

Series:

When the Heart Ripens
and life turns spacious



Episode: F1 — WISE:

Humility as trustworthy presence

Some people carry responsibility without tightening around it. Their presence does not dominate a room, yet it quietly changes what becomes possible there. Others sense that this steadiness is more than temperament, training or experience – that it draws from somewhere deeper. From where?

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Previous Episodes in this Series

See or download past PDFs here:
<https://laikosblog.org/blog-by-tony-macelli/>

This Series traces witness-attested qualities of a spiritual heart that has slowly “ripened” through grace and lived experience. An Introduction to the Series is [here](#):

Group A – Rootedness in the Real (A1–A3)

The heart has become grounded in ordinary life as it is. Attention settled, imagination softened, and the need to secure meaning through achievement began to ease.

Group B – The Spacious Heart (B1–B4)

Love and attention has widened. The heart learned to hold others, uncertainty, and time itself with less anxiety and less possession.

Group C – The Inner Surrender (C1–C5)

Subtle inner compulsions have loosened: image, the need to win, wilful striving, resistance to limits, and fear of failure. The heart learned to consent without needing to prevail.

Group D – Meeting the Shadow and its Gifts (D1–D4)

Shadow was faced rather than evaded. Vulnerability was no longer hidden, compassion widened through suffering, and gentle joy began to take root where sorrow had been carried before God over time.

Group E – Opening to Mystery (E1–E3)

The heart has turned toward living before God without demanding premature closure. Certainty softened into Mystery, and trust deepened even when divine unknowing could not be resolved.

Group F – The Quiet Fruit of Wisdom (F1–F3)

In the current episode, F1: From this ground, wisdom begins to appear. Here we see it as trustworthy presence.



STORY

Life, carried lightly

On Tuesday afternoons the clinic felt narrower than usual. By half past one, the waiting room had filled with people referred from different corners of the city: a man recently discharged from the ward after a medication review; a young mother whose GP had written of panic so severe that she had stopped taking her daughter to day-care; an older taxi driver who had not worked in three months because he could no longer manage being trapped in traffic with his own thoughts.

In a community mental-health service, almost everyone arrived by way of some letter or telephone call: risk levels sketched, history compressed, recommendations for follow-up already half-translated into clinical language. At triage, we sorted referrals into streams: who needed individual assessment

first, who could safely begin in a group, who required urgent psychiatric review.

On paper, it looked ordered. In weeks like this, staff shortage turned order into compromise.

I am Marina. I work at our reception/administration desk. In a small clinic, that role means more than answering telephones and typing messages and lists of names. One learns to read the room by posture and silence. That afternoon, I already knew we were in difficulty.

Leila, one of the therapists, had gone home the previous day in tears after a patient disclosed a renewed bout of self-harm – in the last few minutes of his session. Tom was off sick again. An early-morning email from the clinical lead had reminded everyone that the anxiety group was capped at ten for reasons of safety and staffing, and that any breach would need written justification because our capacity decisions were under audit.

Ruby arrived at twenty past one, ten minutes earlier than she needed to. She signed in, put down her bag and returned with the group folder under her arm. Her badge named her as Senior Mental Health Nurse, but in practice she sat somewhere between roles: clinician, facilitator, steadying presence.

“Full?” she asked.

“More than full,” I said. “Ten booked, two walk-ins, and one urgent referral squeezed in after lunch.”

She held out her hand for the urgent file.

The letter was from a consultant psychiatrist. The patient, Aaron, twenty-three, had been discharged four days earlier after suicidal thoughts had intensified during a period of severe anxiety, near-total insomnia and frightening, stress-driven ideas. The letter said he no longer required admission to residential care but recommended rapid community follow-up because isolation and sudden loss of structure increased risk. He had declined another ward stay. He had agreed to come here.

The summary ended with a sentence I had begun to recognise: not psychotic, not detained, not free of danger either.

“Was he triaged to individual assessment?” Ruby asked.

“Yes. Earliest slot is next Thursday. Triage thought he might tolerate today’s group if you agreed, but the note says he should be reviewed separately if he looks too wound up or guarded.”

Ruby read the last page again, more slowly. Then she looked beyond me towards the waiting room.

For a few seconds she did nothing.

I had seen that stillness before. Years earlier, when I had been new to the service, I had once asked whether it was a technique she had learnt – some form of grounding before making difficult decisions.

She had smiled.

“Not quite a technique,” she had said. “I try to stop insisting that the situation become clear on my terms.”

At the time, I had thought the remark unnecessarily mysterious. Later, in another conversation after a difficult home visit, she had tried to explain it differently.

“Sometimes the person in front of me is almost hidden by the file, the behaviour, the diagnosis, the fear of making a mistake that they produce in me. I have to wait until I can see them again.”

“See what?”

“The life in them that is deeper than the condition they are in.”

She had not used the word God immediately. Ruby seldom introduced large words before they were needed.

Only later had she said, “I suppose I mean the divine life in them. Not as an idea. As something you must not violate.”

“It took me years,” she had once said, “to trust that God is more present in the room than my fear of getting things wrong.”

Now, standing beside the reception/administration desk, she seemed to be waiting in that same way – not empty-minded, and not disengaged, but allowing the whole scene to come into focus before touching it.

This was the knot. Individual assessment meant a private conversation, enough space to take history properly, judge risk and decide what kind of contact was needed. Group work dealt with several patients at a time: efficient,

People
first.
Time
will
have to
wait.

You are
not alone

Support
Kindness
Respect
Hope

Community
Mental Health
Clinic

We're here
to listen

URGENT REFERRAL

Aaron M.

Risk: High

Ruby
Senior
Mental Health
Nurse

Marina
Reception

Staff shortage
High demand
Limited beds
Do our best.

often helpful, especially when anxiety had made life smaller and more solitary. But a group was not a safe first container for everyone. Recent crisis, raw trauma or unstable thought patterns could spill into the room and unsettle more than one person at once.

Normally, the referral letter, triage judgement and current presentation decided this. Normally, there were enough staff to honour those decisions.

Today, there were not.

The clinical lead came through the doorway, already wearing the morning email in her expression.

“We need a decision now,” she said. “No room changes, no extra chairs. If you exceed ten again, I need a written rationale. The services auditors are looking for patterns.”

At the word audit, I felt my stomach tighten. In my last job, triage meetings had felt like examinations; decisions were defended with charts and phrases about risk pathways. Fear of being wrong had usually sat at the table like an extra person.

Part of me wanted Ruby to accept the numbers, to keep us safe on paper. I could hear a sentence forming in my throat about sticking to protocol.

Ruby’s hand rested lightly on the closed file.

“What is mine to do here?” she said, almost under her breath.

I was not sure whether she was speaking to us.

Then she looked again towards Aaron.

“We need to know who among the ten will genuinely be harmed by postponement,” she said, “and where the harm lies for the urgent referral if we delay.”

“The regulars can wait,” the lead replied. “The discharge needs follow-up, yes, but not necessarily today. He has next week.”

“Next week is nine days from discharge,” Ruby said quietly.

“That’s the earliest individual slot. And if he deteriorates in a group with one facilitator and no second clinician, we have a different kind of problem.”

The lead was right.

Let Aaron wait, and he would leave with a crisis sheet and instructions to call if things worsened. Bring him into the group, and we risked placing someone newly out of hospital into a room designed for anxiety management rather than post-acute review.

Either way, we stepped onto uncertain ground.

Ruby nodded once. “I know.”

She walked over to Aaron and introduced herself. She asked whether he could manage a short conversation in the side room. The door stayed slightly ajar, our ordinary way of holding privacy and presence together.

I could hear only fragments.

“How have you slept since you left the ward?”

“Any thoughts today of harming yourself?”

“When panic rises, do you lose track of where you are, or feel trapped in your body...?”

“Would being in a room with others make things better or worse, honestly?”

Watching her work, I felt both impatience and reluctant trust. Impatience because the clock moved; trust because she seemed unwilling to make a decision without allowing the person himself to appear before her, not merely the danger described in his letter.

She did not lean towards him with exaggerated concern. She did not speak in the soft, altered voice some professionals used when trying to display compassion. She met his eyes, waited through the pauses and did not hurry to rescue him from the discomfort of his own answers.

I remembered another conversation with her, after a patient had shouted at us for nearly twenty minutes.

“You looked at him as if he were not shouting,” I had said.

“He was shouting.”

“You know what I mean.”

Ruby had considered this.

People
first.
Time
will
have to
wait.

You are
not alone

Support
Kindness
Respect
Hope

What matters
to you,
right now?



"If I see only the wound, I reduce him to the wound. If I see only his better nature, I abandon him to sentimentality. Somehow one has to see both – the damaged person and the life in him that has not been damaged."

"And you can do that while someone is shouting?"

"Not always," she had said with a grin. "But I can notice when I have stopped trying."

After ten minutes, she returned.

"He's not right for the group as it stands," she said. "Too little sleep, too fragile, too much effort needed just to remain in a circle of strangers."

The clinical lead exhaled, half relieved.

"But he's not safe for a simple delay either," Ruby continued. "He needs a same-day individual review and a revised plan by the duty clinician."

"There is no duty clinician free," the lead said.

"Then we make one partly free."

"From where?"

At that question, my old habits woke up. I could already see the spreadsheet solution: cut group time, shift paperwork, squeeze a review into someone's lunch, write a tidy note about capacity management. It would look responsible. It would feel, in the chest, like another small betrayal.

Ruby turned to me.

"Which of the regulars know the self-help anxiety material well enough to work from handouts if the session runs shorter?"

I named two. She nodded.

"I can run a focused group for those who are stable for forty minutes," she said to the lead. "Then Leila could do ten minutes of check-out while I join the duty doctor with Aaron."

"Leila is on the edge," I said.

Ruby stopped.

She did not defend the plan merely because it was hers.

"You're right," she said. "Then not that."

For a moment nobody spoke.

Leila stepped into the corridor from the staff room, holding a steaming mug with both hands. Her eyes were ringed by the kind of tiredness people politely look away from.

Ruby turned towards her. Something in Ruby's manner changed – not into pity, but into the same quality of attention she had given Aaron.

I remembered once telling Ruby that Leila's fragility made me nervous.

Ruby had replied, "Do not confuse someone's exhaustion with an absence of depth."

Then, after a pause, she had added, "The divine does not withdraw from a person because they are nearly spent. Some-

times we have to look more carefully because the light has become difficult to see."

Now she approached Leila not as a resource to be allocated but as a person whose tiredness did not make her less sacred.

"I had thought of asking you to do the closing check-out," Ruby said, "but Marina has reminded me how close to the edge you are. I don't want you agreeing because the rest of us are under pressure."

Leila looked down into her mug.

"I could manage ten minutes," she said. "Not the group. Just the end."

"You don't have to."

"I know. Ten minutes would be all right."

Ruby studied her face, not distrustfully, but as though listening for the difference between consent and surrender under pressure.

"Would cancelling your four o'clock paperwork block make it manageable?"

"Yes."

"And if it stops being manageable?"

"I tell you."

"And we stop."

Leila nodded.

"All right," Ruby said. "Then no more than ten minutes."

The clinical lead rubbed her forehead. "This is exactly the patchwork the auditors criticise."

"Yes," Ruby said. "And sending Aaron away today with a sheet of telephone num-

You matter.
Take breaks.
It's okay
not to be
okay.



Staff
Room

Leila
Mental Health
Nurse

People
first.
Time
will
have to
wait.

Ruby
Senior
Mental Health
Nurse

Community
Mental Health
Clinic

We're here
to listen

Maria
Reception



bers and a standard appointment next week would also be patchwork – cleaner only on paper.”

She did not raise her voice. She did not look noble. She simply refused to pretend that neatness and integrity were the same thing.

The lead looked again at the timetable. “The duty doctor still has no gap.”

“I could move the medication follow-up at three fifteen,” I said. “Mr Dalli told me this morning he was stable and would prefer Friday anyway. I haven’t changed it because the system flags late movement.”

Ruby looked at me.

“Would moving him cause harm, or only inconvenience?”

“Probably inconvenience.”

“Ask him. Don’t decide for him.”

It was obvious once she said it. I telephoned Mr Dalli. He was relieved to change the appointment because his daughter could bring him on Friday.

A gap had appeared. Not a solution. A space.

The group began five minutes late. At the door, one regular complained that newcomers were always prioritised, that those who had “done the work” were expected to be endlessly patient. Another muttered that the clinic was becoming all triage and no care.

A younger version of me would have smoothed this over with reassurance about resources.

Ruby stood beside the door with the attendance sheet.

“Today is uneven,” she said. “We’re responding to something fragile. That means some things move and others wait. We’ll keep this session brief and focused. If you need a quick check-in before you leave, say so.”

The complaints did not vanish. They simply lost their edge. Naming the unevenness seemed to take some of the heat from it.

During the group, a man in his fifties challenged the whole therapeutic care model. Breathing exercises and thought records, he said, were absurd when people could not afford rent and had waited months for proper therapy.

No one in the room disagreed with the conditions he named. Ruby let him finish.

“A worksheet will not fix housing or a thin service,” she said. “But for forty minutes, in this room, we can still notice what happens before panic takes the wheel. And perhaps we can help each other not carry it alone.”

I felt something in me unclench.

She had neither defended the clinic nor despised it. She had neither inflated the group nor emptied it of meaning. She held together the smallness of what we could offer and the reality that it was not nothing.

For years, I had thought humility meant lowering one’s estimate of oneself. Ruby seemed to practise something different. She did not spend much time estimating herself at all. The situation did not become a theatre in which she had to prove that she was competent, compassionate or spiritually mature.

She paid attention, acted, accepted correction and moved on.

By five o’clock, Aaron had been seen by the duty doctor with Ruby present. The plan had shifted: daily telephone contact for several days, an earlier psychiatric review, a medication check, and a separate assessment of whether individual trauma-informed work would serve him better than the group programme.

The regular group members had been held without being pampered. Leila had done nine minutes of check-out and gone home on time. Mr Dalli had a Friday appointment that suited him better. The notes were complete, although they still bore the marks of a day that did not fit neatly anywhere.

After the last client left, I found Ruby in the small quiet room near the back stairs.

There was no obvious display of any ritual. She sat with her hands open on her knees, her eyes closed. It was the same stillness I had noticed before she made the first decision.

I stayed in the doorway longer than I meant to.

After a while, she opened her eyes.

“Did I interrupt you?”



“No.”

“What were you doing?”

“Giving the day back.”

“To God?”

A little smile. “As best I can.”

“You already made the decisions.”

“Yes.”

“And most of them worked.”

“As far as we know.”

The words unsettled me.

Ruby looked towards the darkening window.

“I can offer attention and judgement,” she said. “I can try not to use people. I can admit when I have missed something. But I cannot see every consequence. Nobody can. I can’t let that immobilise me.”

She looked down at her open hands.

“And I cannot keep Aaron safe by needing to be the one who saves him. Nor can I respect Leila while using the little strength she has left to make my plan work.”

“So you let go of the outcome?”

“Not quite. I remain responsible for what is mine to do or not to do. But I try to release what was never mine to possess.”

She was silent again.

“The results,” she said, continuing her thought. “Other people’s lives. And my own opinion of whether I was good today.”

On the way home, I began drafting an email about the capacity decision. My first version made the afternoon sound orderly and deliberate. It concealed the uncertainty, omitted Leila’s exhaustion and made the rearrangements appear to have followed an established plan.

It would have looked clean to the auditors. It felt thin to me.

At first, I measured it against Ruby: would the wording have stood honestly beside her choices?

Then I saw that even this was not quite the point. Ruby was not asking anyone to become more like Ruby. Her presence seemed to direct attention away from herself, towards the deeper place from which she tried to live.

I stopped typing.

For several seconds, I did not try to improve the email. I allowed myself to feel the familiar fear of being judged careless, inefficient or wrong.

Then, without finding the right language for it, I asked to be freed from the need to protect myself through polished words.

The fear did not disappear.

But it loosened enough for truth to enter.

I rewrote the email. I described the limits, the risks, the consultation and the changes we had made. I did not pretend that the arrangement was ideal. I did not pretend that uncertainty had been eliminated.

It occurred to me slowly that what made Ruby’s presence trustworthy was not calmness alone. Many calm people managed tension by numbing themselves. Ruby’s calm seemed to come from somewhere else – a place where usefulness, self-justification and self-importance had lost some of their power.

She seemed to have had long practice in seeing more in people than the condition in which they arrived: something unviolated in Aaron beneath his fear; something luminous in Leila even when exhaustion had almost covered it.

And she had practised placing her work, her colleagues, her patients and her own goodness into hands that were not her own – then returning to do what was hers without claiming ownership of the outcome.

I could not name that place precisely.

But the clinic felt more honest and more breathable on the days when Ruby’s surrender quietly shaped our decisions.

And now, with discomfort and a small, unfamiliar hope, I sensed that my own heart had begun to turn – not towards Ruby as an example to imitate, but towards the hidden source from which her way of seeing appeared to arise.

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REFLECTION

When fear is no longer the centre

There is a kind of humility that does not draw attention to itself and doesn't need to. It does not perform modesty, nor does it shrink from truth or responsibility.

Rather, it has become sufficiently free from self-preoccupation that others begin to experience, in its presence, a certain clarity and ease. Such a person may not speak often, may not seem impressive, and may not seek influence at all; yet what they say, and even the way they remain silent, carries a quiet credibility. Something in them has ceased to press outward for recognition, and because of this, their presence becomes more rather than less trustworthy.

In the spiritual life, this kind of humility is more than good character. It suggests that the self is no longer organising experience around its own importance, its own defence, or its own need to be seen as right, good, or significant. The heart has become less crowded by itself. It is learning to live from God rather than from the anxious labour of self-maintenance. What emerges then is not passivity, but a simpler and more grounded way of inhabiting one's place, one's words, and one's responsibilities. The person becomes dependable not because they are always certain, but because they are no longer trying to turn every moment toward themselves.

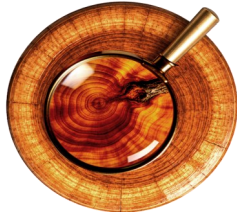
This is why humility, at its ripest, can become quietly influential. It does not persuade by pressure, by display, or by spiritual fluency. It influences by making room for truth. Others feel less managed in its presence. They may feel seen without being handled, corrected without being diminished, steadied without being controlled. There is often a kind of proportion in such people: they do not exaggerate their role, but neither do they evade it. They can act decisively when needed, yet without the heat of self-assertion. Such humility remains capable of decisive action.

At this point, we may need to be careful, because humility has many convincing imitations. There is a version that is really self-erasure, unable to speak or act because

it is secretly governed by fear. There is another that appears gentle but is inwardly preoccupied with seeming good, unobtrusive, or spiritually mature. There is also the humility that refuses visibility or responsibility, not from freedom, but from avoidance. None of these has the quiet steadiness of wisdom. They remain organised, in one way or another, around the self.

The humility that belongs to wisdom is gentler and stronger than that. It has usually passed through disillusionment. It has discovered, often painfully, that the self is not healed by being admired, defended, or centred. It has learned, perhaps slowly, that God does not need the performance of importance. And because it is less busy trying to secure a place for itself, it becomes more available for truth, for service, and for the particular good required by the moment. Such humility does not make a person smaller in the cheap sense; it makes them more transparent, more grounded, and more quietly believable.

In that sense, trustworthy presence is one of the marks of a ripened heart. It is one of the ways wisdom becomes visible before it is ever named. We recognise it when someone's life seems to carry less noise than before, less self-claim, less need to prevail, and yet more depth, more freedom, more peace. Their life does not point insistently to itself. It lets something truer come through.



DISCERNMENT BOX

Look-alikes of humility

This form of humility can easily be confused with several neighbouring states that resemble it from the outside.

- One is *self-erasure*: a reluctance to speak, act, or take up responsibility because fear, low self-worth, or old deference still governs the person.

- Another is *performed gentleness*: a carefully spiritual manner that appears calm or modest but remains subtly occupied with seeming good, safe, or evolved.

- A third is *avoidant non-assertion*: the refusal to intervene, decide, or inhabit authority because conflict, visibility, or possible failure feels too costly.

- There is also *spiritualised receptivity*: language of surrender or humility that quietly conceals indecision, passivity, or the desire never to be accountable.

Over time, trustworthy presence tends to feel different. It does not disappear. It does not anxiously manage impressions. It can act, speak, refuse, or correct when needed, but without making a drama of self. It carries responsibility without possession and leaves others with more room to breathe, not less.

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PRACTICE BOX

Letting responsibility breathe

The movement of practice here is not toward becoming smaller, but toward noticing what tightens around responsibility and quietly returning that centre to God.

- Before entering a meeting, conversation, or task, pause for a moment and notice what you are trying to secure: competence, approval, control, harmlessness, or spiritual credibility.

- Gently place that need before God without argument. A simple inward sentence may be enough: "You are more present here than my fear."

- During the encounter, attend at least once to the other person without preparing your next impression or defence. Let attention become an act of release.

- Afterwards, resist the reflex to replay yourself too quickly. Instead, ask what was quietly needed of you, what belonged to you, and what did not.

- Where possible, practise one small act of unperformed responsibility: speak plainly, accept a limit, make a necessary de-

cision, or allow an imperfect action to stand without self-repair.

Over time, such small practices may help responsibility become less possessed and more inhabitable. They do not create humility by effort. They clear a little space in which a different centre may gradually be trusted.

-O-





Time
Respect
Presence

Not here,
because
you failed.

You're not
a file.

What's it like
for you,
right now?

We'll go
at your
pace.



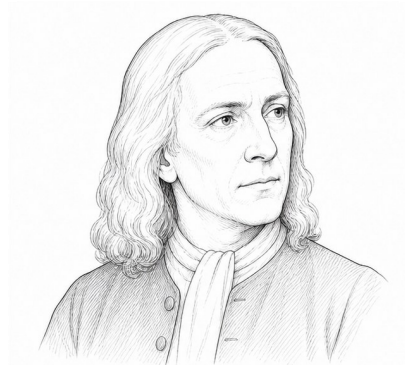
MEET THE WITNESSES

Lives that make all this credible

This episode is accompanied by four witnesses whose lives and writings help us recognise humility as trustworthy presence rather than self-diminishment. They are not presented as flawless models to admire from a distance. Each illuminates, in a different way, how a person may become less occupied with securing, displaying or defending the self -- and therefore more available to truth, compassion, other people and God.

Taken together, they suggest that trustworthy presence is formed slowly. It grows where self-assertion has loosened, attention has deepened, and a person has learnt, often through long surrender, to let the divine life become more central than the anxious labour of managing the self.

Thomas Kelly



Thomas R. Kelly (1893--1941). The American Quaker writer and teacher Thomas R. Kelly described a life gathered around the Divine Presence. Beneath the surface pressures and scattered demands of daily life, he believed, a person may become inwardly centred in a deeper attentiveness to God.

Kelly called this orientation "holy obedience". He did not mean unthinking submission or the surrender of moral responsibility. Rather, he pointed towards a growing freedom from the restless need to direct everything from the centre of the separate self. Human initiative itself becomes a response to a Presence already at work within and around us.

Such inward gathering does not withdraw a person from practical responsibility. It may make them more responsive to what the moment actually requires. Kelly's witness helps us recognise humility not as a moral pose, but as a settled willingness to listen, to relinquish self-importance and to act from a centre deeper than personal urgency.

Ruth Burrows



Ruth Burrows, OCD -- Sister Rachel Gregory (1923--2023). Ruth Burrows was the pen name of Sister Rachel Gregory, an English Discalced Carmelite nun and spiritual writer. She spent more than eighty years in Carmelite life and wrote extensively about prayer, surrender and the action of God within the human person.

A central conviction in her writing is that prayer is not principally something the spiritual self accomplishes. It is, before all else, God's work. Our part is to make ourselves available: to give time, offer attention, remain faithful and surrender ourselves as honestly as we can.

This understanding quietly undermines spiritual ambition. We do not have to manufacture holiness, possess profound experiences or become impressive religious people. Nor do we become the source of whatever goodness passes through us.

Burrows helps disclose the hidden contemplative ground of trustworthy presence. A person can act responsibly, decisively and

with care while relinquishing the need to control every outcome or to regard themselves as indispensable. Humility, then, is the freedom to do what is ours to do while allowing God, rather than the anxious self, to remain at the centre.

Madeleine Delbrêl



Madeleine Delbrêl (1904--1964). Madeleine Delbrêl was a French Catholic laywoman, social worker, writer and mystic. For more than thirty years, she lived and worked among poor and predominantly non-believing communities in the working-class outskirts of Paris.

Her spirituality did not remove her from the complexity of other people's lives. It drew her more deeply into them. She sought to discover and serve the divine presence amid ordinary streets, professional responsibilities,

political disagreement, hardship and human need.

Delbrêl did not treat those around her as objects of charity or as projects for religious improvement. She learnt to share their circumstances, listen to their questions and recognise that God was already present before she arrived. Her faith therefore had to become a form of availability rather than intrusion.

Her witness is especially close to the trustworthy presence explored in this episode. She shows a humility that neither imposes itself nor disappears -- a life rooted in God, attentive to the person who actually stands before it, and sufficiently free from self-display to allow love to become practical.

Catherine Cornille

Catherine Cornille (b. 1961). The Catholic comparative theologian Catherine Cornille has explored how Christian understandings of humility may be deepened through genuine dialogue with Hindu and Buddhist traditions.

Such dialogue requires more than politeness or the exchange of religious information. It asks Christians to acknowledge the limits of their own understanding and to remain open to truths that another tradition may help them see more clearly. Hindu and Buddhist examinations of attachment, self-

hood and non-clinging can challenge the ego's persistent need to occupy the centre.



Cornille suggests that this encounter may help Christians recover humility not merely as modest behaviour or a lowered opinion of oneself, but as a spiritual reality. In dialogue with Buddhist teachings on "no-self", Christian humility may even be understood, with the necessary Christian distinctions, as an experience of "no-self in relation to God".

This does not require the rejection of personal identity or responsibility. It points instead towards the relinquishment of the possessive self -- the self that must secure its importance, defend its standpoint and make everything revolve around its own needs.

Cornille's witness reminds us that humility includes a willingness to receive. A trustworthy presence does not approach another person, culture or tradition as though it al-

ready possesses everything worth knowing. It remains rooted, yet receptive; committed, yet teachable; capable of recognising that truth may arrive through a voice it did not expect.

A shared wisdom

These witnesses arise from different forms of life: Quaker attentiveness, Carmelite surrender, Catholic engagement in the secular city, and interreligious theological dialogue. Yet a shared movement passes through them.

Thomas Kelly points towards a life gathered around the Divine Presence.

Ruth Burrows reminds us that the deepest spiritual transformation is received rather than manufactured.

Madeleine Delbr  l shows how surrender to God may become attentive, practical presence among people whose lives cannot be reduced to problems, categories or projects.

Catherine Cornille shows that humility also makes us teachable, able to receive truth without needing either to abandon our own ground or to defend it anxiously.

Together, they suggest that humility does not make the human person smaller. It makes the self less crowded by its own importance. In the space that opens, another person can be seen more clearly, responsibility can be carried without being possessed, and something of the divine life may pass through ordinary human presence without calling attention to itself.

