

## Original Article

## Love as the Original Source of Strength for Life and Health

**Jessica Hemberg, PhD, RN**

Postdoctoral Researcher, University Lecturer, Abo Akademi University, Faculty of Education and Welfare Studies, Department of Caring Sciences, Vaasa, Finland

**Katie Eriksson, PhD, RN**

Professor Emerita, Abo Akademi University, Vaasa, Finland

**Lisbet Nystrom, PhD, RN**

Docent, Abo Akademi University, Vaasa, Finland

**Correspondence:** Hemberg, Jessica PhD, RN, postdoctoral researcher, university lecturer, Abo Akademi University, Faculty of Education and Welfare Studies, Department of Caring Sciences, PB 311, 65101 Vaasa, Finland. E-mail: [jessica.hemberg@abo.fi](mailto:jessica.hemberg@abo.fi)

### Abstract

**Background:** Love is seen as important as a basis for the caring-relationship but very few studies have examined the ontological relationship between love and health.

**Aims:** The aim of the study is to uncover a deeper understanding of love as the core of life and as the human being's source of strength as well as love's relationship to health. The research questions are: what characterizes love as the source of strength for the human being, and what is the ontological relationship between health and love?

**Methodology:** Hermeneutical reading and an abductive approach was used for uncovering texts by Kierkegaard and texts from interviews with adults who have lived through personal suffering and regained health.

**Results:** Love is the origin of everything and as the human being's source of strength. Love is the human being's holy entity towards which the human being's inner longing turns. The ontological relationship between love and health reveals that the core of health is love as part of a trinity, where love has the deepest dignity. The love of one's neighbour is seen as a health potential and as the core for becoming in health.

**Conclusion:** According to this study, love and health are bound to each other through the alliance with eternity as understood by the metaphor of *the human being's original home*. Love brings new light to life which may provide strength for health and life.

**Keywords:** love, health, source of strength, strength, wellbeing, life, hermeneutical reading, abduction, Kierkegaard, interviews

### Introduction

That love is important since it constitutes the basis for the caring-relationship is something that most researchers nowadays agree on and few question. However, very few studies have examined the ontological relationship between love and health.

Health research today emphasizes a holistic approach towards health (Hemberg, 2015; Eriksson 2002; 2007; Santamaki Fischer et al., 2010). The existential dimensions with regards to health and becoming in health are also highlighted (Berg & Sarvimaki, 2003; Rehnsfeldt & Arman, 2012). Several studies point out that

spirituality and living near death may open new dimensions that may provide a sense of vitality and renewed meaning in life (Hemberg et al., 2016; Strang & Strang, 2001; Tibus & de Souza, 2011). In this study, spirituality refers to a form of mutual communion in a concrete or an abstract meaning. Also faith, hope and love are viewed as spiritual since the human being, when experiencing these, may experience a sense of communion with something. Several authors write that the recreation of a sense of hope and meaning in life enhances strength for health (Chen & Chang, 2012; Juvakka & Kylma, 2009; Wu Chin et al., 2009).

Green and Shellenberger (1996) state that although love promotes health, the scientific study of love and health is in its infancy. The authors mean that love has an impact on health and especially on physical health. The authors describe love as energy by virtue of its capacity to produce effects. Levin (2001), on the other hand, emphasizes that love and health are interconnected and that a loving relationship with God has a significant impact on health. Levin mentions the possibility that loving and being loved by God may be of health significance, and therefore seeks to understand the link between religion and health (Cf. Henderson, Gore, Davis and Condon, 2003; Strang & Strang, 2001).

Thorkildsen (2013) writes that no human being can exist without love and Esch and Stefano (2005) state that love has consequences for health and well-being in that it is capable of promoting health and wellbeing. In alignment with the above mentioned statements, Watson (2005) writes that there seems to be a lack of a meaningful perspective on the very nature of our humanity and the fact that health is grounded in and sustained by and through the very nature of our being and becoming more human seems to have been forgotten.

According to Tillich (1954), love is a drive toward a unity of what is separated and this drive may be seen both in connectedness with others and with something larger than oneself. It may also apply to connectedness with oneself. Parry and Glover (2010) underline the importance of preserving the human being's dignity and desire for love in order to make way for the human being's path to becoming in health.

Murray, Kendall, Boyd and Benton (2004) stress the importance of maintaining a role in life where one feels useful and has a purpose in life, and retaining an active role with family and friends. Another approach to health research is the concept of quality of life (Bjork, 2015). Strang and Strang (2001) write that meaningfulness is the most crucial element for quality of life and this may be created by having close relationships.

Earlier studies show that the research area that focuses on health has an indirect indication that love is present and underlies the different findings, although the concept of love itself is rarely directly mentioned. Therefore, this study finds it important to uncover the human being's

source of strength as well as the relationship between love and health.

### Theoretical framework

The theoretical framework of this study is based on Eriksson's caritative theory (Lindstrom, 2014). Love and compassion as well as the alleviation of human suffering constitute the core of the theory. Without love and compassion there may be no true caring or alleviation of the human being's suffering. Health is understood as a "becoming", which concerns a movement towards a deeper wholeness and holiness (Eriksson et al. 1995; Eriksson, 2007; Lindstrom et al., 2014).

The concept of *health potential* (Eriksson, 2007) is used when referring to resources for health. When the human being's inner health potential is touched, a movement occurs that is seen in the different dimensions of health as "doing", "being", and "becoming" in a wholeness that is unique to human beings. Becoming pertains to the deepest level of integration and feeling of wholeness (Eriksson et al. 1995; Eriksson, 2007; Lindstrom et al., 2014).

According to Eriksson's (1992) theory about health, the core of health consists of faith, hope and love. Hope sets the direction for health, and love shapes health. These also represent the core of the movement of health in the sense that they constitute the human being's health potential in the process of becoming in health.

Faith, hope and love are needed, since these constitute the fundamental forms of human strength.

Love as a force is life's greatest mystery and represents the most important source of strength within the single human being (Eriksson, 1987).

With regards to this theoretical framework, the uncovering of love as decisive for both health and life is seen as important.

### Aims

The aim of the study is to, on an ontological level, uncover a deeper understanding of love as the core of life and as the human being's source of strength as well as love's relationship to health. The research questions are: what characterizes love as the source of strength for the human being, and what is the ontological relationship between health and love?

### Methodological aspects

A hermeneutical approach according to Gadamer (2004) was employed in the study. The material used consists of two different texts, one philosophical and one based on interviews with adults.

#### *Texts for interpretation*

The first text used was a classic philosophical and theological work: *Works of Love* (1847) by Søren Kierkegaard. This text focuses on life's existential questions and discusses, love and eternity and the human being's becoming as human.

The interpretation of this text uncovered a bond between love and suffering. Since suffering emerged as important for health the other text used in this study was constituted by interviews with adults who had lived through personal suffering and regained health. Ten interviews were performed, with a total of ten participants (age range was 19 to 64 years).

The inclusion criteria for study participation was being 19 years or older, having lived through personal suffering and regained health and having a desire to share difficult experiences.

The participants were adults who had earlier voluntarily shared their life stories in the media or on the internet and therefore were chosen by the researcher. Initially the participants were contacted by email and received an invitation to participate in the study.

#### *Hermeneutical reading of texts and an abductive approach*

This study consists of a hermeneutical reading (Koskinen & Lindstrom, 2013). The first reading concerned the text by Kierkegaard (1847) and primarily focused on love as the human being's source of strength. Because Kierkegaard does not treat health or suffering in his work, an abductive approach was used (Raholm, 2010; Eriksson & Lindstrom, 2003). Texts from the interviews focused on love and health.

#### *Ethical considerations*

The study participation was approved by the participants when they provided their informed consent. From an ethical perspective, it may be seen as defensible to carry out this study because it might entail an alleviation of suffering for those who put their experiences into words and share it.

The study follows The Finnish National Advisory Board on Research Ethics (2012). Permission to conduct the study was granted by the ethical committee of Abo Akademi University.

### Results

The results provide the ontological understanding that love as the human being's source of strength constitutes the origin of everything. Love is seen as the core of health and love for one's neighbor as a health potential for becoming in health.

#### **Love as the original home and origin of everything**

The results uncovered love (with its origin in eternity) as the basis and source of strength of everything; love represents the core of life. As the source of strength, love is viewed as originating from the abstract other, in other words, the Creator, *the first love* or the human being's original home. In this home, the human being feels safe and secure and may be his or her own genuine self. Love is fundamentally innate within every human being as a little light that waits for a first spark and nourishment in order to become a bright flame. Love is allied to eternity (the universal dimension of life), and through this reflection the human being's suffering in the temporal, earthly dimension of life may be alleviated.

*...where does it [Love] have its origin and its source...Yes, this place is hidden or is secret. There is a place in a person's innermost being; from this place flows the life of love, for "from the heart flows life." (Kierkegaard 1998, 8)*

#### **Love as the human being's entity, towards which the inner longing turns**

The source of strength, love, is seen as the human being's genuine core, towards which his or her inner longing turns and towards which he or she is always drawn. Through love the human being may become the self that he or she was intended to be, meaning one's true entity. Love gives the human being strength and will to life. The human being's inner longing entails an ontological attraction towards the source of strength since this strength constitutes the human being's original home, the seat of the human being's inner room. There is a longing within the human being for an alliance with the universal

and its companionship because the realization that he or she is received in a communion of love with an abstract other may bring hope and joy to the human being.

*...eternity is continually near enough to be available and yet distant enough to keep the human being in motion forward toward the eternal, to keep him going, going forward. This is how eternity lures and draws a person, in possibility, from the cradle to the grave – provided he chooses to hope. (Kierkegaard 1998, 253/Second Series)*

### **Love as the unifying link between temporality and eternity – an inner source**

The source of strength, love, possesses the features of eternity and consequently represents an inexhaustible source of strength. Love has the strength to unify temporality and eternity thanks to its alliance with the abstract other.

Since love is allied to eternity, and through this reflection, the human being's suffering in the temporal, earthly dimension of life may be alleviated. Love originates from the abstract other and goes back to the Creator (regardless if love is targeted at a concrete other or a temporal aspect). In this sense, health and life may be genuinely preserved through love, when this love has its beginnings and end in the abstract other. When the human being experiences him or herself as part of this great communion and allows love to come into life, dignity, joy and love appear, and enable faith and hope in the source of love for becoming in health.

What is it, namely, that connects the temporal and eternity, what else but love, which for that very reason, is before everything and remains after everything is gone. (Kierkegaard 1998, 6)

### **Love as a holy encounter in communion**

The source of strength implies a holy presence and an encounter, the dedication of which entails the ability to establish a reconnection with an inner room of rest and peace. The dedication of the source of strength is primarily concerned with a universal but simultaneously personal experience of being received in communion. It is the abstract other that constitutes this communion, which is seen as the original source of strength for health and life. The abstract other

seems to be an overall dimension, that is, *the first love*, the one who loved the human being and gave the human being life, as the Creator or the abstract other.

Through a holy communion, the human being perceives that it is possible to stay the same, and, thanks to the process of becoming in health, to simultaneously be unique and inviolable even if undergoing change (in a becoming in health). Despite his or her suffering, the human being may realize his or her holy origins, and as a result of this awareness, preserve his or her dignity and value as a human being.

*Something sure happens when you dig in the mud ...you feel Mother Earth close to you...and this changes your perspective. You realize that your own life feels bad and heavy, but it is not the end of the world. (Interview participant)*

### **The mystery of love as a strength - if sacredly preserved**

The concealment of the source represents strength. This concealment must be preserved as sacred because it both represents and sustains the strength of the source. By preserving the hidden and mysterious source as a secret, strength may be preserved. Through the dedication of the source of strength to him or herself, and thanks to the mystery of the source of strength and its concealment, the human being may preserve his or her own humility and ability to wonder about life's holiness. The ability to wonder about the holy, life's holiness as well as the human being's own holiness, despite suffering, creates possibilities for health.

*... instead of being gladdened by love in its manifestations, wants to take delight in fathoming it, that is, in disturbing it. (Kierkegaard 1998, 9)*

### **Love as the core of health - as the deepest dignity of a trinity**

The core of health is love, which also has faith and hope instilled through a trinity. Of these three, love has the deepest impact of dignity. Metaphorically speaking, one could describe *love as a fire*.

Love is assumed to be the inner core and substance of health, while faith and hope act as servants that nourish love and create movement and life in it. Love may occur as a sudden and unexpected first glimpse of light and warmth that disappears in the next moment.

Despite this glimpse, the human being may witness hope and love and possibilities. This may give further glow to the love, whilst faith is the life-giving oxygen without which the awareness of the fire fades away.

These three together are required in order for the human being to receive strength, but it is the fire (love) which is the fundamental core that constitutes the strength.

*...the one who loves, who believes all things, is not directly manifest. He is like those plants whose propagation is hidden – he breathes in God; he draws nourishment for his love from God, he is strengthened by God. (Kierkegaard 1998, 244/Second Series)*

### **The love of one's neighbour as a health potential**

The source of strength, love, unfolds for the one who loves. A prerequisite for the dedication of strength from the source of strength, that is, a becoming in health, is that the human being allows and receives love in his or her life. In the presence of the core of life, love for one's neighbour is awakened and fills the human being with a living force.

The dedication of the source of strength requires an unobstructed alliance between the source of strength and eternity in the sense that the still forces of eternity are in motion and move through darkness. However, glimpses of light come through this darkness as a result of the human being's own active service according to the human calling (the love of one's neighbour), that is, through both giving and receiving in the light of love and joy. Love is thereby fulfilled through action.

*The motivation for me was the grandchildren, that I have them and that I had to pull myself together for their sake... (Interview participant)*

### **Love as bringing new light to health and life**

The encounter with the mysterious and eternal source of strength, love, lights up life. Love provides the human being with a new perspective in life, namely, the perspective of eternity. The encounter with love is experienced as being greeted and welcomed home with warmth and kindness which, in turn, confirms the human being's dignity and provides feelings of safety. The encounter with love touches the human

inner certainty about a deeper existential dimension of companionship experienced as inner peace and which represents an inexhaustible source of joy and vitality. Love as an infinite source of strength for health presupposes an unobstructed alliance to the abstract other, the Creator.

*Then, that day when I received that hug, and experienced that somebody cared for me, I felt that life was still worth living. (Interview participant)*

### **Discussion**

Love is the origin of everything – love is decisive for the human being's being in the world, for health, as well as for becoming in health. Love constitutes the human being's original home and entity, towards which her inner longing turns. The source of love constitutes her true entity that originates from the eternal dimension of the abstract other, the Creator, that is, the human being's *first love* (Cf. Watson, 2005). Henderson et al. (2003) also write that faith in an abstract other is a source for health and other studies have also highlighted the importance of the existential dimension (Berg & Sarvimaki, 2003; Rehnsfeldt & Arman, 2012) as well as the need for a holistic approach (Eriksson, 2002; 2007; Hemberg, 2015; Santamaki Fischer et al., 2010).

Love is the unifying link between temporality and eternity, and may provide the human being with eternal strength. This love may be experienced when the human being is invited and received with warmth and kindness, because this enhances the experience of being unique, worthy and loved, which in turn, reflects a holy encounter in communion. This communion may awake love for one's neighbor which is also seen as a health potential. Spirituality, transcendence and inner strength has a prominent position when it comes to the human being's becoming in health. (Cf. Büssing & Koenig, 2010; Lundman

et al., 2010; Norberg, Bergsten & Lundman, 2001; Wiklund, 2008).

With regards to the ontological relationship between love and health, this study revealed love as the core of health (Cf. Levin, 2001). This study suggests that love, together with both faith and hope, are fundamental for the human being's experience of health and for becoming in health (Cf. Coulehan, 2011; Lohne, 2008; Parry & Glover, 2010; Green & Shellenberger, 1996; Esch & Stefano, 2005).

Love represents the core strength, while hope does not possess an equally deep dignity. Tillich (1954) means that love is a drive towards the unity of what is separated and a connectedness with something. In line with these above statements, this study revealed love as a source of strength that generates a movement for the strength of becoming in health.

According to Eriksson (1992), health consists of faith, hope and love. This study showed that as part of a trinity, love has the deepest dignity (and is also infused with faith and hope, although these are not as powerful as love). Therefore, faith and hope may be seen as preconditions for the dedication of love. Hope and faith therefore also have important roles for health (Cf. Chen & Chang, 2012; Eriksson, 1992; Juvakka & Kylma, 2009; Wu Chin et al. 2009; Strang & Strang, 2001).

This study has shown that love plays the most important part when it comes to health and becoming in health. Other studies have also considered that the process of becoming in health consists of the reminiscence of the inner core, the inner room of love, vitality and desire for life (Hilli, 2007; Saeteren, 2006; Warna, 2002). This study suggests that the human being may become the one he or she was intended to be when he or she acts out of the vitality that originates from this inner room. Love of one's neighbour emerged as the core of becoming in health (Cf. Hemberg, 2015; Saeteren, 2006).

When the human being has achieved peace in the suffering, through the help of his or her inner health potential, the human being has an alliance with the infinite. Love and health are interwoven because the human being's core of health is love and his or her inner room is also love, and the human being's becoming in health emanates from this inner room.

## Conclusions

Love is the source of strength for everything that brings new light to life as it unites the eternal and the temporal. Love and health have a bond to each other through the alliance with eternity as the metaphor of *the human being's original home*.

When life emerges in the foreground and becomes the home of the human being, a dedication of the source of strength, love, is possible. This provides awareness of the deeper existential dimensions of life. Love, therefore, has the potential to provide the human being with an inner certainty that transcends the emotional level which means that although the human being may experience ill-health or difficulties in life, he or she may also become aware of another existence or dimension, which simultaneously may provide strength.

The love of one's neighbour is seen as a health potential and as the fundamental core for becoming in health. This study calls upon further research on health and on aspects relating to love and dignity.

**The work was carried out at:** Abo Akademi University, Faculty of Education and Welfare studies, Department of Caring Sciences P.B. 31165101 Vaasa, Finland

**Acknowledgements:** The authors would like to thank PhD Marinella Rodi-Risberg for language editing the English language.

**Author contribution:** Jessica Hemberg was responsible for the design of the study and for writing the article at all stages of developing the article. Lisbet Nystrom and Katie Eriksson contributed with critical revision of the article.

**Funding:** The study has been funded by Victoriastiftelsen, Svensk-Osterbottniska samfundet and Hogskolestiftelsen.

## References

- Berg, G. (2003). A holistic-existential approach to health promotion. *Scandinavian Journal of Caring Sciences*, 17, 384–391.
- Bjork, E. (2015). A new theme within public health science for increased life quality. *Scandinavian Journal of Public Health*, 43 (16), 85–89.
- Büssing, A. och Koenig, H. G. (2010). Spiritual Needs of Patients with Chronic Diseases. *Religions*, 1(1), 18–27.

- Coulehan, J. (2011). Deep hope: A song without words. *Theoretical medicine and bioethics*, 32(3), 143–160.
- Gadamer, H-G. 2004. *Truth and Method*. First edition 1960. Second Revised Edition. London New York: Continuum.
- Eriksson, K. & Lindstrom, U.A. (1999). Abduction and Pragmatism – two ways to progress within caring science (In Swedish) *Hoitotiede*; 11: 292–299.
- Eriksson, K. & Lindstrom U.A. (2003). *The Dawn II. Clinical caring science*. (In Swedish) Abo Akademi University. Department of Caring Science, Vaasa.
- Eriksson, K. (1992). *Bridges. Introduction in Caring Science Method*(In Swedish) Abo Akademi University, The institution for Caring Science, Vaasa, Finland.
- Esch, T. & Stefano G. B. (2005). Love Promotes Health. *Neuroendocrinology Letters*, 3 (26), 264–267.
- Finnish National Advisory Board on Research Ethics. (2012). Responsible conduct of research and procedures for handling allegations of misconduct in Finland – RCS guidelines. Helsinki, Finland. Retrieved from [http://www.tenk.fi/sites/tenk.fi/files/HTK\\_ohje\\_2012.pdf](http://www.tenk.fi/sites/tenk.fi/files/HTK_ohje_2012.pdf)
- Green, J & Shellenberger R. (1996). The healing energy of love. *Alternative Therapies in Health and Medicine*, 1996, 2(3), 46–56.
- Henderson, P. D., Gore, S. V., Davis, B. L. & Condon, E. H. (2003). African American women coping with breast cancer: a qualitative analysis. *Oncology Nursing Forum*, 4 (30), 641–647.
- Hemberg J. (2015). *The source of life, love – health's primordial wellspring of strength*. Doctoral thesis. (In Swedish) Abo Akademi University Press, Turku.
- Hemberg, J., Eriksson, K. & Nystrom, L. (2016). Through Darkness into the Light – a Path to Health as Described by Adults after Having Lived through Personal Suffering. *International Journal of Caring Sciences*, 9 (2), pp. 393–399.
- Hilli, Y. (2007). The home as ethos. (In Swedish) Doctoral thesis. Abo Akademis forlag, Turku.
- Kierkegaard, S. (1847). *Works of Love*. Edited and translated (1998) by Howard V. Hong and Edna H. Hong. Princeton, NJ: Princeton University Press.
- Koskinen, C. & Lindstrom, U. A. (2013). Hermeneutic reading of classic texts. *Journal of Scandinavian Caring Sciences*, 27(3), 757–764.
- Levin, J. (2001). God, Love and Health: Findings from a Clinical Study. *Review of Religious Research*, (42) 3, 277–293.
- Lindstrom, U.A., Nystrom, L.L. & Zetterlund, J.E. (2014). Katie Eriksson. Theory of caritative caring. In: Alligood, M.R. ed. *Nursing Theorists and Their work*. 8<sup>th</sup> ed. Elsevier Mosby, St. Louis, Missouri, USA, 171–201.
- Lohne, V. (2008). The Battle Between Hoping and Suffering. A conceptual Model of Hope Within a Context of Spinal Cord Injury. *Advances in Nursing Science*, 31(3), 237–248.
- Lundman, Aléx, Jonsén, Lovheim, Norberg, Nygren, Santamaki Fischer, Strandberg. (2010). Inner strength – A theoretical analysis of salutogenic concepts. *International Journal of Nursing Studies*, 47(2), 251–260.
- Murray, S. A, Kendall M., Boyd K., Worth A. & Benton T. F. (2004). Exploring the spiritual needs of people dying of lung cancer or heart failure: A prospective qualitative interview study of patients and their careers. *Palliative Medicine*, 18(1), 39–45.
- Norberg A., Bergsten, M. & Lundman B. (2001). A model of consolation. *Nursing Ethics*, 8(6), 544–553.
- Parry D. C. & Glover, T. D. (2010). Dignity, Hope, and Transcendence: Gilda's Club as Complementary Care for Cancer Survivors. *Journal of Leisure Research*. 42(3), 347–364.
- Rehnsfeldt, A. & Arman, M. (2012). Significance of close relationships after the tsunami disaster in connection with existential health – a qualitative interpretive study. *Scandinavian Journal of Caring Science*, 26, 537–544.
- Raholm, M-B. (2010). Abductive reasoning and the formation of scientific knowledge with nursing research. *Nursing Philosophy*, 11: 260-270.
- Raholm, M-B. (2010). Theory development and the Logic of discovery. *International Journal of Human Caring*. 14: 35-41.
- Santamaki Fischer R., Lundman B. & Norberg A. (2010). Feeling whole: The meaning of being consoled narrated by very old people. *International of pastoral care and counseling*, 64 (1), 1–12.
- Saeteren, B. (2006). Struggling for life in the veil of pensiveness. A life between the pressure created by the possibility of life and the necessity of death. (in Norwegian) Doctoral thesis. Abo Akademi University, Department of Caring Science, Finland.
- Strang, S. & Strang P. (2001). Spiritual thoughts, coping and 'sense of coherence' in brain tumour patients and their spouses. *Palliative Medicine*, 15(2), 127–134.
- Thorkildsen, K. M., Eriksson, K. & Raholm, M-B. (2013). The substance of love when encountering suffering: an interpretative research synthesis with an abductive approach. *Scandinavian Journal of Caring Sciences*, 27(2), 449–459.
- Tillich, P. (1954). *Love, power and justice: Ontological analyses and ethical applications*. London, England: Oxford University Press.

- Watson, J., (2005). Caring Science: Belonging Before Being as Ethical Cosmology. *Nursing Science Quarterly*, 18(4), 304–309.
- Wiklund, L. (2008). Existential aspects of living with addiction – Part II: caring needs. A hermeneutic expansion of qualitative findings. *Journal of Clinical Nursing*, 17(18), 2435–2443.
- Warna, C. (2002). *Virtue and Health*. (In Swedish) Doctoral thesis. Abo Akademi University, Department of Caring Science, Finland.