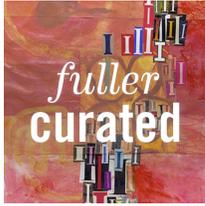


Disabled and Healthy | Bethany Fox and Shane Clifton



+ Bethany McKinney Fox, adjunct professor of Christian ethics, interviews Shane Clifton, a theology professor with quadriplegia, in a wide-ranging discussion about health and healing. Explore the FULLER curated podcast and more resources for a deeply formed spiritual life at Fuller.edu/Studio.

Bethany McKinney Fox: We're here today to talk with Shane Clifton and we're going to have a conversation about health and healing. So, I'm going to let Shane go ahead and introduce himself and then I'm Bethany and I'll introduce myself. But let's start with hearing some about you, Shane?

Shane: All right. It's great to be talking with you today Bethany. So, my name is Shane Clifton. I'm a professor of Theology at Alphacrucis College in Sydney. I have actually visited the Fuller campus before a number of times, I am friends with Amos and I admire what you're doing over there. In terms of my expertise, I'm a Pentecostal theologian and really over the last five years, I have also been doing a lot of work in the intersection between Pentecostal, sorry, between Christian theology, disability, and virtue ethics. So, in terms of my writing, I've done a bit of work in writing and publication in Christian theology and I've got a book coming out actually relatively soon called *Crippled Grace* which is looking at this intersection between disability, virtue ethics, and Christian theology.

Bethany: Great. Yeah and I'm excited to talk more about that and the work that you've been doing. My name is Bethany McKinney Fox. I'm working here at Fuller Seminary in Pasadena, working as the Director of Student Success; and the main part my job here is running the access services office which supports our students with disabilities and then I also do teach Christian ethics here from time to time. I got my PhD from Fuller also in Christian ethics. I have done some writing in mostly about disability theology, including people with intellectual disabilities in faith communities, theology and disability and ethics, and speaking with churches too about both the reasons why we would include people with intellectual disabilities in faith communities and some about how to do that. So, and then about healing I have, sorry?

Shane: I was just going to say, it's a really rich area of writing and thinking isn't?

Bethany: Absolutely, yeah. And then I do have a book also coming out probably in the winter of 2018 with InterVarsity Press about healing in the way of Jesus and thinking about healing and how, yeah, we can think about that in a way that isn't and what Jesus is doing in a way that's actually healing for people with disabilities. So, that's a little bit about me.

Shane: Very good. Also a topic we should come to today.

Bethany: Yes. I agree. Okay. So, let's just start with a very broad question thinking about as we talked about health and healing, I think sometimes we take for granted that we know what we're talking about when we say health. But I think actually digging into that question a little bit more is going to be really fruitful for us. So, before we actually get into the meat of the question about what is health, I wonder if you want talk a little bit about - because that's been some of your recent work right? The question about how do we think about health, what is health?

Shane: Yeah. Look I came to this whole topic as a consequence of an accident. Actually in 2010 I was with my children and my family in the coastal area and my family were jumping push bikes into a foam pit and I was playing around with them and I landed badly and ended up giving myself a serious spinal cord injury. So, I have a C5 injury if that means anything to you. It basically means I'm a quadriplegic and so life change for me in an instant. I spent seven months in hospital trying to work at how to rehabilitate. And really since getting out of hospital I've been thinking about the whole question of health and healing, questions of where is God in the midst of the problem of pain and why isn't God making it better, why did God cause an accident like this to occur in the first place, if it's even right to talk about God causing something.

Bethany: Yeah.

Shane: And then of course you know, longer I'm trying to work out for myself well, what does health and happiness mean for me.

Bethany: Yeah.

Shane: As a person with a serious disability. So, I guess my experience was my entry point into this topic.

Bethany: Sure. And then so, as you started kind of exploring that, because now obviously you're doing your own work in thinking about how do we think about health? How do we think about what that means? As a starting point maybe you explored some of what people are, what we kind of take for granted as what health means in our own world today. So, as you thought about and did some reading and research into what the current conversations were around health, in what ways did you find those to be lacking or needing to be kind of built upon in the work that you're doing?

Shane: Yeah. Look, when it comes to health itself it's interesting both the Church and actually the broader society have really narrow visions with health. So, in the church, when we think of health, it certainly especially in my church

which is the tradition of Pentecostalism, we really do think of healing and so health is about living I guess with a perfectly functioning and working body. And it's interesting because I think that's true of the church but it's also true of the society in which we live, the society thinks our health in terms of perfect health, in terms of the absence for example, of illness and disability.

Bethany: Yeah.

Shane: So, and obviously also, more broadly in terms of this sort of image of the perfectly fit and beautiful person and what's really intriguing I guess, the main thing here is that we've got this idea of health that none of us can attain.

Bethany: Right.

Shane: So, it's not worthy.

Bethany: Yeah. It makes me think of I think is it Rosemarie Garland-Thomson, she's like a Disability Studies scholar who talks about the normate which is like a person that doesn't exist but basically has like all of the markers of what we think of as like the ideal person. They're like a man and tall and fit and married and have children but it's kind of like when you actually list all of those details that person doesn't actually exist when you go into the nuances of like mental health and functionality and all those things that, that we eventually get to the fact that no one meets those criteria.

Shane: Yeah. Sort of depressing isn't it? The vision of the ideal person that none of us can reach. So, we all feel like failures when it comes to health. I was actually reading a bit of Friedrich Nietzsche actually recently it's interesting because he suffered from severe migraines from childhood and as he grew, when he was an adult, he kept getting those, he experienced severe mental health problems, cognitive decline and died young. So a lot of his philosophy was thinking about what it means to be human in the context of ill health. And he made the interesting observation that actually it's illness which is the human normal; because it's utterly natural and because we have got to start thinking about health differently. So, I was surprised to see that sort of thinking even coming that early on with Nietzsche so, yeah.

Bethany: Yeah, that is really interesting. It makes me think too of I've been thinking a lot about Julian of Norwich, lately I don't know how much you've read of her but her famous quote is like—

Shane: Not much.

Bethany: Okay. Well, her famous quote is like the all will be well and all will be well and all manner of things will be well. And she spent most of her life kind of

in a room because of illness and did most of her prayer and thinking. And that's kind of the thing that she came to an end. So, it's interesting to see what kinds of things come out of this period of unhealth too and how we think about the pursuit of health.

Shane: Yeah. We live in a world which is so much unable to deal or to treat disability or illness as normal that at the beginning of life is there a genetic problem because disability is tragedy, the only solution is to abort it. In the middle of life if illness or disability arises, we have to fix it and pay that, and I'm not complaining about that. But otherwise there is this sense that we've got to euthanize. So, you see so many movies like *Me Before You* or *Million Dollar Baby*.

Bethany: Yeah, yeah.

Shane: Where the only suitable way of dealing with this so called tragedy of disability is to end the life.

Bethany: Exactly.

Shane: Our society just doesn't know how to contemplate health or envision health in the normal ups and downs and eventual decline of all human life.

Bethany: So, given that, given the fact that ways that we currently do think about health are not necessarily leading us to helpful and truthful places, how did you decide to approach this question about what is health?

Shane: Yeah. It looked for me it probably didn't start with health. It started with thinking about happiness. I had the spinal cord injury, I spent seven months in jail, it felt like jail. Seven months in hospital. And when you're in hospital you're just desperate to get out. So, but when I got out of hospital, I came home and it wasn't really until I got home that I faced up to the loss that I had with spinal cord injury and I don't want to go into that now but I guess I was really unhappy.

Bethany: Yeah.

Shane: And so, it was really in the pursuit of trying to find happiness that I came across the virtue tradition. In fact, I should say a story of slightly bizarre providence. Because I teach theology and Christian ethics, I was reading Alasdair MacIntyre's *After Virtue*, and then right in the middle of the holiday in 2010 where I broke my neck, I was reading his *Dependent Rational Animals* which is intends to apply the virtue tradition to disability. I don't think it's a very good attempt. But putting sitting that aside, I'm not sure what it says about the providence of God or maybe that God got a wicked sense of humor but I was reading about disability the week I broke my neck.

Bethany: Yeah.

Shane: But life is strange.

Bethany: Yes.

Shane: I took that book up again and finished it off and it really got me interested in Aristotle in the first place. Virtue ethics is the study of happiness.

Bethany: Right.

Shane: And so I read *Nicomachean Ethics* and then looked at the Christian vision of that through Thomas Aquinas and also Alasdair MacIntyre's work and it really was the beginning for me of the path back to happiness. He redefined happiness for example, away from pleasure for example, which is the way we normally think about it. He calls that people who spend their life pursuing pleasure, they are slaves, that they lived the life of fatted cattle, he says. So, he envisages a version of happiness which is deeper, which is the whole of life vision of happiness; which is about pursuing meaning and purpose. So, for me thinking about the broader vision of happiness, I started to realize, well, actually even though I lost a lot of things that life gave me pleasure I can experience happiness in different and new ways. And so, it really changed my thinking. And then as I was examining that, it actually started to change my thinking about how I understood health. So, I can broaden that to think about health in terms of flourishing which is I think a nourishing potential to virtue ethics.

Bethany: Yeah.

Shane: Another term I heard recently was integrative health. So, instead of using that narrow term just to talk about biology, integrative health recognizes that we're whole people and so what goes on in your body affects your mind, it affects your social situation. So, that when we talk about health we're on a holistic vision—

Bethany: Yeah.

Shane: Yeah. I mean that was my going into virtue ethics. And then of course I did read some work in disability studies that just blew my mind up. As a person without a disability you know nothing about the world of disability studies, to my shame, and all of a sudden, I got to read the work of some powerful disabled advocates and some wonderfully deep Christian theology from John Swinton and Hans Reinders and various other people. It's such a rich area of thinking and studying and I was just really excited to get into that material.

Bethany: Absolutely. As you're talking I'm kind of wondering what made you decide to like let go like why not just say - why not let go of health? Why not say

okay, someone can be unhealthy but still like flourishing and happy. Like what's the gain by kind of expanding health instead of...do you know what I mean?

Shane: Yeah. Well, I guess it is that notion of integrative health, that we are whole persons. What goes on in their bodies does affect our mind and our social situation and our sense of self. So, I do think there is value in maximizing or getting the most out of all the dimensions of your life recognizing that when I talked about integrative health, I'm not talking about perfection in any way.

Bethany: Yeah.

Shane: Because we suffer from physical, psychological, and social breakdowns as a normal part of human life. It's about trying to live well in the whole of our life.

Bethany: Yeah. I feel like there's a lot of forces culturally I mean here in the US and I'm sure there in Australia as well that are kind of wanting us to keep the idea of perfection and perfect health as something we want to achieve. There's million of dollars that are being spent to convince us to buy many different products too - it's a little bit of uphill battle.

Shane: Yeah. And as that industry showed us, we are doomed to failure. I think what I like about and because even when you're doing that it's, when you hear that, it's about what you look like now or about how fit you are now. The sort of wellness that I'm thinking of, it's whole of life wellness, it's storied wellness. It takes into account the whole journey of life. So, I want to live a good life. I want to be able to look back at my successes and failures and be able to see that I'm on the journey toward meaning towards deep relationships, towards relationship with God. So, you don't need perfection for that to be a good story.

Bethany: Yeah.

Shane: In fact, the best stories are the ones where there was crisis and problem and challenge because it's in the midst of the hard things in life – our own and that of our families, our neighbors, that the best things emerge: resiliency courage, all of these things that are so central to what it is to live well emerge in the struggle and the vulnerabilities and the challenges of life and perfection has nothing to do with that.

Bethany: Right. So, for you like the idea of health is that we actually kind of embrace that fragility and vulnerability that comes with life and that having a holistic integrative health is knowing that that's a piece of what we experienced and that can actually lead to a different kind of happiness that's a deeper nurturing of certain virtues and certain character traits that actually lead to more flourishing.

Shane: Exactly. I should have got you to write my book. Perfect.

Bethany: So, and I think with you I think something that we that I know you've talked about in your work is how people with disabilities when we're talking about health how do we fit in people with disabilities and what is it mean when we bring in disability as a focus into the conversation about health, where does that take us?

Shane: Well, for me, I guess what I've discovered in terms of disability that we tend to figure it as a marginal topic.

Bethany: Right.

Shane: I know that if you've got a book with disability in the title it's going to be a very small group reading and I think that actually a real shame.

Bethany: Yeah.

Shane: Because what you're dealing with or what you're exploring with people with disabilities is not inspirational heroes, but you're dealing with people who have had to face up to the vulnerability, the challenge, the fragility of life and also the power and the potency of sort of working through these challenges. So, my, the joy of working with disability is that it has given me great insight into human life both personal human life but also social life; just the social model of disability, that's really important in disability status. This is not something that I've thought about before but the recognition that we tend to think of bodies or of disability as a problem of the body, which it is, but the realization that actually society disables us because it excludes us from buildings or from ways of learning that our suited to our particular brain, etcetera. So, and that actually when you think about that notion that's not just true of people who we labeled "disabled" that's true for all of us in human life. So, this notion of the social model of disability has such a broad application.

Bethany: Yes. And so what do you think about in terms of maybe as a society and maybe as individuals in it, the kinds of virtues that given the fact to we do have structures both built structures and relational structures and informational structures that are exclusive and that do disable people, what are the kinds of virtues that as a society and maybe as individuals within in it we would need to be able to live well both as individuals and together?

Shane: Yeah. Look, it's a really great question. I might just give our listeners a brief background statement because I've been talking about, we've been talking about the good life.

Bethany: Yes.

Shane: And I said it's connected to the virtue tradition and you might say, well, what does the good life got to do with the virtue tradition? And so the logic of the virtue tradition was that virtue – let's take the fruits of the spirit which are Christian virtues, "love, joy, peace, patience, kindness, gentleness, self control against such things there is no law." Virtues are habits of character that become part of a life that facilitate success.

So, for example, if we think about my own experience of a person with a disability, I went from being an independent adult male, I was 39 at the time of my injury and then all of a sudden I had to deal with complete dependency and I couldn't get myself dressed, I get tucked in and out of bed, I get showered. In bed I can't turn off and on lights, I need help with brushing the teeth and it's a sudden transition in life and it became apparent to me that I needed to actually learn new virtues to deal with this dependency. I needed to learn patience for example to wait for people to do things. To wait for the medical professionals and doctors, who are always late. And if I didn't learn that virtue of patience then I paid the price because I might get angry with nurses or carers so that obviously hurts them, but they're going to be more reluctant to care for me. So there's this sort of circularity here, so, I needed to learn virtue to live well. And that is of dependency but also independency. So, I had to try and work out new ways to become independent and there is a sort of fascinating balance between dependency and independency.

Bethany: Yeah.

Shane: And I guess the first thing to know is all of us are born completely dependent on our parents. We grow to become more independent as we get older but in fact we never completely independent.

Bethany: Right.

Shane: We're always at risk of disability or sickness or illness. And then as we age we tend to become more dependent again. So, negotiating the balance between dependent and independent is an essential part of human life and virtues really, you need to develop virtues to do it well.

Bethany: Absolutely. And I think it's I feel like it's worth to even thinking about is independence like as followers of Jesus, as Christians, how important is independence? Is that a virtue that we should care about? Because on one hand to kind of flourish as individuals, as people God created us to be, seems good. At the same time, I feel like there's so much about the body of Christ's interconnectedness and us needing each other as a community that it's hard to - whether we should even think about independence as a goal, I feel like it's a real,

or how much we should think about it and what way we should think it. It's kind of live question for Christians because in the disability—

Shane: Yeah, it's such a good question. I mean, for me, we live in a society which independence is everything. And so, for good reason, the Church has criticized this but it was coming, it was dealing again with disability and that it did remind me that yes it's important that we critique the focus on the self made man that seems to be part of the vision of our society. But independence is still an important and the worthy goal, I think one of the things about disability is that the society has always treated them as though told them what to do.

Bethany: Right.

Shane: Just sort of paternalism is so much a part of a disabled experience. So, it's a matter I think of balancing dependency and independency, maybe we should use a different word: interdependency.

Bethany: Yeah.

Shane: There's a sort of an irony actually with independence. And that is that it may, certainly for me, for example. For me, to get us to maximize my independence I might actually need more help. So, independent doesn't mean doing things on my own—

Bethany: Right, absolutely.

Shane: —I'm not interdependent. It's the exact opposite.

Bethany: Yeah.

Shane: Disability taught me that actually.

Bethany: Yeah. Well, I think and I think the thing about independence that gets tricky too are when we talked about folks with intellectual disabilities or maybe more profound intellectual disabilities who really maybe don't do much independently or any kind of like proactive movement, and then how do we think of flourishing, what is that look like for people who really are living lives of real dependence, complete dependence and how do we think about that as—

Shane: Yeah. Look, this is really interesting area and I should say my expertise isn't with people with intellectual disabilities. But I certainly obviously got close friends with a daughter who is profoundly disabled. So, I've done a lot of thinking about this and I still think even with people who are extremely dependent whether that's physical or intellectual, we still want to provide as much of this possible

empowering support. Because I think too long we've assumed for example that people with intellectual disability need us to decide everything for them.

Bethany: Yeah. That's very true.

Shane: Yeah, disability rights has known. So, let's provide them the supports so that they can decide their future now. What does that mean for people with really profound disability, I still think you've got the same goal as much as is possible.

Bethany: Yeah, great. So before we move on, I want to ask just quickly: I know you've talked this specifically the virtues of humility the thoughts about humility and pride and I know that as you've explored some of these question about health and especially in the writing now, those particular virtues have come to the fore in interesting way. So, if you want just take a minute to talk about some of those explorations I think that's really interesting.

Shane: Yeah. Look, I've done some writing in my next book and thinking deeply about humility. I first encountered it actually, I was reading a Jewish Christian disabled person who had a similar injury to mine - a spinal cord injury - and she was talking about the humiliation of incontinence and I have a catheter and regularly wet my bed. I can be out and about and all of sudden, something goes out wrong and I've have wet pants or bowel accidents. And so, she was talking about the transition between humiliation and humility. And so I was doing some thinking and reading about humility in Christian tradition, take for example Thomas Aquinas, humility is it's often about thinking less of ourselves, keeping our pride under control.

Bethany: Right.

Shane: But I was sort of imagining humility is not so much about self control but about letting go. It's the preparedness to say I'm not going to be embarrassed or shamed or judged by this thing that is going wrong. So, disability I think has taught me new things about humility. But thinking about it also, it's because it's always people with disabilities who have to be humble but humility is a virtue that should more importantly go the other direction and I don't often think it does. So, medical professionals, society as a whole for example it's the humility of society to say I shouldn't be paternalistic. We shouldn't set up our structures to tell people with disability how to live.

In Australia for example, what I meant is that recently implemented the National Disability Insurance Scheme which is massive multi-million billion dollar project which allocates funding to people with disabilities. So, that they can decide where to spend the resources for their own care and wellbeing and Australia by the way, has a much better health system than the United States. I can't imagine a project like this getting through over there, but probably a conversation for

another day. So, hopefully, these sort of virtues and values find their way into the societies in which we live as well.

Bethany: Absolutely, yeah it's really fascinating. I really look forward to reading your work on this. And I think the other piece that's interesting is this connection then going from what do we mean by health, how do we think about it? What kinds of virtues allow us to be holistically healthy, then there is this connection between health and healing because obviously whatever we think health looks like impacts what we think healing looks like, since healing is an increase in health.

Shane: Yeah.

Bethany: So, it's an interesting way to think about how if we are kind of reframing health, there's a way we also are reframing healing.

Shane: Yeah. And look, this is I'm sure this is a big question for all Christian nowadays certainly in my community in the Pentecostal community.

Bethany: Yeah.

Shane: It's a big deal and I have spoken to countless people with disabilities who have sorts of experiences and I, for example, went to a conference where I'm in a wheelchair so, the wheelchair seating is limited and the place I could put it was sort of right down in the front of the speaker, who then talked about half an hour about faith and healing and that faith results in healing. You feel like the elephant in the room. You'll see sometimes it feels like there's a little bit of dishonesty there, you feel like when they're talking about this, they just never quite want to look your way as you're sitting there in a wheelchair. And sometimes I'm not sure they even believed their own message but—

Bethany: Yeah.

Shane: This matter still comes up regularly. So, the whole question of how do we understand faith for example, if you haven't been healed or if you got a permanent disability.

Bethany: Right.

Shane: Really important topic. It's familiar with broadening my understanding of health and wellness really helped me navigate this question.

Bethany: Yeah. I mean it really would be helpful if we did think about health in this more holistic sense and realized that if we really are thinking about health in terms of kind of happiness or in terms of flourishing as a follower of Jesus, then

we would want people to be healed but that won't necessarily mean that they were cured, because it's possible that—

Shane: If we say for example that illness/disability is normal, then whatever we mean by health doesn't have to involve the pretend elimination of that.

Bethany: Right. And I think it is interesting because I feel like the complexity in this issue is, let's say, does admitting that or coming to terms with a different notion of health mean that everybody who had a disability would cease to long for some kind of physical cure? And I feel like it's tricky because people can on one hand feel like the circumstances and their embodiment have brought them different kinds of virtues and different kinds of path in life and at the same time for some people there's still this - I have friends who love so much about their life and feel like they're flourishing with a disability, but at the same time, are thinking about a physical cure and hoping that God would provide that at the same time, and holding those things together is a tension?

Shane: Yeah. You and I were talking just privately last time, and it's kind of interesting you actually challenged me on that. And yeah, you know that that none of this means that it's wrong to pray for healing or even to believe that God can do something miraculous. And certainly, I wouldn't want to be saying that. I should say with my own spinal cord injury, I would take a healing tomorrow. I've learn lot, I've enjoyed a lot but living with spinal cord injury isn't just a social problem. It's also a problem with my body that causes pain and loss. And so if I could get a healing tomorrow I would take it whether that was my medical intervention or something miraculous. So, yeah, I mean I think you're right that there's nothing in fact surely faith involves crying out of your heart's desire and so, prayer for healing is just an expression of our innermost desires and obviously that's not something that I or that God would reject but I just think we need to balance that with the recognition that faith doesn't mean just because you pray for something, you'll necessarily get it. And I think it's a misunderstanding of the meaning of faith.

Bethany: Absolutely.

Shane: And that's the problem is, right.

Bethany: And it's also hard to separate out when we're living in culture where health is defined so much in terms of a kind of physical what we consider to be a physical perfection, how much of that seeps into our understandings of our bodies and influences the fact that we want to pray for that. So, it's an interesting, so I think—

Shane: Very true.

Bethany: Yeah.

Shane: Our desires are framed by the culture in which we live.

Bethany: Exactly.

Shane: That comes out in our prayers, so yeah that's a good insight.

Bethany: So, just as we're kind of wrapping up our conversation today, I kind of just want to talk about some thoughts going forward like given this idea about health given that we follow a Jesus who did offer healing that I perceive as pretty holistic, but that gets interpreted in lots of ways. But how would we think about healing, about health and what would be some kind of productive ways of moving forward both in practices in conversation that you'd like to see in the church or just for Christians in general?

Shane: Yeah. Well, look, I guess I think let's start to talk about a holistic integrative vision of health, we can talk about the good news of the kingdom of God is the idea that God wants human society and us as individuals to flourish. So let's start to talk about what that might mean. and I think the summarized message here is that flourishing is about our living well. It's interesting that notions of flourishing are stories, that's how we communicate our vision of the idea and the great thing about or the power of the Christian's gospel is that that's also a story. It's not a set of doctrines but it's a story in which we're invited to be a part of, so, I can get taken up in this larger story of the gospel. So, when I think about what it means to pray for me to live well or to pray for others to live well it's that they might get taken up with this large wonderful miraculous powerful story of the gospel and that God will enable us to live well in the midst of the struggle and the ups and downs and the breakdowns and the successes of life.

Bethany: I love that and I love to add one more thing to that. Thinking about that holistic understanding of being taken up in the story and thinking about health as this more integrative holistic thing. I feel like when we do put those lenses on and then do read the healing narratives in the Gospels that have in some ways been interpreted to lead to experiences like you had where you're sitting in the front row and having to hear this kind of terrible message about how if you have enough faith then your body will be cured. But that if you do put this lens on for what you're talking about in terms of this different vision of health that isn't just by a medical definition that when you do read about what Jesus is doing, you see that it is leading to a deeper kind of flourishing than in just oh, you're eyes didn't used to see and now they do.

Shane: Yeah.

Bethany: Or you used to be on a mat and now you're not but it's like actually now you're in a community, you're part of the followers of Jesus. You've been named "son" or "daughter" and part of the family of God. There is all these different changes that the whole community has gathered around and is seeing you in a new way. I mean there is all this stuff that's happening that's beyond just to kind of the healing stories would be one verse long if all that mattered was the your eyes weren't functional and then they were. So, clearly like this vision that you're talking about of health is something that is also true and the people who are invited to deeper flourishing who Jesus encounters.

Shane: Yeah. It's such a shame that the story of Jesus gets reduced in that way because one of the consequences of that is people with serious illness and disabilities can sometimes find those stories to end up with another form of depression rather than liberation.

Bethany: Yes.

Shane: And so yeah, we needed a bigger vision of what the Kingdom of God is and what the healing means. Precisely, that's what I guess the sort of work you're doing exploring those healing narratives and the story of Jesus in the context of disabilities is so important.

Bethany: Yeah. I'm hoping it will be. And maybe you can have just give as we close, just give a little more information about when your book will be available and any other information you want to include here as we end?

Shane: Yeah. Well, look for those who are interested in just my story, you can get on Amazon *Husbands Should Not Break* which is my memoir of the first three years of dealing with the injury but I guess the book that I'm most looking forward to because the combination of seven years of thinking with *Crippled Grace*, it's being published with Baylor University Press and it's coming out in March next year (2018). In fact, it's part of a series on religion, theology and disability which is headed by Amos Yong so, one of your members of faculty who is on that series, so—

Bethany: Great. Well, thank you so much for your time and for your good work. I really look forward to reading your book and talking more in the future. It's such important counter cultural stuff that I'm grateful for your thinking and work in this way.

Shane: Yeah. It's delightful to talk to you as well, Bethany. Thank you.

Bethany: Okay. Take care.