of God to heal . . . Thus, they wouldn’t ordinarily approach even serious or ‘terminal’ problems from the perspective that resignation to death is the only option.<sup>21</sup>

#### *Autopsy and postmortem care*

In most cases, Christian Scientists would prefer that female bodies be handled by other females and that no autopsy be performed.<sup>22</sup> Nonetheless, the governing by-laws in the *Manual of The Mother Church* state that “if a member of The Mother Church shall decease suddenly, without previous injury or illness, and the cause thereof be unknown, an autopsy shall be made by qualified experts.”<sup>23</sup>

#### *Last rites, burial, and mourning customs*

“The Christian Science Church does not perform last rites, nor does it have ritual or

doctrinal requirements regarding the bodily remains of the deceased. Arrangements for burial or cremation are left to the next of kin, as are decisions regarding services. Some families may prefer not to have a service. Others may

hold services at home or in a funeral parlor. In many cases, a simple memorial service would be held.<sup>24</sup> Christian Scientists often prefer cremation over burial.<sup>25</sup>

## SPECIAL CONCERNS

### ATTITUDES TOWARD DIET AND THE USE OF DRUGS

**A**ctive members of the church avoid alcohol, tobacco, and the use of drugs on grounds that these are artificial and unnecessary material stimulants. Eddy wrote, “The depraved appetite for alcoholic drinks, tobacco, tea, coffee, opium, is destroyed only by Mind’s mastery of the body . . . Puffing the obnoxious fumes of tobacco, or chewing a leaf naturally attractive to no creature except a loathsome worm, is at least disgusting.”<sup>26</sup> Narcotics may be appropriate under certain circumstances. (See “Pain control and palliative care,” above.) Scientists avoid gambling on traditional moral grounds, and usually do not make use of medical therapies because of voluntary reliance on spiritual means for healing.

### CLERGY, WORSHIP, AND POLITY

The Church of Christ, Scientist, has no ordained clergy. The Bible and *Science and Health* act as the “pastor” of the church, but *Science and Health* is not considered to be scripture. Worship consists of music, silent prayer, the Lord’s Prayer, and the reading by two members of a lesson-sermon containing assigned texts from the Bible and *Science and Health*. Many members study the lesson-sermon each day during the preceding week. There is no personal preaching or ceremony or administering of sacraments in the church. Eddy taught that communion occurs in one’s heart and that baptism is a process of continued spiritual purification. During Wednesday testimony meet-

ings, the first reader reads selections from the Bible and *Science and Health*, and then members share experiences of healing.

The governmental structure of the church is specified in Eddy’s *Manual of The Mother Church*, which places governance of the church with a five-member board of directors at the First Church of Christ, Scientist, in Boston, Massachusetts—commonly known as The Mother Church. The Board, while entrusted with extensive practical authority in the day-to-day conduct of church business, itself operates under the constraints of the church’s *Manual* in an essentially constitutional form of church government. Board members serve for varying lengths of time and appoint their own successors. Most Scientists are members of both The Mother Church and a local branch church. Branch churches operate democratically within fairly strict guidelines set out in the *Manual*.

### SPECIAL DAYS

Services are held on Sunday mornings, and testimony meetings are held on Wednesday evenings.

### MEMBERSHIP

There has been a decrease in the number of Christian Science practitioners worldwide from approximately 8,300 in 1960 to about 1,700 in 2002. The number of Christian Science branch churches and societies has declined from about 3,000 in 1950 to about 1,400 in 2002. Taking

these and other indicators into account, one can arrive at a rough estimate of possible Mother Church membership. The Mother Church does not report membership statistics, since Eddy prohibited doing so at a time when members were becoming more prideful because Christian Science was growing rapidly. But a U. S. Census report in 1936 listed Mother Church membership in the United States as about 269,000. Informed estimates would indicate that the number of Mother Church members today is well below half that figure, though many who are not formal members of the denomination count themselves students of Christian Science.

While it is true that women have dominated the church numerically, they have not dominated in the high offices of the church. And although the demographic characteristics of members are not precisely known, more of the membership is rural or of lower-middle-class backgrounds than many people assert.<sup>27</sup>

## TENETS

The religious tenets, or basic convictions, of Christian Science are these:

1. As adherents of Truth, we take the inspired Word of the Bible as our sufficient guide to eternal Life.
2. We acknowledge and adore one supreme and infinite God. We acknowledge His Son, one Christ; the Holy Ghost or divine Comforter; and man in God's image and likeness.
3. We acknowledge God's forgiveness of sin in the destruction of sin and the spiritual understanding that casts out evil as unreal. But the belief in sin is punished so long as the belief lasts.
4. We acknowledge Jesus' atonement as the evidence of divine, efficacious Love, unfolding man's unity with God through Christ Jesus the Way-shower; and we acknowledge that man is saved through Christ, through Truth, Life, and Love as demonstrated by the Galilean Prophet in healing the sick and overcoming sin and death.
5. We acknowledge that the crucifixion of Jesus and his resurrection served to uplift faith to understand eternal Life, even the allness of Soul, Spirit, and the nothingness of matter.
6. And we solemnly promise to watch, and pray for that Mind to be in us which was also in Christ Jesus; to do unto others as we would have them do unto us; and to be merciful, just, and pure.<sup>28</sup>

## NOTES

1. Talbot, "The Position of the Christian Science Church," 1642.
2. *Rudimental Divine Science*, as quoted in Peel, *Health and Medicine in the Christian Science Tradition*, 51.
3. *Freedom and Responsibility*, 112.
4. Eddy, *Science and Health*, 484.
5. *Ibid.*, 416.
6. Merrick, "Christian Science Healing of Minor Children," 330.
7. Gevitz, "Christian Science Healing and the Health Care of Children," 427-28.
8. Eddy, *Science and Health*, 401-2.
9. *Ibid.*, 482-83.
10. *Ibid.*, 59-60.
11. Talbot, "The Position," 1643.
12. Eddy, *Science and Health*, 413-14.
13. DHHS, 1983.
14. Eddy, *Science and Health*, 412.
15. *Ibid.*, 414.
16. *Ibid.*, 408.
17. Melton, *The Churches Speak On: Abortion*, 205.
18. Eddy, *Science and Health*, 164.
19. *Ibid.*, 464.
20. *Ibid.*, 421.
21. Melton, *The Churches Speak On: Euthanasia*, 205.
22. Green, "Death with Dignity," 33.
23. Eddy, *Manual of the Mother Church*.
24. Melton, *The Churches Speak on: Euthanasia*, 205.
25. Green, "Death with Dignity," 33.
26. Eddy, *Science and Health*, 406-7.
27. Christian Science Publishing Society, *Christian Science*, 11.
28. Eddy, *Science and Health*, 497.

## BIBLIOGRAPHY

- Christian Science Publishing Society. *Christian Science: A Sourcebook of Contemporary Materials*. Boston: Christian Science Publishing Society, 1990.
- Department of Health and Human Services. *Federal Register* 48, no. 18 (January 26, 1983): 3698–3704. Microfiche.
- Eddy, Mary Baker. *Science and Health with Key to the Scriptures*. Boston: First Church of Christ, Scientist, [1875] 1971.
- \_\_\_\_\_. *Manual of The Mother Church*. Boston: First Church of Christ, Scientist, [1895] 1936.
- Freedom and Responsibility: Christian Science Healing for Children*. Boston: First Church of Christ, Scientist, 1989.
- Gevitz, Norman. “Christian Science Healing and the Health Care of Children.” *Perspectives in Biology and Medicine* 34, no. 3 (1991): 421–38.
- Green, Jennifer. “Death with Dignity: Christian Science.” *Nursing Times* 88, no. 4 (1992): 32–33.
- Melton, J. Gordon. *The Churches Speak On: Abortion*. Detroit: Gale Research, 1991.
- \_\_\_\_\_. *The Churches Speak On: Euthanasia*. Detroit: Gale Research, 1989.
- Merrick, Janna C. “Christian Science Healing of Minor Children: Spiritual Exemption Statutes, First Amendment Rights, and Fair Notice.” *Issues in Law and Medicine* 10, no. 3 (1994): 321–42.
- Peel, Robert. *Health and Medicine in the Christian Science Tradition: Principle, Practice, and Challenge*. New York: Crossroad Publishing, 1988.
- Skolnick, Andrew. “Religious Exemptions to Child Neglect Laws Still Being Passed Despite Convictions of Parents.” *Journal of the American Medical Association* 264, no. 10 (1990): 1226, 1229, 1233.
- Talbot, Nathan A. “The Position of the Christian Science Church.” *New England Journal of Medicine* 309, no. 26 (1983): 1641–44.



# Introduction to the series

**R**eligious beliefs provide meaning for people confronting illness and seeking health, particularly during times of crisis. Increasingly, healthcare workers face the challenge of providing appropriate care and services to people of different religious backgrounds. Unfortunately, many healthcare workers are unfamiliar with the religious beliefs and moral positions of traditions other than their own. This booklet is one of a series that aims to provide accessible and practical information about the values and beliefs of different religious traditions. It should assist nurses, physicians, chaplains, social workers, and administrators in their decision making and care giving. It can also serve as a reference for believers who desire to learn more about their own traditions.

Each booklet gives an introduction to the history of the tradition, including its perspectives on health and illness. Each also covers the tradition's positions on a variety of clinical issues, with attention to the points at which moral dilemmas often arise in the clinical setting. Finally, each booklet offers information on special concerns relevant to the particular tradition.

The editors have tried to be succinct, objective, and informative. Wherever possible, we have included the tradition's positions as reflected in official statements by a governing or other formal body, or by reference to positions formulated by authorities within the tradition. Bear in mind that within any religious tradition, there may be more than one denomination or sect that holds views in opposition to mainstream positions, or groups that maintain different emphases.

The editors also recognize that the beliefs and values of individuals within a tradition may vary from the so-called official positions of their tradition. In fact, some traditions leave moral decisions about clinical issues to individual conscience. We would therefore caution the reader against generalizing too readily.

The guidelines in these booklets should not substitute for discussion of patients' own religious views on clinical issues. Rather, they should be used to supplement information coming directly from patients and families, and used as a primary source only when such first-hand information is not available.

We hope that these booklets will help practitioners see that religious backgrounds and beliefs play a part in the way patients deal with pain, illness, and the decisions that arise in the course of treatment. Greater understanding of religious traditions on the part of care providers, we believe, will increase the quality of care received by the patient.



**THE PARK RIDGE CENTER**  
FOR THE STUDY OF HEALTH, FAITH, AND ETHICS

205 West Touhy Avenue • Suite 203 • Park Ridge, Illinois 60068-4202

*The Park Ridge Center explores and enhances the interaction of health, faith, and ethics through research, education, and consultation to improve the lives of individuals and communities.*

© 2002 The Park Ridge Center. All rights reserved.