

A Christian response to chronic pain

by Andrew Perrett and Louise Robinson

Summary

The chances are that you know someone who lives with chronic pain, whether you are aware of it or not. Chronic pain is a specific type of suffering which is invisible, unpredictable and long-lasting. We discuss how this presents a particular set of challenges and hurdles to the sufferer, their loved ones and the wider church family, and we also share a personal example of living with chronic pain. Chronic pain demands a response; here we seek to bring biblical light to help people of faith who are seeking to respond well.

What is chronic pain?

As anyone who has quickly let go of a saucepan that is too hot to handle knows, acute pain can be useful. Indeed, the absence of normal pain responses, found in the context of some diseases, is disastrous. The time-limited pain that follows an injury prompts rest and recovery. But there are other types of pain. Chronic pain is 'pain that persists or recurs for longer than three months'¹ – in other words, beyond normal tissue healing time.

Chronic pain serves no apparent useful medical purpose and detracts from normal function. Some chronic pain is 'secondary' to conditions we can to some extent understand, such as arthritic joint pain or some types of cancer pain. But often chronic pain is poorly explained.² It may be attributed to neurological dysfunction (as in complex regional pain syndrome (CRPS) and phantom limb pain), accompany neurological disease (such as stroke or multiple sclerosis), or follow an episode of inflammation (such as neuralgia following shingles).³ Medical treatments for infection and cancer can themselves be associated with neuropathy. The common theme is that an essential bodily function, our pain response, has gone wrong.

When severe, chronic pain is characterised by emotional distress as well as functional disability. A significant contributor to the distress is the unending

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uncertainty. Will it get better or worse? In two years? In fifteen? Will I be well enough to go to the funeral next week? The wedding next year? Conditions such as CRPS are inherently unpredictable. Pain that is theoretically predictable and treatable, such as arthritic hip pain, becomes more distressing and debilitating when treatment options are limited by reduced fitness for surgery or ever longer waiting lists.

Chronic pain is an extended torture over which we are not in control. Rather, those living with chronic pain can feel controlled by it. Chronic pain dictates their schedule, relationships, work and future plans.

- 1 B. H. Smith, E. A. Fors, B. Korwisi, et al., 'IASP Taskforce for the Classification of Chronic Pain. The IASP classification of Chronic Pain for ICD-11: applicability in primary care', *PAIN* 2019; 160:83–7. doi:10.1097/j.pain.0000000000001360 pmid:30586075
- 2 M. Nicholas, J. W. S. Vlaeyen, W. Rief et al., 'The IASP classification of chronic pain for ICD-11: chronic primary pain', *PAIN* 2019; 160:28–37.
- 3 S. Cohen, E. Wang, T. Doshi et al., 'Chronic pain and infection: mechanisms, causes, conditions, treatments, and controversies', *BMJ Medicine* 2022; 1:e000108. doi:10.1136/bmjmed-2021-000108

Why is a Christian response to chronic pain necessary?

A common challenge to everyone

Between one third and one half⁴ of the UK population are living with chronic pain. This varies in severity: many live well despite migraine, irritable bowel syndrome, arthritis or non-specific low back pain. But around one in twenty people have high-impact chronic pain: pain experienced most days or every day for at least three months that causes restriction in activity.⁵

Suffering of all kinds demands a response from Christians and non-Christians alike. Chronic pain is a specific example of suffering, distinct from abuse or disaster, but similar in that it demands a holistic response beyond the (medical or safeguarding or relief) action that is initially appropriate. Physical pain internalises and represents the wider problem of suffering. C. S. Lewis encapsulates the challenge for anyone who holds God answerable for suffering: 'If God were good, He would wish to make His creatures perfectly happy, and if God were almighty, He would be able to do what He wished. But the creatures are not happy. Therefore God lacks either goodness, or power, or both.'⁶

Chronic pain forces us to decide whether we are willing to trust God, whether for healing or for endurance, although he is not accountable to us, but rules transcendent. C. S. Lewis sees purpose in being forced to decide: 'No doubt pain as God's megaphone is a terrible instrument; it may lead to final and unrepented rebellion. But... it plants the flag of truth within the fortress of the rebel soul.'⁷

To endure suffering as a Christian is not to accept it fatalistically but to look beyond suffering, with confidence in God as both Lord and Saviour. We submit to God's ways as higher than ours (Isaiah 55:9), whether or not we see purpose in our suffering now. Christians enduring chronic pain are a visible witness to Jesus, our suffering servant and risen Lord. God's power to sustain us through suffering shows his faithfulness. We may be able to give thanks for blessings (past if not present): 'The LORD gave and the LORD has taken away; may the name of the LORD be praised.' (Job 1:21). We look forward with yearning, knowing that pain and sorrow are limited and will be gloriously absent in the kingdom of God (Isaiah 35). To endure suffering points to a better future.

Engaging well with medical professionals

Much has been written about chronic pain from a medical

perspective, which we do not attempt to review or duplicate here. It is appropriate that pain should prompt medical enquiry, assessment and attempted mitigation. A specific diagnosis can be helpful, and exploration of physical, pharmacological and psychological treatments is often appropriate. Experiences of chronic pain interact with other factors such as mental health and use of alcohol (a depressant). Lifestyle factors such as (appropriately modified) exercise, healthy diet, social support and friendships are important, but many will also benefit from medical or psychological treatment.

But chronic pain (by definition) defies medical expectations, explanations and solutions: the experts cannot 'fix' the problem. This is not always communicated well by healthcare professionals. Chronic pain often begins with a disappointing journey from fear of danger mingled with cautious hope, towards fear of suffering with disillusionment in treatments that seem increasingly gruelling and fruitless. It is possible to become stuck in an unhelpful repeated cycle of promising interventions which fail, dashing hopes and exhausting expectations. Chronic pain is more than a medical problem and demands an ongoing lived response beyond the clinic door.

In addition, Christians engaging with medical treatment for chronic pain may be unexpectedly challenged by the (implicit or explicit) worldviews associated with some recommended interventions. A secular worldview is usually assumed,⁸ which is intended, but can fail, to be 'neutral'.⁹ Approaches such as mindfulness are favoured but not always disentangled from Buddhist roots.¹⁰ While the benefit of faith on health is clear,¹¹ many healthcare professionals are wary of discussing spiritual matters¹² given the public controversy generated over prayer with patients,¹³ and so Christian meditation on Psalms, for example, is sometimes perceived to be inappropriate for medical recommendation.

A challenge within the faith community

For the Christian, a biblical understanding of suffering is vital as we develop a response to chronic pain. Suffering is clearly expected, both as part of normal human experience (Genesis 3:16–17) and as part of Christian experience (1 Peter 4:12). The Lord Jesus spent much of his life on earth serving people who were suffering in different ways. He ultimately walked a road of suffering that led to glory, setting a pattern for believers to follow and expect.

Chronic pain is one of the many faces of suffering. It

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4 A. Fayaz, P. Croft, R. M. Langford, et al., 'Prevalence of Chronic Pain in the UK: a systematic review and meta-analysis of population studies', *BMJ Open* 2016; 6:e010364. doi: 10.1136/bmjopen-2015-010364

5 Y. Kang, L. Trewern, J. Jackman, et al., 'Chronic pain: definitions and diagnosis' *BMJ* 2023; 381 :e076036 doi:10.1136/bmj-2023-076036

6 C. S. Lewis, *The Problem of Pain* (Centenary Press, 1940) (repr., San Francisco: HarperSanFrancisco, 2001), p.16.

7 Ibid., Chapter 6.

8 <<https://www.guysandstthomas.nhs.uk/health-information/mindfulness-based-stress-reduction-mbsr>>

9 *BMJ* 2024; 385:q1152

10 For example, see <<https://www.getselfhelp.co.uk/docs/NOW.pdf>> for a resource referenced by NHS Mental Health services.

11 A. Bunn & D. Randall, 'Health Benefits of Christian Faith'. Christian Medical Fellowship. <https://admin.cmf.org.uk/pdf/cmffiles/44_faith_benefits.pdf>

12 <<https://www.premierchristianity.com/features/faith-can-heal-but-doctors-are-reluctant-to-have-spiritual-conversations/5422.article>>

13 <<https://cmfblog.org.uk/2022/10/03/praying-for-patients-punishable-or-permitted/>>



interacts with the sadness, soul pain, guilt and shame that characterise human existence, and to which the good news of Jesus is the remedy. In suffering, we wrestle with the unfairness and apparent purposelessness of the suffering, while holding on to faith in God's providence and his promise that 'in all things God works for the good of those who love him' (Romans 8:28). God promises that suffering won't be pointless. While living with chronic pain, it may be difficult to echo Paul's affirmation that 'we are hard pressed on every side, but not crushed; perplexed, but not in despair; persecuted, but not abandoned; struck down, but not destroyed', yet there is a mysterious comfort in knowing that 'we who are alive are always being given over to death for Jesus' sake, so that his life may also be revealed in our mortal body' (2 Corinthians 4:8-11).

Chronic pain is also part of our corporate experience as the body of Christ. Chronic pain affects the lives of our spiritual family and demands a response. Why does she have this pain? Why hasn't God healed him? Such questions may not be strictly rhetorical. Job's friends did well to stay with him in silence, less well in explaining his suffering. The most helpful responses are often pastoral rather than intellectual.

Chronic pain is an invisible pastoral challenge. It may sometimes be signposted by mobility aids or a disability badge. But no one sees a sufferer's pain – only their reaction to it, if displayed. Responding well to an invisible burden is a skill modelled by Jesus and one facet of authentic Christian service in the communities to which we belong.

Therefore, we will focus here on responding well to the emotional, existential, pastoral and spiritual challenge that chronic pain brings to us, both as individual Christians and as members of the body of Christ. While we hope and intend to be helpful, we acknowledge that at certain times this may be difficult to read and that each individual journey is unique.

Louise's journey with chronic pain

My journey started with intense pain, complete confusion and all-consuming grief, distress and despair, and now

continues with intense pain, an uneasy truce, limited capacity and the ability to walk with pain as an unwanted companion, with eyes fixed on heavenly hope.

Switching from fighting the pain, to learning to live with it, was a long, gruelling process, but also life-changing and freeing. As I tell you my story, I hope you will see that the Lord walks alongside his children and equips friends and family to do the same (often at different speeds!), if we will let him.

I was in my mid-20s, teaching and living life to the full when everything was 'interrupted' by chronic pain: a shoulder injury sustained during a fall failed to recover as expected. After several exhausting years of medical intervention, I was diagnosed with complex regional pain syndrome. This was the beginning of a journey grappling with pain, guilt and a sense of failure, while riding waves of grief, confusion and distress. CRPS is unpredictable – good days, bad days and everything in between. My ability to work, do chores, attend church, enjoy recreation, see friends, care for myself, play sport and sleep is compromised. Daily 'allowances' of energy are unpredictable and limiting, forcing me to choose between 'essentials': cook a meal or get to church.

As chronic pain emerged, the battle to defeat this new enemy was all-consuming. Eventually I made the leap from fighting for victory to living with chronic pain as an unwanted companion. This uneasy truce is born of compromise: chronic pain is no longer in control, but partial defeat has been acknowledged. With defeat came acceptance (even the most brilliant doctors can't fix my pain), wonder (at the marvellous complexity of our God-created bodies), and freedom to find a 'new normal' way to live. My Heavenly Father helped me make this leap; antidepressants, counselling, a pain management course, faithful believers in my family and friends were all part of his toolkit. I was able to talk through the feelings of grief, to say goodbye to 'normal life' and the hope of that returning, and to work through what the 'new normal' would look like.

As a Christian with chronic pain, faith can end up on the line too. Doubts may grow like mould in the darkness. The books of Job, Ecclesiastes and Psalms are particularly helpful when 'darkness is [our] closest friend' (Psalm 88:18), encouraging us to turn to God with forthright honesty. 'How long, LORD? Will you hide yourself for ever?' (Psalm 89:46). We cannot hide our thoughts from God who knows our words before they are uttered (Psalm 139:4). Such difficult thoughts I shared with God and a few closer friends. It's possible to oscillate between feeling worthless and hard-done-by in our relationship with God.

The joy of being God's child in this broken world, is that I can cry out to him when life is tough and things go wrong, in my pain, anger, grief, confusion. I can still trust that he is good, perfect, faithful and loving. 'Because your love is better than life, my lips will glorify you' (Psalm 63:3). I can worship and glorify the Lord with my whole life, irrespective of how much I can 'do'. God is kind – he's made provision for me to live in this broken body, in a sinful world, in a way that glorifies him, and is good for

me. It took a long time before I could articulate this and some may never do so, in advance of the perfect kingdom.

Failure to live up to cultural expectations, such as holding down a job or providing home-baked delights for a school event, can increase feelings of guilt and shame, and might reduce my perceived social status and value. Sometimes an explanation might be helpful for others, although often my perception of shame is not matched by any judgement by others. It is ironic that guilt and shame can be increased by inability to 'serve' at church, despite knowing that our worth in God's eyes is in being made in his image and saved by Jesus. My worth depends on him, not on my pain-limited abilities.

There is a complex two-way relationship between mental anguish and physical pain. Guilt, shame and loss (of what might have been, as well as what was), and the pain itself, can exacerbate anger, anxiety and sadness. Chronic pain often leads to limitation of physical exercise, which normally contributes greatly to maintaining emotional health. Thoughts such as 'I should be joyful because I am a Christian,' or 'I should not worry because I am a Christian,' may compound the sadness and anxiety, although these thoughts are legalistic distortions of the freedom we enjoy to be content and at peace in Jesus, a freedom that is not fully experienced right now.

With respect to pain, Christian brothers and sisters can be unthinkingly hurtful, both with words and actions. I have had to ask the Lord to help me be open and forgiving towards those in my church family who ask how I am, who are trying to understand something that is invisible and difficult to fathom, sometimes even to remember. I tend to over-lighten my load (I know others who tend towards over-darkening their load), for fear of being misunderstood. But I have learned the need to teach my friends and family how to walk with me by asking for help and with gracious honesty. For example, the good instinct to use physical touch, to lessen the sense of shameful untouchability that chronic pain can bring, may require me to state the obvious: please don't touch me where it hurts!

A particular conundrum is how to balance praying for healing with praying for perseverance and courage to live with chronic pain, and to communicate this balancing act with family and friends. We don't want to exclude the possibility of God healing us, nor to underestimate how the Lord can sustain us in our pain. It may be helpful to let others know how it makes you feel when they speak or pray in a particular way, if you want them to do this often or never when within earshot. God's power to sustain us is as marvellous as his power to heal us. We must ask him for both.

I am grateful for those who have walked with me, loving me as I am, and doing so patiently, quietly, practically, faithfully, prayerfully for a long time. This is living out Romans 12:9–13: 'Love must be sincere... Be

devoted to one another in love. Honour one another above yourselves... Be joyful in hope, patient in affliction, faithful in prayer. Share with the Lord's people who are in need.'

2 Corinthians 1:3–5 takes on a very different meaning when we're living in pain:

'Praise be to the God and Father of our Lord Jesus Christ, the Father of compassion and the God of all comfort, who comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves receive from God. For just as we share abundantly in the sufferings of Christ, so also our comfort abounds through Christ.'

I prayed for the Lord to make this true in my life when I still couldn't imagine how I would adjust to living with CRPS until heaven arrives. By his grace, he has answered.

I can testify that his promises are good and true, that his

compassion, strength and faithfulness are sufficient for the challenge that chronic pain presents. Moreover I have a greater dependence and hope in the Lord now than when I was 'living life to the full'. Surely that is a witness to the world. A journey through life, even with chronic pain, can be lived with joy and hope and delight – not in earthly things, but in the true certainty and hope of eternal truth. The Lord has stuck with me and helped me not turn against him in anger.

He strengthened me to adjust, to say goodbye to all I had to leave, to turn to a new normal, to find his promises all the sweeter, and to use my daily allowance carefully and gratefully. I still get frustrated when CRPS hinders my ability to live life, but the Lord is good and remains faithful to his promises.

The challenge of responding well: brothers and sisters in the church family

Chronic pain impacts everyone, because God has made us relational beings – although sin can turn that blessing into a trial. Those who are closest to the one in chronic pain are conflicted: they suffer by proxy, but the pain is not theirs. Friends for a season may part, whereas others are literally wedded to the sufferer, 'for better or for worse, in sickness and in health'. As the body of Christ, the whole church hurts with the member in pain. But Jesus' command to love one another 'as I have loved you' (John 13:34) is easier to quote than to practise. Chronic pain is experienced by individuals in myriad guises which demand as many nuanced responses, which nevertheless share common themes of acknowledgement and commitment.

Acknowledge the pain is real

This is a simple but key first step. The invisibility and unpleasantness of pain conspire to encourage the pretence that it is not real, or somehow a construct 'in your head'. We may choose to downplay our own temporary pain

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when we hit the ulnar nerve in our elbow, calling it our 'funny bone', but it would be cruel to downplay someone else's chronic pain. Remembering how awful pain can be strengthens our forbearance when the chronic pain sufferer is being prickly and difficult. We cannot see pain, but we can ask and listen.

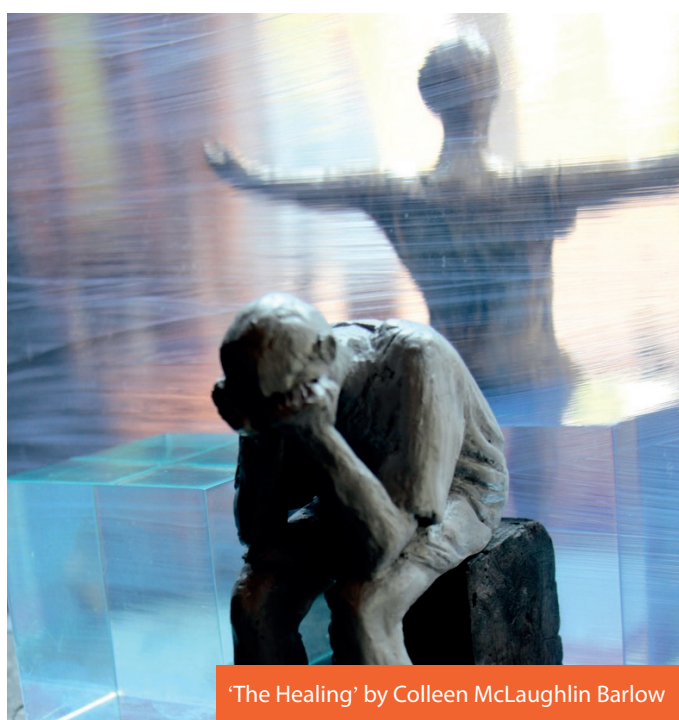
Acknowledge our own ignorance and impotence

Confidence in God's providence is no excuse for pretending we understand chronic pain. Bodily experience demands a response that is incarnate rather than gnostic. We may *know* that God is working his purpose out and that nothing can separate us from God's love. We may *know* that God does not test us beyond what we can bear and that God's plans are to prosper us. But these ideas are insufficient to explain away someone else's pain.

Some describe purpose in their chronic pain, while others do not. James encourages us to be joyful because the testing of our faith through 'trials of many kinds' produces perseverance and maturity (James 1:2). Paul understood his (presumably painful) 'thorn in the flesh' to be purposeful in keeping him from becoming conceited (2 Corinthians 12:7). However, Job saw no rationale for his suffering and still proclaimed, 'I know that my redeemer lives, and that in the end he will stand on the earth' (Job 19:25). Even when vindicated before his friends who had wrongly attributed his suffering to sin, Job received no explanation from God. We should be cautious about trying to explain anyone else's suffering to them.

Our Heavenly Father graciously permits his beloved children to vent their fury at him. Job turned to God in frustration; God affirmed Job but he did not explain Job's sufferings. Turning towards God is so much better than

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'The Healing' by Colleen McLaughlin Barlow

turning away from the One who knows and understands perfectly.

Acknowledge uncomfortable thoughts and feelings

Acknowledging involves 'receiving' and sharing in pain and distressing emotions, tolerating imperfection and mystery. Jesus calls us to 'rejoice with those who rejoice; mourn with those who mourn' (Romans 12:15). To accompany and to listen is to allow room for both: joy and hope but also shame, guilt, fear and sadness. We may need to explain to a child or friend that hugs are painful, that the pain is overwhelming or that we are depressed. Such feelings should not be stifled or 'corrected' too quickly by an oversimplified gospel summary. There must be room for lament as well as praise.

We need not defend God. He invites the complaints of brothers and sisters in distress. Many Psalms make most of us who live in untroubled times uncomfortable, yet teach us not to suppress our distress but to cry out with those in chronic pain, directing our own cries and theirs to God.

Commit to endure

Commitment involves intentionally 'binding' ourselves to one another for strength ('comfort'). This must be enduring. Church families are often good at providing intensive, short-term support, such as helping move house or providing meals after a baby is born. Chronic pain sufferers usually need something different: support that is sustainable over the long term, as well as flexible (because chronic pain is unpredictable).

That said, compassion ('suffering with') is also exhausting for those walking alongside the sufferer (though it would be thoughtless for anyone to complain about this to someone who is closer to the pain than they are). We must be realistic. Carers need supportive friends to give them a break sometimes. Church family can step in and make a wonderful difference, if carers accept this as appropriate support for long-term sustainability, not as a sign of failure. For those not quite so close, it may be wiser and more helpful to be ready to do one small thing each week indefinitely than to spend hours each day but burn out within a month.

There will be times when carers feel angry, frustrated, despairing and hard done by. People living with chronic pain don't always make it easy: after all, they are sinful human beings like everyone else. Forbearance (1 Corinthians 13:4-7) is needed to come back for more. God knows all this, so you can tell him, clinging to his promises to sustain not only your suffering friend but you as well as you stand with them. Expect fluctuation in the journey. Choose times for honest conversations wisely, to discuss needs, changes, frustrations and fears.

Commit to dignity and inclusion

However much we think that chronic pain should not be something to be ashamed of, it carries the stigma of imperfection that invisibly marks the sufferer as

shamefully broken, cast out and defiled. The sense that we are underperforming (compared to others or our former selves) compounds this. The legalistic idea that (others will think) we must have done something to deserve this pain can be intrusive. Our confidence, in knowing that our worth and salvation depend on God's grace alone, is tested.

When a church community is working together to help a chronic pain sufferer, it may not be obvious who knows what or who should know what. It is usually best to find out. Is their pain general knowledge or private? Ask at the right moment.

For a chronic pain sufferer to remain involved, tasks may need to be shared out asymmetrically, creatively dividing the roles so that everyone contributes meaningfully. Chronic pain sufferers are usually very aware of being unable to 'pull their weight' and placing an 'unfair' burden on others (unless it is buried underneath victim entitlement). Having home group in a suitable location and finishing on time may be beneficial for everyone, but essential for someone with chronic pain. Accepting that they cannot attend every meeting and sending summaries of missed meetings may include the sufferer more fully. A private conversation with someone trusted may help the one living with chronic pain to disclose what adjustments are needed, knowing they will be valued, heard and loved, as modelled by Jesus (Philippians 2).

The challenge of responding well: church leaders

Churches can weep, pray and rejoice with sufferers of chronic pain, so they don't journey alone. But churches, rightly encouraging members to serve, can inadvertently make those who cannot participate (including but not limited to those in chronic pain) feel even more guilty and ashamed. Chronic pain sufferers need flexibility to change how they contribute or step back from a regular commitment. Leaders can helpfully give permission – to receive communion differently, to sit when others stand, to use a safe physical space apart from crowds or excited children. Cultivating a culture that values creatively different ways of contributing may be helpful. A chronic pain sufferer who simply shows up some of the time may be offering the equivalent of the widow's two very small copper coins (Mark 12:42).

Words of heavenly hope at times bring encouragement, at times feel mockingly unreachable. To the extent that the words in our songs, liturgy and sermons challenge those living in chronic pain, the challenge should be biblical. When we seek to commend the needs of the church to God in corporate prayer, we can sometimes include prayer for those who live with chronic pain.

Some local churches include several chronic pain sufferers who may be in a unique position to offer mutual support. As with other forms of suffering, those with first-hand experience have a voice that others do not. It may therefore be helpful for such a supportive group to be part of how the church is organised, to be recognised and known as another ministry.

Looking towards the journey's end

Chronic pain is one of many forms of suffering which remind us that all is not well with this world. But chronic pain is addressed in God's salvation plan: when he returns to take his people home, 'He will wipe every tear from their eyes. There will be no more death or mourning or crying or pain, for the old order of things has passed away. He who was seated on the throne said, "I am making everything new!"' (Revelation 21: 4–5). As a believer, living with chronic pain isn't hopeless with this kind of finish line in view. Instead, this eternal perspective makes a life of suffering now possible, hopeful and even useful. A Christian response to chronic pain speaks loudly to all who will listen, that God is abounding in love and sustains his children.



Andrew Perrett is a GP with an interest in chronic pain as experienced by friends and family as well as by his patients.



Louise Robinson is a wife, mum and teacher who has lived with CRPS for the last 16 years and has been challenged to think through some of the issues this presents to us as Christians.

Andrew and Louise have known each other as members of the local church for many years and have been exploring their shared interest in chronic pain.

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