

The Body and the Imago Dei: A Christian Understanding of Human Biology

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Abstract

Throughout Christian history, the doctrine of the *Imago Dei*, the belief that God created humankind bearing the imprints of Himself, has shaped theology, ethics, and our understanding of human dignity. While early interpretations saw the divine image in the spirits, contemporary theology has reclaimed the physical body as central to what it means to be human. This paper explores the intersection of biology and theology, proposing that *Imago Dei* is not an abstract attribute, but a living reality that is mystically embodied in the human form. Drawing from scriptural, theological, and scientific perspectives, it argues that human biology reflects divine creativity, interdependence, and dignity. This embodied vision of *Imago Dei* supports compassionate medicine and a renewed respect for the body's sacred complexity.

Introduction: The Mystery of the Human Body

To be human is to live within a body that both limits and reveals us. This is essentially the idea that every person, by virtue of being human, reflects the image of God (Genesis 1:26). Traditionally, theologians such as Augustine and Aquinas identified this divine likeness with the spirit, the part of humanity capable of reason and communion with God (Augustine, 1991; Aquinas, 1947). Yet such a view may reduce personhood to an inner abstraction detached from the physical world.

Recent theological developments, particularly in Karl Barth's *Church Dogmatics* (Barth, 1958) and John Paul II's *Theology of the Body* (John Paul II, 2006), challenge this dualism. Both thinkers reinterpret the *Imago Dei* as relational and incarnational. According to them, the divine image is expressed through the unity of body and spirit rather than intellect alone. Similarly, Jürgen Moltmann, in *God in Creation*, argues that the divine image is revealed through embodied participation in God's creative and redemptive life (Moltmann, 1993). In other words, the physical body itself partakes in the *Imago Dei*. Adopting this relational framework has profound implications for biology and medicine.

When we study the molecular intricacies that

biochemistry uncovers, from the self organizing systems, cellular cooperation, to the regenerative capacity of living tissue, we see more than just the mechanisms of survival. Such order may be interpreted as an expression of divine intentionality. To study the body, then, is to study a living theology written into the structure of creation.

Theological Foundations of the Imago Dei

Christian tradition has never spoken with one voice about what it means to bear the image of God. Historically, three broad interpretations have emerged:

(a) The Substantive View: Rooted in classical theology, this view holds that humans reflect the image of God through shared intrinsic attributes such as reason, morality, or self-awareness. Augustine viewed the rational soul as the mirror of the divine Trinity, reflecting memory, understanding, and will.

(b) The Relational View: Promoted by theologians like Karl Barth, it locates the image not in individual faculties but within the relationship between God and humanity, and among humans themselves (Barth, 1958). To be in God's image is to exist in love, communion, and responsibility.

(c) The Functional View: Emerging from biblical

scholarship, this view understands *Imago Dei* as humanity's vocation to steward and govern creation (Genesis 1:28). Divine likeness is expressed not in inner qualities but in active responsibility within the created order. John H. Walton, in *The Lost World of Genesis One*, interprets the image as a functional role, where humans represent God's authority on earth (Walton, 2009). Likewise, J. Richard Middleton, in *The Liberating Image*, describes the image as a royal-priestly calling to exercise just and creative dominion that mirrors God's character (Middleton, 2005).

Each of these models contributes to a fuller picture: the *Imago Dei* is not limited to intellect, relation, or vocation, but encompasses the entire human being as a living, acting, and feeling body.

The Human Body as Image and Instrument

In Christian theology, *Imago Dei* grounds human dignity not in capacity or achievement but in essence. Humanity reflects the divine reality in its embodied form; the body is not a vessel for the soul but an expression of personhood. As Jean Vanier posits in *Becoming Human*, the body is the means through which the person makes their presence known to the world (Vanier, 1998).

Philosophically, dualistic models inherited from René Descartes, that is, dividing mind from matter, have shaped modern clinical reasoning (Descartes, 1993). Medicine, consequently, has tended to view the body mechanistically, as a system of parts to repair. Yet Christian anthropology resists this reduction. To bear *Imago Dei* is to affirm that every biological process is tied to the moral and spiritual dimensions of human existence.

This understanding reconfigures how we interpret healing and illness. Disease, while affecting cells and tissues, also disrupts the symbolic integrity of the self. Within the *Imago Dei* framework, medicine participates in what Paul Ramsey calls in *The Patient as Person* the "covenantal act of healing", a participation in divine recreation that restores not only function but meaning (Ramsey, 1970). The clinician's task, then, is to uphold the inherent dignity embedded in each embodied life,

even amid decline or death.

Historical Expressions and Secularization of the Imago Dei in Medicine

Across civilizations, the healing arts have long reflected, often implicitly, the conviction that caring for the sick is a sacred vocation. Ancient medical traditions viewed the physician not merely as a technician but as a moral agent participating in a divine order. In ancient Egypt, priest-physicians restored harmony between the sick body and *ma'at*, the divine order of truth and balance. Healing was thus a liturgical act, binding moral, physical, and spiritual worlds. Similarly, Greek medicine under Hippocrates regarded health as alignment with *physis*, the natural order. The physician's task was not to dominate nature but to cooperate with it, embodying a humility that anticipated later theological notions of stewardship rather than sovereignty.

With the rise of Christian monastic hospitals in late antiquity and the medieval period, this moral intuition found its clearest articulation in *Imago Dei*. Every person, regardless of status or ability, was to be cared for as one bearing the image of God. The hospital was not only a place of treatment but a spiritual community of mercy. Acts of nursing and tending wounds were understood as acts of reverence toward God's presence in human frailty. In this sense, early Christian medicine transformed charity into an extension of divine compassion.

By the middle of the 18th century, the Enlightenment brought about a decisive reorientation. As natural philosophy evolved into modern science, medicine began to detach its moral grammar from theological anthropology. The source of human dignity gradually shifted from divine image to rational autonomy, a move most clearly articulated by Immanuel Kant. In Kantian ethics, the person's worth lies in their capacity for reason and moral self-legislation: humanity is an "end in itself." While this secularized *Imago Dei*, it preserved its moral residue: the idea that human beings possess inherent value that forbids their instrumental use (Kant, 1998). Yet, in

grounding dignity in rationality rather than sacred origin, the Enlightenment also introduced a subtle hierarchy: those unable to exercise reason: the infants, the cognitively impaired, the dying, could appear less fully dignified.

This philosophical shift paralleled the rise of modern biomedicine, which increasingly defined itself through objectivity and control. The body came to be understood as a mechanistic system, separable from personhood. The physician's role evolved from minister of divine compassion to engineer of physiological systems. Advances in anatomy, microscopy, and later molecular biology yielded immense therapeutic power but at the cost of disenchantment: the patient became an organism to be optimized rather than a person to be cherished.

Nevertheless, the older moral memory of *Imago Dei* continued to shape medical ethics, even when unacknowledged. The very language of "human dignity," "patient rights," and "informed consent" carries theological ancestry. When medicine insists that no one should be treated merely as a means, it echoes the sacred intuition that every life bears unquantifiable worth. Thus, even in a secular age, the shadows of *Imago Dei* linger.

The inheritance of this Enlightenment legacy continues to shape the moral imagination of contemporary medicine. As biomedical technologies acquire unprecedented precision and reach, they also amplify the unresolved tension between autonomy and sacredness. The power to edit genes, prolong life, or engineer reproduction situates medicine at the frontier between healing and redesign. In the language of modern bioethics, dignity is often invoked as respect for self-determination; yet the theological roots of dignity remain latent beneath this secular vocabulary. Thus, when debates arise over germline modification, euthanasia, or artificial intelligence in healthcare, they are not merely technical disputes but reenactments of a much older drama: whether medicine's vocation is to serve life as a gift or to govern it as a project. *Imago Dei* invites medicine to remember that mastery, detached

detached from reverence, risks forgetting the very mystery it once sought to heal.

Artificial Intelligence, Machine Learning, and the Imago Dei in U.S. Medicine

Artificial intelligence (AI) has become one of the most transformative forces in modern American medicine. From early rule-based diagnostic systems in the 1970s such as MYCIN, to today's deep-learning models capable of reading medical images with superhuman precision, AI has progressively reshaped clinical reasoning. What once required the intuitive synthesis of a physician's mind can now be assisted or even anticipated by vast computational architectures. In radiology, oncology, and predictive epidemiology, AI systems have already improved early detection and resource allocation, saving lives through speed and pattern recognition that exceed human capacity.

Yet this technological evolution also invites theology to speak anew. The doctrine of the *Imago Dei* grounds an anthropology that sees human intellect and creativity as participations in divine creation, not competitors with it. Within this framework, the rise of AI is not necessarily a threat to human dignity but a testimony to it: the very capacity to design intelligent systems reflects humanity's calling to mirror God's wisdom in cultivating and ordering creation (Genesis 1:28). As theologian Noreen Herzfeld argues, human inventiveness in AI "echoes the creative impulse of the divine, even as it tests our humility" (Herzfeld, 2002).

Still, *Imago Dei* offers a moral compass. It reminds medicine that intelligence, whether human or artificial, must remain ordered toward truth, compassion, and justice. A theology of the image thus reframes the ethical question from "Can machines heal?" to "How can machines serve love?" When AI systems misclassify patients or amplify bias, they obscure rather than honor the image of God within each person. By contrast, when algorithms are designed to promote equitable access, to extend care into underserved communities, and to relieve clinician burden, they participate in the divine work of restoration.

Contemporary scholars such as Ellison Weiner

emphasize participatory design as essential to ensuring AI reflects the diversity of the human family (Ellison Weiner et al., 2024). This aligns deeply with an Imago-centered ethic, which insists that every face bears sacred worth. Thus, rather than opposing AI, Christian theology can help orient it toward its proper telos: to serve life as a gift, not a product.

In this light, the history of AI in medicine becomes a story of both human ingenuity and moral maturation. The *Imago Dei* invites practitioners and designers alike to see technology as a vocation of co-creation. When guided by reverence, transparency, and solidarity with the vulnerable, AI can extend, not replace, the healing ministry that first animated the art of medicine.

Conclusion

To view the human body through the lens of the *Imago Dei* is to see biology as theology and flesh as revelation. From the cellular level to the act of compassionate care, life discloses a divine pattern of creativity, interdependence, and redemption. In a culture tempted to fragment body and soul, the embodied image of God reminds us that to touch the human body is to encounter mystery.

If the *Imago Dei* grounds the inherent worth of every human being, then medicine's deepest vocation is not merely to cure, but to restore the meaning of embodiment. Healing, in this view, becomes an act of re-creation and a participation in the divine work that first called humanity good. Within the hospital ward or research lab, this vision reframes both suffering and care: every act of treatment becomes a gesture toward the restoration of a broken image.

Theology thus offers medicine a moral horizon, while medicine offers theology a space for embodiment. The two meet most profoundly at the bedside, where the tension between limitation and hope is felt most acutely. Here, the physician and the patient stand together within the mystery of finitude, confronting not only biological disorder but existential vulnerability. Healing in this context transcends physical repair; it gestures toward reconciliation of the

person with their own body, with others, and with the grounding of human worth itself.

A theology of healing, therefore, is not an abstract doctrine but a lived philosophy of care. It affirms that the human body, though fragile and mortal, remains a site of divine encounter. It insists that compassion and clinical precision are not opposites but expressions of a unified truth: that every human life, however diminished or diseased, bears the radiance of divine likeness.

When medicine reclaims this theological depth, it finds again its moral center, a vision of care shaped not only by knowledge, but by reverence. The *Imago Dei* thus reminds the modern physician, researcher, and educator that science is most human when it serves the mystery from which all life arises.

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About the Author

Benjamin Nketsiah is an undergraduate studying Biochemistry and Molecular Biology at Michigan State University. His work sits at the intersection of philosophy, theology, and science, where he loves to synthesize ideas and reflect on the intellectual traditions that have shaped civilization, both consciously and unconsciously. He wrote this piece to explore how these disciplines illuminate one another in an age of rapid technological change. Aspiring to become a physician, he believes a humanities-informed lens deepens cultural sensitivity and empathy, enriches moral imagination, and ultimately helps him care for patients more fully.