

## The Problem of Pain

By Daniel Mann

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**What's the "problem of pain?"** It's an argument against the existence of a good and omnipotent God. It reasons that if God is perfectly good and powerful, then we shouldn't have suffering, at least not so much of it. But is this really a problem? No one complains when a successful cancer surgery causes pain. We accept the necessary pain because of the benefits.

However, what if we have psychological tumors that are every bit as lethal as the physical varieties? For one thing, oodles of studies reveal that we suffer from the tumor of self-delusion. [Abcnews.go.com](http://abcnews.go.com) (11/9/05; *Self-images Often Erroneously Inflated*) reports:

In one study of nearly a million high school seniors, 70 percent said they had "above average leadership skills, but only 2 percent felt their leadership skills were below average." Another study found that 94 percent of college professors think they do above average work. And in another study, "when doctors diagnosed their patients as having pneumonia, predictions made with 88 percent confidence turned out to be right only 20 percent of the time."

Confidence can empower, but I'd prefer accuracy over delusions of grandeur, especially from my physician. Such delusions also impose serious obstacles to relationships. Ever try communicating with someone self-deluded into thinking they're Julius Caesar? Not much basis for real dialogue! Or let's just take the garden variety high school senior who thinks they are the next Winston Churchill in terms of leadership ability. It's not hard to envision relational conflicts.

Surprisingly, those who are experiencing mild depression or the results of a trauma do not readily host this nasty tumor. Shelley Taylor (*Positive Illusions*) writes,

Normal people exaggerate how competent and well liked they are. Depressed people do not. Normal people remember their past behavior with a rosy glow. Depressed people are more even-handed...On virtually every point on which normal people show enhanced self-regard, illusions of control, and unrealistic visions of the future, depressed people fail to show the same biases. (p.214)

Sadly, once the psychological torment passes, these aggressive tumors return to an inviting applause. Taylor confesses,

When depressed people are no longer depressed, they show the same self-enhancing biases and illusions as non-depressed people. (p.223)

Perhaps we need suffering as a bridle to restrain our galloping egotism, and foolishly denigrate our Good Physician, who mercifully prescribes *healthy* doses of this bitter medicine.

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