Christian Psychology and the (Ir)elevance of Jesus

Alvin Dueck, David Goodman, and Adam Ghali

One might expect that the character of Jesus would play a significant role in a psychology that purports to be Christian. Although the psychology of religion literature is replete with references to God, it is virtually silent with regard to the second member of the Trinity. Furthermore, theologically informed psychologies that invoke a Christological frame often remain insensitive to the ethical import of Jesus' life as a Jewish prophet. The result is a psychology that may be concerned about professional ethics but not an ethic that shapes the substance of psychotherapy itself. Christian psychology has been amnesic regarding Jesus as a Jew observant of the Mosaic law. The implication is that Christian psychotherapy may be Christian in name only and simply reflect the prevailing assumption of therapeutic neutrality.

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In this essay we propose the relevance of Jesus by emphasizing his Jewish prophetic identity and by extrapolating his Jewish ethic for psychotherapy. What is easily overlooked, we argue, is that Jesus was perceived

Alvin Dueck is Professor of Psychology and holds the Frank and Evelyn Freed Chair for the Integration of Psychology and Theology at Fuller Theological Seminary, School of Psychology. He is author of Between Jerusalem and Athens: Ethics, Religion and Psychotherapy and with Kevin Reimer, A Peaceable Psychology. David Goodman is a Clinical Fellow at Harvard Medical School/Cambridge Hospital, a Research Fellow at Boston University, and an adjunct faculty at Regis College and Lesley University. He has a Ph.D. in Clinical Psychology and a Masters in Theology. Adam Ghali is a doctoral student in clinical psychology at Fuller Graduate School of Psychology. His research interests include psychology of religion, the intersection of psychology, philosophy, and ethics, and cultural issues in psychology.
by his own people as a Hebrew prophet with a dynamic and substantive ethical calling. The Jewishness of Jesus, a concept not previously well-considered or regarded in Christian theology and psychology, has implications for the sacral nature of psychology and psychotherapy. Specifically, we argue, that the Christian therapist will consider more seriously the moral tradition of the client, that therapy is, at best, a form of socialization into a sacral culture, and that the character of the Christian healer is most charismatic when it incarnates the ethic of Jesus.

We will proceed as follows. We begin with two examples to set the stage for our argument. We examine the transmutation of ethical issues in the writings of Sigmund Freud and then note the silence regarding Jesus as prophet in a recent account of Jesus as healer. We note the bias against Hebrew ethics in nineteenth-century New Testament research and then point to the burgeoning literature on Jesus as embedded in Judaism. We outline our assumptions regarding Jesus as an observant Jew who prophetically calls us to a faithful and obedient relationship with God. Finally, we explore the implications for a christologically sensitive psychology and psychotherapy in terms of the importance of an ethical tradition, the need for a sacral vision of culture, and the embodiment of ethical ideals of that culture in the healer.

FREUD, ETHICS, AND JUDAISM

We begin by with Sigmund Freud, one of the most influential figures in the therapeutic culture of the twentieth century. A variety of connections have been made between Judaism and psychoanalysis including "Freud's Jewish background and identity, the Jewish origins of the psychoanalytic movement, Freud's identification with Moses, Freud's relation to the B'nai Brith, Freud's dream theories and parallels from the Talmud...." 1 Harold Bloom writes that, "Freud's most profound Jewishness, voluntary and involuntary, was his consuming passion for interpretation."2 And David Bakan has argued persuasively that Freud applied the traditional Jewish method of interpretation to the individual.3 Just as every letter of the Torah was assumed to be meaningful and subject to multiple understandings so also could the dreams and free associations of the client on the couch.

Despite this history, it is difficult to find little more than traces of a Jewish perspective in Freud's psychology. In modern Jewish thought, reason and consciousness are secondary to covenant and responsibility to others, and persons in Jewish thought are most human when taking responsibility for vulnerable others (e.g., widow, orphan, stranger, and alien in the land). Additionally, meaning and consciousness are not static, but rather are relationally forged and interpersonally formed. Universal truths are understood to be idols and unnecessary constrictions that inhibit dialogical interpreta-
tion. Truth is lived between persons and in reverence to the laws of the Torah. Command and responsibility precede consciousness and reason. It is difficult to find substantive corollaries between Jewish thought (as presented here) and Freud’s psychological theories and practices.

Such discrepancy may arise from the fact that, despite his roots in Judaism, Freud nonetheless insisted that his theory was universal so as to preclude reducing his approach simply to “a Jewish national affair.” However, it was in the process of this accommodation to modernity that the critical ethical edge of Judaism is dulled. Psychological, ontological, and metaphysical ideology overpowers the ethical. Philip Rieff, Freud’s most critical interpreter, has made precisely this point in his earlier work, Triumph of the Therapeutic. In a recent work, Rieff demonstrates one instance of this loss. He argues that Freud’s denial of the sacred is the real basis of repression; that repression is the psychological price paid for rejecting sacred truths. In the famous case of “Miss Lucy R,” who is plagued with the smell of burnt pudding, Freud told her: “[R]eally you are in love with your employer, the Director, though perhaps without being aware of it yourself.” The woman agrees and explains that the reason she did not tell him was that she knew, and did not want to know, at the same time. Freud called it repression, but Rieff saw it otherwise: “Repression is the unconscious last and negational playing out of the authority that once belonged consciously to revelation.” Similarly, in Freud’s famous case of Dora, Rieff points out, the moral and ethical issues of her father’s affair and Dora’s attractions are not on the table. Freud thereby deconstructs sacral culture rather than honoring it.

Although repression is Freud’s word for lying to oneself without really knowing it, in sacred cultures “what is suppressed is kept conscious and renunciation is not paid in neuroses but in a realization of guilt. The discipline of inwardness becomes a public and shared condition of inadequacy to the terms of the covenant.” If there is little consensus over what is worth feeling guilty about in the absence of commanding truths, forgiveness becomes facile, and psychotherapy produces a social location outside of the public conversation and the terms of the covenant. Rieff has with clarity identified part of psychology’s complicity with a dangerous anti-sacred project.

JESUS THE VILLAGE PSYCHIATRIST

Donald Capps has participated in the contemporary conversation between theology and psychology with his provocative book Jesus the Village Psychiatrist. He proposes that Jesus’ role as healer was central to the way he was viewed in the first century. He argues that persons whom Jesus healed were suffering from mental and emotional difficulties that
were central in causing or perpetuating the physical symptoms with which they were presenting. Jesus’ methods of healing — his perspicacity, necessary words and/or touch, inspiring faith — reflected the diagnosis of the psychosomatic malady to be healed. For Capps Jesus’ healings did not violate known scientific laws, rather Jesus knew the laws of mind/body interaction and used his knowledge effectively. Capps is quick to point out that this does not fail to make the healings acts of God.15

Capps’ argument rests on demonstrating that the symptoms of those who suffered from illness were consistent with somatoform disorders as described in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR).16 He attempts a detailed diagnostic examination of seven of the healing stories which he believes have the most historical authenticity. These are supported by hypotheses as to how “the symptoms [represent], as the DSM-IV expresses it, ‘a symbolic resolution of an unconscious psychological conflict, reducing anxiety and serving to keep the conflict out of awareness.’”17

How do we assess Capps’ argument in light of our concern to recover Jesus’ Hebrew ethics for psychotherapy? Capps’ efforts to understand Jesus’ relevance for psychotherapeutic practices today are laudable. However, in Capps’ model, centrally concerned with anxieties that produce psychological disorders, the ethic of Jesus does not appear to be relevant to the healing process. We thus believe the questions raised by Capps are important but wonder what the impact of an ethical perspective might have on his approach. He illustrates a model focused on the supernatural that is not primarily ethical.

In contrast, Ched Myers, in his political reading of the Gospel of Mark, puts it strongly when discussing how to interpret the exorcisms and healings. His is critical of attempts to “demythologize [them] according to the discourse of modern medical anthropology, so that exorcism becomes the cure of epilepsy or some other mental disorder.”18 Myers recognizes that the important question is how they functioned in the context of Jesus’ overall mission in proclaiming the Kingdom of God. What is central is that they functioned for Mark as symbolic of the struggle of Christ against the powers of domination and provided hope for the Gospel’s readers. Myers does not have to settle the question of Jesus’ acting through natural or supernatural means. Moreover, in Capps, Jesus is seen as a charismatic healer. However, his is not the charisma of one focused on the commands of God, who inspires in others a commitment to their following these same injunctions.19

The critiques we have raised are consistent with our assertion that Jesus’ healing acts are best contextualized in his larger ministry, his proclamation of the Reign of God and his primary role as a Jewish prophet.
We are concerned that the application of psychological language to Jesus' healings will shift our gaze away from this ethical call and towards a psychological attitude which attempts to be value neutral.

THE CHRISTIAN BIAS AGAINST HEBREW ETHICS

There are strands in nineteenth-century New Testament studies in which Judaism was perceived as degenerate, narrow-minded, insincere, mendacious, rigid, and hypocritical, earning it the pejorative label "Pharisaical." In 1880, Frederic William Farrar thought of Pharisaism as "obedience petrified into formalism, religion degenerated into ritual, morals cankered by casuistry." Scholarships had assumed a fundamental dichotomy between Judaism and Christianity. Johann Semler had proposed two types of early Christianity: "a law-obedient, particularistic Jewish-Christian community led by Peter and a law-free, universalistic gentile Christian community led by Paul." Baur had written that Paul "broke through the barriers of Judaism and rose out of the particularism of Judaism into the universal idea of Christianity." Baur's logic was, however, powerfully driven by Hegel's dialectic of negation and synthesis: the negation of Judaism and the synthesis in Christianity. In contrast to narrow, nationalistic, conservative Jewish Christians adhering to the Old Testament, Gentile Christianity differed in that it was universalist, spiritualistic, and reformist. Fortunately, many scholars have moved past this false dichotomy, offering, among other things, new resources for Christian psychological appropriation. Those in the church today with a pejorative view of "the Jews" reflect the centuries-old stereotypes of Rabbinic Judaism. For those who wish to engage in a theological conversation with the discipline of psychology, such assumptions will only guarantee that the ethical import of a Hebrew Jesus will be considered irrelevant.

JESUS THE JEWISH PROPHET

We suggest therefore that in the final analysis, the elision of Judaism and a Hebrew sense of ethical responsibility reinforce an ethically anemic Christianity capable of collusion with a modern culture with its obsession with matters psychological. The alternative, we suggest, is the recovery of a Jewish ethic embodied in the narrative of Jesus' life. We begin with Jesus as an ethnic Jew, a heritage he never repudiated and consistently drew on in his ethical teachings. We point to an ethical Jesus, a prophet of righteousness whose life embodied the Torah. Finally, we examine Jesus' healing ministry in the light of his ethical mandate.

Abraham Geiger (1810-1874) redefined Jesus as a Jew, a Pharisee to be exact. He was the first Jew to examine Christian texts from a Jewish theological perspective, an attempt to Judaize Christianity. The Europe of
Geiger’s day assumed that Christianity was the highest expression of religion rather than simply one of many religions. Geiger, however, argued that the heart of the Gospels was derived from Judaism. Jesus was a Pharisee who wanted little more than to liberalize Jewish religious practices. Christianity was a version of Judaism bastardized by Hellenic influences. Geiger brought a post-colonial voice in the nineteenth century to critique Christian intellectual hegemony.

Thanks to Krister Stendahl’s groundbreaking work *Paul Among Jews and Gentiles* and E. P. Sanders book, *Jesus and Judaism*, there is now much greater sensitivity to the Jewish ethical context of the New Testament. Amy-Jill Levine, herself a Jew, teaches New Testament studies at Vanderbilt and has written lucidly about Jesus as a misunderstood Jew. She provides us with a helpful way of understanding Jesus in terms of Jewish piety, practices, and purity.

Jesus was raised a Jew and lived his life as such. He is called Yeshua, a common Jewish name. Consistent with Jewish culture he was circumcised on the eighth day, presented to God in the temple (Luke 2:22), and a simple sacrifice of two turtle-doves was offered (Luke 2:24). Jesus was raised according to the law (Luke 2:39), celebrated Passover (Luke 2:41–43), kept the Sabbath (Luke 4:16), approved tithing (Matt. 23:23) and sacrifice and voluntary gifts to the Temple (Mark 12:41–44), gave thanks before meals (Deut. 8:10; Matt. 6:41), wore tassels on his garments (Matt. 9:20), and tended to avoid contact with the Gentiles (Matt. 10:6). In following the Mosaic tradition (Exod. 20:17; Deut. 5:21) and the prophets (Isa. 29:13; Mark 7:8), Jesus places importance on motive and intention. Jesus’ ethic can be found in the Hebrew Scriptures and he builds on it.

But not only do we understand Jesus as a faithful Jew but also as a Jewish prophet calling Israel to its vocation as a righteous people of God. He is a prophet in the lineage of Moses, Elijah and John the Baptist. He announces a message from Israel’s God of warnings against ethical unfaithfulness and promises of God’s faithfulness. Jesus himself hoped for the fulfillment of the Jewish yearning for the “world to come,” a vision that was ethical within a particular political context. A new era would dawn in which God would end Israel’s exile and domination by pagan rulers, reconstitute her as a righteous people, and forgive her sins. In this sense Jesus differed little from preceding Jewish prophets and this is how the average first-century Galilean was likely to have viewed him.

Though little reference is made to Jesus as a prophet in the later writings in the New Testament, the textual evidence in the Gospels is incontrovertible. In the tradition of John the Baptist, Jesus was not simply a sage, teacher, healer, or charismatic wonder-worker. As a prophet he was one who spoke truth in the name of Israel’s God. Jesus saw himself as “the
voice of one crying out in the wilderness, 'Make straight the way of the Lord'" (John 1:22–23). Jesus' self-identification as a prophet is clear when he says: "A prophet is not without honor except in his own country and in his own house" (Matt. 13:57/Mk. 6:4). The Israelites of his day saw him as a prophet (John 6:14; 7:40). When he asks his disciples who do people say that he is, they reply: "Some say John the Baptist, others say Elijah, others one of the prophets" (Matt. 16:14). Matthew tells us that those who wished to arrest Jesus feared the crowds, "because they held him to be a prophet" (Matt. 21:46). Finally, he is on trial because he is considered a false prophet (Matt. 21:12–13/Mk. 11:15–19/Lk. 19:45–8). The centrality of prophetic witness in Jesus ministry is beyond question.

Jesus urged Israel to follow a new and different way, one that included the weightier matters of the law: justice, mercy, faith, and love of God (Matt. 23:23; Mark 12:32–33; Luke 11:42). Jesus' ethic is that of a Jewish prophet calling for holiness embodied in the Torah. In substance and authority, Jesus' ethics finds its source in God. No one is good but God alone, Jesus reminds his disciples (Mark 10:18). The Shema, which is at the heart of Torah ethics, is central to Jesus' own ethic – the love of neighbor (Deut. 6:4–6; Mark 12:29).

The Mishnah suggests that the good interpreter is one who should "make a fence" for Torah by interpreting in ways consistent with the tradition (m. ‘Abot 1:1). In similar fashion Jesus erects a protective fence that preserves the plain meaning of the written Torah. Jesus sides with Scripture over the Pharisaic halakah (Mark 7:8–9). The Decalogue's command to honor one's parents takes precedence over the Pharisaic laws about vows. Jesus engages in the same mishnaic work of interpretation as the Pharisees, using the same hermeneutical principles and calling on his detractors to honor the authority of the Torah.

In summary, it seems that the gospel writers functioned with an essentially Jewish notion of sin and morality, which followed naturally from Jesus' example in a "strongly scriptural interpretation of Judaism, the need for complementarity between formal observance and the 'weightier commandments' about love for God and neighbour; his stress on moral intention, and so on."

HEALING AND HOLINESS

Jesus the prophet was mighty in word and deed (Luke 24:19) but there were other prophets who engaged in symbolic actions and healings (Mark 9:38–43). How was Jesus different? We suggest in two ways. His healing was part of a larger narrative about the reconstitution of Israel's identity and in that healing/illness was a moral matter. It is precisely this ethical context of healing that we believe needs to be recovered for contemporary
healing.\textsuperscript{32} He was less an itinerant purveyor of timeless truths but more a Jewish prophet repeating the Jewish hope for “the world to come.” “His announcement of the kingdom was a warning of immanent catastrophe, a summons to an immediate change of heart and direction of life, an invitation to a new way of being Israel.”\textsuperscript{33} In doing so Jesus was affirming the basic Jewish paradigm that if Israel was still languishing in misery, YHWH must act to defeat her enemies. The healings were an indication that Israel’s God was Lord of the world. They were signs that the long exile was over; the new exodus had begun.

We believe that the ethical significance of the healings has been made secondary by other agenda, namely, the determination of how, not why, they were achieved. Wright argues that the mighty works described in the Gospels are not offered as proof of Jesus’ divinity.\textsuperscript{34} There were indeed others in Jesus’ day engaged in exorcism and Jesus did not condemn them. Rather Jesus’ healings were a welcoming of the marginalized into the people of God, it was a matter of justice and equity.\textsuperscript{35}

**THERAPEUTIC IMPLICATIONS**

The moral, we indicated above, has been reduced to the psychological, rewritten as emotional, psychological, or fictionalized. Desire for the transcendent is now hidden in the unconscious, transmuted into aggressive or sexual instinctual drives, and/or functions as an orienting belief in one’s cognitive framework. We propose that a Christian psychology would consider Jesus centrally as a Jewish prophet of righteousness, not denigrating the importance of the psychological but contextualizing it.

We will now draw out the implications for healing.\textsuperscript{36} First, Jesus as a Jew who honors his Hebrew tradition points to the importance of historical particularity for the contemporary healer. Healing takes place in a moral tradition, one that gives meaning to the moral terms that are part of the clinical conversation. Second, as prophet, Jesus functions within a sacral vision of culture. The Christian therapist heals for the sake of a sacral culture. Third, in an ethical culture, the consistency of one’s life with the charter of one’s ethical community shapes the character of the therapist. Healing is a function of charisma, i.e., a life that incarnates the ethical charter of the gospel.

**CHRISTIAN THERAPY AS TRADITION-SENSITIVE**

We have maintained elsewhere that in Jesus’ life and death, his words and ministry, we have a story that can bring healing.\textsuperscript{37} Here, however, we posit that just as Jesus functioned within a moral tradition, so also does the contemporary healer/therapist. Thick moral traditions whether in the form of secular psychological theories or as religious narratives set the ethical
Tradition-sensitive psychotherapy is a validation of ethnic and religious identity associated with local virtues. As such, it affirms the client’s moral narrative with its traditions and symbols. Tradition-sensitive therapy empowers individuals to resolve the pain of mental illness from within the shared meanings of the client’s own community, consistent with local virtues and practices. Health may well include a greater discernment of and commitment to the virtues of one’s community of origin. Where there is serious need (from the client’s or the therapist’s point of view) for critique of the virtue language of the client, the therapist does not invoke moral principles transcendent to the client’s community but focuses on those emerging from the central convictions of the community. Where the client seeks to remain within the community (perhaps even rejecting parts of the majority culture), consistency with the charter of the client’s community is explored.

The thick, tradition-sensitive, Christian clinician honors the client’s particularity, his or her embeddedness in a preexisting moral, historical community. The tradition-sensitive clinician rejects a transcendent position encouraging assessment of the client’s virtues independent of tradition-engaging conversation. More often than not, the clinician and client will represent different traditions, but each should be enabled to speak from within those particularities as necessary.

Since the client comes to therapy and often implicitly learns speak and value the language of their therapists, therapeutic conversation is not a neutral dialogue. Tradition sensitivity demands an honest reappraisal of the unique virtues espoused and practiced by each of the participants in the therapeutic conversation. Recognizing the power differential in the client-clinician relationship, tradition-sensitive therapists are sensitized to their own definitions of virtue along with potential effects they could have on their clients.

The tradition-sensitive approach to psychotherapy elaborates on the morality of the client in that clients are assisted to rediscover the craft of living from within their own moral tradition. The telos of the encounter is located first in the history of the client’s moral tradition and then the latter is able to reformulate her own view of a problem based on an integration of what is brought to the session and what transpires within it. However, one privileges the shared meanings the client brings from his or her community. The nature of justice, truth, and the good are then local, nuanced by the client’s primary community. Therapeutic conversation on this model is not a neutral dialogue.
CHRISTIAN THERAPY AS SOCIALIZATION INTO SACRAL CULTURE

In the 1960s Philip Rieff stormed onto the scholarly stage with his critical analysis of Sigmund Freud and the psychologization of American culture. Therapy socializes clients, he insisted, into a new culture freed of the starched collar of tradition. Religion, Rieff laments, has become little more than self-fulfillment. In an interview with The Guardian he scolded psychologized religionists:

I think the orthodox are role-playing. You believe because you think it’s good for you, not because of anything inherent in the belief. I think that the orthodox are in the miserable situation of being orthodox for therapeutic reasons. . . . So Christianity becomes, therapeutically, “Jesus is good for you.” I find this simply pathetic.

What constitutes Rieff’s lament? It is for him the passing of sacred cultures, those cultures that emanated from Abraham: Jewish, Muslim, and Christian. In sacral cultures life is lived in response to the command, grace, and love of God. These cultures understand that God is above human authority and that God’s revelation makes a demand on us. Rieff reminds us that Jesus says to the rich young ruler, “Keep the commandments.” Personal identity in sacral culture is a function of one’s response to the command of God, and the needs of the “not-I,” the other. In his view, the range of possibilities my personality can take is constrained by my relationship to a sacred authority. Happiness means right living, not the freedom from constraint. Personality is shaped by the interdictions obeyed and the remissions graciously extended. When Augustine, at a child’s injunction, takes up the Scriptures to read, he reads an interdictory passage. To quote Abraham Heschel, “To be is to obey.” That destructive forces in modern culture have marginalized our relationship to sacred authority comprises a major element of Rieff’s critique.

Therapy as we know it does not prepare clients for life in a sacral culture. Contemporary therapy prepares individuals to live in modern and postmodern cultures that Rieff considers anti-cultures, parasitic on sacral cultures. Therapists in modern and postmodern cultures are its high priests, helping émigrés from sacral culture make the transition to contemporary culture. In this sense, modern therapists are the champions of a culture devoid of sacred references. They assist clients from sacral culture to reinterpret their guilt as false guilt, to understand their feelings of alienation as symptoms of this transition, and to deconstruct the demand of revelation as arbitrary and fictive, an irrelevant social construction.

We suggest therapy that calls itself Christian would know how and
when the language of the sacred is appropriate. In sacred cultures the apex is the “I am that I am (Exodus 3:14). Identity in sacral culture is a function of one’s response to the command of God, to the “I am.” The sacred self cannot be communicated; it is more than identity.

THE CHRISTIAN THERAPIST AS CHARISMATIC

Rieff has helped us understand the nature of sacral cultures and how therapy might function in such a culture. We turn to him again because we believe that Rieff makes a major contribution in helping us understand thick therapy from within a christological frame. It is in his book Charisma: The Gift of Grace, and How It Has Been Taken Away from Us, that Rieff points to the positive role of charisma in sacral cultures. Far from contemporary notions of charisma as celebrity, Rieff understands charisma as the inspiration that comes to a person or persons who enter into a covenant with God. Rieff’s work becomes a boxing ring where he clashes with the great sociologist Max Weber, whose view of charisma is utterly emptied of substantial religious meaning. It is because of Weber’s legacy that charisma is now perceived as the exclusive talent of celebrities, artists, and politicians who are worshipped by a modern/postmodern public.

Rieff’s call for a rehabilitated charisma, we suggest, is a template for the sacral therapist working in a modern/postmodern culture that continues to undermine sacred cultures. Rieff suggests that the charismatic figure is one who embodies the interdicts of sacred culture in such a way that his or her life becomes exemplary. Charisma, Rieff asserts, is ultimately embodied in the personhood of Jesus. Rieff comments: “To live without this high fear is to be a terror oneself, a monster. . . . All holy terror is gone. The interdicts have no power. . . . A great charismatic does not save us from holy terror, but rather conveys it.”

Charisma is the consequence of a life that embodies sacral ideals. Herein lies both the authority for, and the source of, healing for Rieff. He states: “I understand the charismatic as somehow in truth an innovative resolver of ambivalences by the introduction of new interdicts, a transgressive figure.” Rieff notes that Christ offers a charisma that reinstates the legitimacy of guilt for moderns by raising expectations for social obligation and fidelity. Rieff reminds us of our own theological narrative, that of the covenantal nature of God’s revelation in Christ. This covenant grants us the hope of reconciliation and healing through our character as instruments, an incarnational hope imbued with honest appraisal of human limitation, suffering, disease, and disobedience. This knowledge changes the role of therapist from a secular priest to postmodern culture to an interlocutor between suffering and the sacral order.
NOTES

5. See the writings of Emmanuel Levinas for a sophisticated conceptualization of an ethical philosophy informed by Hebrew definitions of human identity. For an accessible entry point into Levinas’ work see Emmanuel Levinas, *Ethics and Infinity* (Pittsburgh, PA: Duquesne University Press, 1985).
10. Ibid., 134.
11. Ibid., 136.
14. Capps comments: “Clearly, his own contemporaries viewed him as a healer, and many of them considered him to be an unusually gifted healer, more effective than the physicians of his time” (*Village Psychiatrist*, xiii).
15. Ibid., xiv.
19. Rieff, *Charisma*. This concept of charisma will be more fully developed below.
21. Ibid., 111.
22. Ibid., 112.
30. In the early 1980s, the first author (AD) attended an intensive summer course on the role of the law in the Hebrew and Christian Scriptures led by John E. Toews and Millard Lind. That seminar and my reading since have been formative in the development of this essay, together with a friendship with John over the past thirty-five years. His consistent emphasis on Jesus as Lord made the ethical central in his Christology.
32. The point we are making is similar to that made some decades ago by Don Browning. However, our focus is on Jesus as Jewish prophet of ethical transformation rather than that of the Pharisees. Don S. Browning, *The Moral Context of Pastoral Care* (Philadelphia: Westminster, 1976).
33. Wright, *Jesus*, 172.
34. Ibid., 186.
35. Contrasting, for example, the Qumran community, where a maimed person could not be a member of the community. 1QSa 2:3–11, in


38. We lean heavily on the work of Michael Walzer. See Michael Walzer, *Thick and Thin: Moral Argument at Home and Abroad* (Notre Dame, IN: University of Notre Dame Press, 1994).


42. Rieff, *My Life among the Deathworks*.


44. A. Heschel, *Who is Man?*, 97.

45. Rieff, *Charisma*.

46. Ibid., 6.

47. Ibid.