The Christian Church and the Ministry of Healing

DAVID ATKINSON

This paper offers an historical sketch of the Church’s concern with healing, and explores various current approaches. It attempts to uncover some underlying theological questions, and concludes with a biblical theological perspective.

Health and healing

In an unpublished paper ‘Healing: a Flight From Definition’, Stephen Pattison argues against attempts to define healing. Such attempts, he says, either exclude or include too much, or get in the way of the actual consideration of reality. More importantly for practical theology, they suggest a deductive approach to the subject whereas we need ‘to proceed inductively from the complex contemporary reality of the phenomenon of healing in all its diversity’. Pattison argues for a critical dialogue between theological texts of the past and ‘living’ texts of the present, and that the hard-won experiences of healing should not be sacrificed to pre-packed definitions.

This is cogently said, although some fencing in of the area is essential if we are not to fall into the Humpty Dumpty syndrome of making words mean only what we want them to mean. So here are some initial fence posts.

In common speech, the term ‘healing’ is usually used to mean ‘the restoration of health’, which of course raises the immediate question ‘What is health?’ Health is an ambiguous concept. Michael Wilson wrote: ‘Health is a concept like truth which cannot be defined. To define it is to kill it.’ We can, however, explore the way the term is used. Sometimes it is used in relation to ‘disease’, sometimes in relation to ‘illness’, and sometimes in relation to ‘sickness’.

I am taking ‘disease’ to mean an objective pathological condition focusing on those aspects of the human organism which are not functioning appropriately according to medical criteria for that stage of the human person’s life. ‘Healing’ then becomes the restoration of appropriate functional wholeness to the organism.

By ‘illness’ I mean a person’s subjective perception of disorder within themselves. When a person ‘feels ill’, this feeling may result from disease within their body, or from external factors in their social or physical environment, causing stress or some other sense of lack of well-being. The focus is

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1 M. Wilson, Health is for People, DLT, London 1975, p 117.
on the whole person. 'Healing' then becomes the restoration of a person's sense of their own well-being.

By 'sickness' can be meant a socially defined deviation from what is socially acceptable, or tolerable. A person is 'sick' in this sense if they cannot function according to society's standards. This may, for example, be because of their sexual orientation, the shape of their nose, teeth or breasts, some mental or physical handicap, or even the processes of ageing. (The question sometimes has to be asked: who is sick here, the individual or the society?) 'Healing' from sickness would then involve, for example, a change in sexual orientation, the straightening of the teeth, the removal of the handicap, or an attempt to delay the processes of ageing.

It is important also to recognise that all healing takes place in a social context. The diseased, ill or sick person is part of a network of relationships, and has a specific life history. Not only 'cure', but also issues of public health, preventative medicine, diagnosis, community and family care, post-treatment rehabilitation, and long term support, may well all be part of the healing process. The determinants of health are both inherited and environmental. The handling of disease and of illness involves individual lifestyles, personal environments (physical, biological, social and political), and the availability and allocation of resources in the promotion of good health and the prevention of and response to disease.

Thus 'healing' is a broad term, with fuzzy edges. Its range of meanings includes the restoration of bodily, emotional or mental functioning appropriate to a person's age, the restoration of a subjective sense of well-being in a person, the enabling of a person to handle their relationships constructively and to fit in acceptably to their society, and the historical, social, physical and political environments in which these processes can occur.

This broad perspective is consistent with that of the Old Testament, in which health is best understood in relation to the word often translated 'peace', shalom. When the Lord gives shalom, there is prosperity, a wholesome relationship with God, conciliation between people, physical, relational and social well-being. In this sense, Yahweh is 'the LORD who heals'.

In the New Testament, the new age of the Kingdom of God is proclaimed in the gospel of Jesus Christ who is the bringer of shalom. Much of the gospel narrative is taken up with the healing ministry of Jesus which is part of his proclamation of the Kingdom of God. We will need to explore this further in due course.4

Christian approaches to healing: an historical sketch

Ministry to the diseased, the ill and the sick, has been part of Christian ministry from the very start of the Christian Church. In the post-Pentecost Church, the apostles did many signs and wonders among the people (the 'signs of a true apostle', 2 Cor. 12:12; cf. Rom. 15:19), and the sick and those

2 Exod. 15:26.
3 Matt. 4:23.
4 D. Atkinson, 'Towards a Theology of Health' in Health, the Strength to be Human, IVP, Leicester, forthcoming.
afflicted with unclean spirits were healed (cf. Acts 2:43; 3:6ff; 5:12-16; 6:8; 8:6; 8:13; 14:3; 15:12; 19:11; 28:9).

Christians are said to minister to Christ himself by 'visiting those who are ill' (Matt. 25:39). Christians prayed for one another 'that you may be in health' (3 Jn. 2). There were recognisable 'gifts of healings' in the early church (1 Cor. 12:9), and the practice of anointing with oil and prayer for ill people who called for the elders is referred to in James 5:13ff.

There is very little other reference to healing ministry in the Epistles. There are four particular references to people who are ill: Paul (2 Cor. 12:7); Timothy (1 Tim. 5:23); Epaphroditus (Phil. 2:27); Trophimus (2 Tim. 4:20). Inappropriate use of the Lord's Supper was seen by Paul as the cause of some illness in Corinth (1 Cor. 11:30). The book of Revelation looks forward to the day when 'God himself will be with them; he will wipe away every tear from their eyes, and death shall be no more, neither shall there be mourning nor crying nor pain any more, for the former things have passed away' (Rev. 21:3f).

During the first three centuries of the Church, as Evelyn Frost has documented, there is considerable evidence of a continuing charismatic healing ministry, and records of healing miracles. There is also (in Basil, for example, who founded a hospital) evidence of close links between the Church and the practice of medicine.

Gradually, healing ministry became increasingly sacramental, combined with anointing and exorcisms. There is evidence of prayer for healing and anointing with oil in Tertullian, Origen, Jerome, Ambrose, Chrysostom, Augustine. After the fourth century a growing split between body and spirit in the understanding of human life became so emphasised that less value was placed on bodily health. Eventually anointing for healing was in many ways overshadowed by anointing for death, at least in the western Church.

During the Middle Ages, with the growth of monastic orders, there is a phase of records of miraculous healings, often through contact with the relics of the saints. Despite caution from some Church leaders, at the level of popular devotion much of the healing ministry of the Church was associated with magic. At this time also, the split between body and spirit led to growing division between the Church and medical practice.

Many Christians at the Reformation continued this split, attempting to take the magic out of religion. Many believed that illness was sent from God, and that suffering was to be endured patiently. Neither Luther nor Calvin believed in miraculous physical healings, but concentrated on the miracle of the spiritual healing of the soul through the grace of God. Archbishop Cranmer's first Prayer Book of 1549 provided an Order for the Visitation of the Sick, drawn from the Sarum Rite. It included a long exhortation reminding the sick person that sickness is 'God's Visitation' and that they should 'take in good worth the chastisement of the Lord: for whom the Lord loueth he chastiseth'. It concluded with a form for anointing with oil, making the sign

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of the cross. The anointing was omitted in the second Prayer Book of 1552, presumably because of the Reformers' unease with such sacramental practice. The Council of Trent (1551) refused to recognise a rite of healing in the Roman Church, though it did promote the sacramental practice of extreme unction.

Since the Reformation, the split between the Church and medical practice, fed by a dualistic view of human nature, has gone through various phases. Through the influence of the Cartesian/Newtonian model, in which nature was thought to work according to mechanical laws, there arose a new emphasis in the medical profession on the health of the body and on physical healing. This laid the foundation for the secular 'medical model' of healing which has had such an influence in the current century, although widely questioned in recent years. For Newton, God was deistically detached from the world of nature, so that any divine involvement in the healing process had to be seen as part of the divine ordering of nature or as supernatural intervention in the world of nature. Such an interventionist model was criticised by philosophers of the Enlightenment such as Hume. There were certain times (the revival of evangelical piety with the Wesley brothers, for example), when miracles of healing were recorded. Pilgrimages have been made to Lourdes since visions of the Virgin Mary were claimed by fourteen year old Bernadette Soubirous there in 1858, and healing properties claimed for the stream of water Bernadette discovered. Catholic teaching about Lourdes is very cautious, however, and the percentage of possible cures very low.

The medical missions of the nineteenth and early twentieth centuries to some extent repaired the breach between the Church and medicine, and a renewed emphasis on the particular healing ministry of the Church was strengthened in the founding of guilds such as The Guild of Health (1904) and The Guild of St. Raphael (1915). These re-established the healing ministry as part of the sacramental life of the Church (though it was not until the 1960s that the Roman Church recognised anointing with oil as a sacrament for healing). The Church's Council for Health and Healing was formed under Archbishop Temple in 1944, and the Lambeth Conferences in 1908, 1920, 1930 and 1958 illustrate the growing awareness within the Church of England of the significance of the Church's healing ministry.

The 1958 Report of the Archbishop's Commission on The Church's Ministry of Healing was a major Church of England survey recognising that doctors and priests both minister in their different ways to the whole person. It suggested that healing should be understood as 'the enabling of a person to function as a whole in accordance with God's will for them'. It rejected the terms 'faith healing', 'spiritual healing', 'divine healing', preferring to speak of 'the Church's ministry of healing' as 'an integral part of the Church's total work by which men and women are to become true sons and daughters of God's Kingdom'. This ministry is of word, sacrament, pastoral care, and the use of gifts — including medical gifts — which God has given.

7 Martin Bucer, for example, in Censura, speaks in decidedly hostile terms about this particular practice (E. C. Whitaker, Martin Bucer and The Book of Common Prayer, Alcuin Club/Mayhew McCrimmon, Great Wakering 1974, p 124ff).
DAVID ATKINSON The Christian Church and the Ministry of Healing

The Pentecostal churches, from their beginnings at the turn of the century in the Holiness movements and the Welsh revival of 1904, have always included the ministry of 'divine healing' as part of their teaching. This came to particular prominence in the great evangelistic campaigns of the 1920s (the Albert Hall was filled each Easter Monday from 1926 to 1939 for such an event), in which divine healing was closely linked to evangelism. The Pentecostal doctrine that there is 'healing in the Atonement' (i.e. that Christ bore our sicknesses as well as our sins on the cross) is central to this practice. It is worth questioning why it is that on the whole Pentecostal churches have grown more quickly than other churches in areas of poverty and social deprivation.

Some of the Pentecostal emphasis has been transposed into the mainline churches in a fresh way through the charismatic renewal movement of the past 25 years. It has developed the emphasis on particular gifts of healing as one of the signs of the baptism of the Holy Spirit. The charismatic movement, through its ecumenical concerns, has also been instrumental in bringing together the charismatic and sacramental dimensions to the healing ministry.

Until fairly recently, there has been less emphasis in the Christian church on the community and political dimensions of healing and health care, than on ministry to individuals. However, this imbalance is being counteracted. R. A. Lambourne, in Community, Church and Healing,8 in 1963, studied some of the corporate and social aspects of the Church's ministry to the sick; Peter Selby's Liberating God (1983),9 sought to do the same for the world of counselling and spirituality; the Centre for Theology and Public Issues in New College Edinburgh has produced some occasional Christian papers on health care issues in recent years, and a number of Christian ethicists have been writing on the social context of health and healing.10

At the popular level, there is at present considerable interest in Christian healing, though almost entirely concerned with individual illness, as a glance at the shelves of any Christian bookshop will illustrate.

The current scene: a variety of approaches

It will become apparent that much of the current confusion concerning the ministry of healing in the Church arises from differing theological convictions. Most Christians involved in the worlds of healing and medicine wish to link their practices to biblical theology, and especially to the significance of the healing ministry of Jesus. However, how those links are made and what significance the earthly ministry of Jesus has for today's Church are at the root of much current dispute.

We will begin by trying to separate out the various strands in the current confusion. It is difficult to speak in general of 'models' of healing ministry, or even 'approaches' to healing ministry, for many involved in these minis-

8 R. A. Lambourne, Community, Church and Healing, DLT, London 1963.
tries do not fit neatly into categories, and many would draw on insights from a variety of different sources. To identify the following strands in the fabric may be helpful, however, and various writers are cited to illustrate each 'strand' (though it would not be correct to identify each writer exclusively with that 'strand'). There seem to be at least the following strands in current Christian literature each of which we will outline in turn:

- Medical approaches
- Psychotherapy / pastoral counselling
- Inner Healing / prayer counselling
- Pentecostal healing / evangelism
- Charismatic / corporate ministry
- Deliverance ministry
- Holistic approaches
- Community care
- Public health

Medical approaches
Some Christians, particularly within the medical profession, would endorse the perspective of Peter May\(^\text{11}\) that the restoration of the image of God through the work of Christ is, in this world, spiritual and not physical, as death is inevitable. The priorities of gospel evangelism are concerned with eternal salvation, not temporary respite for ailing bodies. This is not to say that partial healing through medical aid is not to be sought, but that 'health' ultimately belongs to another world, and neither Scripture nor medical experience encourage us to believe in miraculous healing as normative for the Church. Indeed, such a view detracts from the positive value of suffering, neurotically focuses on the outward, the visible and the temporal, and raises false expectations.

Dr May denies that miraculous healings which closely resemble those of Christ occur more than extremely rarely today, and argues that though God could give supernatural healing today, it is not part of his normal provision.

There are echoes here of the stance of Reformed theology given classic expression by B. B. Warfield in 1918,\(^\text{12}\) who argued that the special divine healing gifts present in the ministry of Christ and the apostles ceased with the apostolic age. This is a view that many find very hard to sustain. Some who do take this view tend to work with the sort of 'medical model' of the human person, based largely on the dualism of a Newtonian world view, which understands the body as a machine, and illness as a failure in bodily function, and in which mental and spiritual life and health are either unrelated to physical processes, or are understood to be reducible to physical processes.

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Psychotherapy / pastoral counselling

Counselling and psychotherapy in Christian settings seek to provide relational contexts in which people in pain can be helped to live more creatively and more hopefully, by focusing on the emotional, relational, moral or cognitive aspects of their lives. Roger Hurding\(^\text{13}\) speaks of counselling as sharing in the process by which ‘we and those we try to help can move towards balance, maturity and a sense of identity, a sense of ‘being me’ in Christ. This can only be effected by the work of the Holy Spirit in our lives’. Laurence Crabb\(^\text{14}\) describes the goal of change for which counselling seeks in terms of ‘health’. ‘Healthy people’ enjoy God, are liberated to be involved with others, know that they are as yet only on the way to maturity. Their lives have a quiet power. They experience a ‘marred joy’, groaning as they wait for eternity. They are not afraid of confusion, they struggle, they fail, but they have a growing ability to be touched by God and to touch others, becoming freer from painful memories and repressed emotions. Michael Jacobs says that ‘Each new encounter in pastoral care provides a pastor with the chance of helping people to develop and grow as whole persons.... By ‘whole person’ I mean a man or woman as an individual as well as part of a family and social unit... body, mind and spirit... with... psychological, ethical and theological frames of reference.’\(^\text{15}\)

Inner healing/ prayer counselling

Counselling merges into prayer for inner healing in books such as those by David Seamands.\(^\text{16}\) By ‘inner healing’ is meant the approach to counselling which looks for an experience of the Holy Spirit to restore a person’s health in the deep areas of personal pain, by dealing with the root causes of hurt. Ruth Carter Stapleton uses a process of guided meditation, ‘faith-imagina­tion’, in which Jesus Christ, the same yesterday, today and for ever, is invited in prayer to go back into a person’s past life to heal traumatic episodes.\(^\text{17}\) Building on the work of Agnes Sandford,\(^\text{18}\) Francis MacNutt writes: ‘The basic idea of inner healing is that Jesus can take the memories of our past and (i) heal them from wounds that still remain and affect our present lives; and (ii) fill with his love all those places in us that have been empty for so long, once they have been healed and drained of the poison of past hurts and resentment.... At times the healing is progressive and takes several sessions, but I believe that it is always God’s desire to heal us of those psychological hurts that are unredemptive and that prevent us from living with the inner freedom that belongs to the children of God.’\(^\text{19}\)

\(^{13}\) R. Hurding, Restoring the Image, Paternoster, Exeter 1980, p 12.
\(^{14}\) L. J. Crabb, Understanding People, Marshall, Basingstoke 1987, p 125f.
\(^{15}\) M. Jacobs, Towards the Fullness of Christ, DLT, London 1988, p 2.
\(^{16}\) D. Seamands, Healing for Damaged Emotions, Scripture Press, Amersham 1981.
\(^{19}\) F. MacNutt, Healing, Ave Maria Press, Notre Dame 1974; The Power to Heal, Ave Maria Press, Notre Dame 1977.
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**Pentecostal healing / evangelism**

Since the major evangelistic campaigns of the 1920s, Pentecostal doctrine has linked together a public ministry of healing with public proclamation of the gospel. Indeed Christ is saviour and healer, and healing is an essential part of evangelism. There were frequent testimonies to divine healing at these campaigns, although it is worth noting Donald Gee's comment on 'the small number of definite miracles of healing compared to the great numbers who were prayed for.'

In his sociological study *Sects and Society*, B. R. Wilson concludes: 'Many Elim members whom the writer has met have claimed to have experienced divine healing, but almost always of an obscure and self-diagnosed complaint such as 'pains in the back'... others, often with better defined illnesses, ascribed their cure to divine intervention, even though they had received medical treatment... My own very limited enquiries have not brought to light any satisfactory example of divine healing.'

Much of the charismatic movement's emphasis on prayer for physical healing, as well as emotional and spiritual healing, was influenced by Pentecostalism. Although some of the more recent emphasis on charismatic healing has focussed on the benefit of the ministry to the ill person, others have also held on to the link between public healing ministry and public proclamation (just as 'many signs and wonders were done among the people by the hands of the apostles' Acts. 5:12). Though hard to put into a category, one aspect of John Wimber's approach to 'Signs and Wonders' links together 'Power Healing' with 'Power Evangelism'. Wimber believes that to pray for the sick is part of the commission to do the will of God on earth, illustrated by the life and ministry of Jesus. He bases this on Jesus' commission to the twelve, and to the seventy, and on the description of this ministry in the longer and disputed ending of Mark (16:18). His goal in praying for the sick is that they should be healed and that the Kingdom of God is advanced. Wimber understands healing in a sense broad enough to say that David Watson was healed through his death, though he usually means (quoting Linda Coleman) 'cases in which God intervenes directly, bypassing the natural processes of the body and the skills of doctors and nurses.' Rogers Cowley, following John Wimber's teaching, writes: 'I believe that God acted through Jesus Christ to bring healing, and that he gives power and authority to his disciples today to heal; such healing may be termed 'miraculous' in the sense of being a wonderful sign of God's activity.'

**Charismatic / corporate ministry**

There is a further strand to be added to this picture: the experience of some churches within the charismatic movement that 'healing gifts' are given within the context of corporate worship. Tom Walker writes of St John's Harborne, Birmingham: 'People have been healed through services at which

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22 Wilson, op. cit., p 96.
24 Goldingay, op. cit., p 104.
the elders have ministered according to James 5:14. Some have been healed during the quiet worship singing in Sunday services of Holy Communion, or through participation in worship dance, even though both these activities have at times been questioned by some in the church. Following prayer for healing a young mother miraculously gave birth to a child when she was told that it was medically impossible. During a Communion service another woman felt a tingling sensation in her breast. She had not asked for specific prayer ministry, though she knew that breast cancer had been diagnosed. But God had moved to heal her, because when she was admitted to hospital the next day, she was sent straight home after X-rays since no trace of cancer could be found. All these examples illustrate the importance of acknowledging God's authority in the church.25

Sacramental / liturgical approaches
Much of the traditional ministry of healing in the church has been more formal, liturgical and sacramental than the informal, spontaneous and often unstructured prayer of Pentecostalism, or the 'deep therapy of the Spirit' style of prayer counselling found in some approaches to inner healing. In Morris Maddocks classic study The Christian Healing Ministry26 he writes that Jesus 'alone is whole, the perfect pattern for our health', and he comments on Luke 2:52 that 'Jesus grew mentally (in wisdom) and physically (in stature), and also spiritually (in favour with God) and socially (in favour with man). These are the four areas of growth that need to be cultivated for perfect health.'27 Later Maddocks writes that 'the Eucharist is the healing sacrament, for it is a making present of Christ and his grace... word and deed come together as they did in the life of Jesus and the early Church... the offering of the fruits of creation (makes the Eucharist)... the anticipatory celebration of a healed creation.'28 The sacramental use of laying on of hands, anointing with oil and absolution can be associated with forgiveness, blessing, and prayer. The Church of England services for Ministry to the Sick authorised in 1983 includes these prayers: 'In the name of our Lord Jesus Christ who laid his hands on the sick that they might be healed I lay my hands on you, N. May almighty God, Father Son and Holy Spirit make you whole in body, mind and spirit, give you light and peace, and keep you in life eternal.' 'N. I anoint you with oil in the name of our Lord Jesus Christ. May our heavenly Father make you whole in body and mind, and grant you the inward anointing of his Holy Spirit, the Spirit of strength and joy and peace.'

Sometimes sacramental and liturgical ministry takes place in the context of public worship, sometimes at special 'healing services', and sometimes in 'private' celebrations of the Holy Communion with a small group of praying friends.

27 Ibid., p 16.
28 Ibid., p 113f.
Deliverance ministry / exorcism

Just as there are charismatic and sacramental approaches to healing ministry, so there are differing approaches to the ministry of deliverance from evil. In response in particular to the ‘occult explosion’ of the past two decades, the ministry of deliverance has grown. John Richards’ major study But Deliver Us From Evil together with the Report from the Bishop of Exeter’s Commission (1972) outline appropriate liturgical responses to those oppressed by evil. The existence of the demonic has been a cause of controversy within the Church (a whole issue of Churchman was devoted to this in 1980), as has appropriate ministry. Some charismatic pastors, acting without medical or ecclesiastical support, have found themselves in serious difficulties. The major denominations have formal procedures to be followed in cases needing exorcism, though a less formal ‘prayer for deliverance’ is often sufficient, and is usually understood as an elaboration of the petition in the Lord’s Prayer: ‘deliver us from evil’. The writings of Kurt Koch distinguish between disease and the demonic, and give guidelines for pastoral ministry.

An extension of deliverance ministry is found in R. K. McAll’s controversial work in which he describes how the spirits of earth-bound departed ancestors are commended to God (usually in a Requiem), praying for the release of people in the present from certain psychological and spiritual disorders.

Holistic approaches

Many Christian pastors and doctors work today with a holistic view of the human person, and accordingly try to treat the whole person whether their primary approach is through medical, psychological or spiritual means. Many of the above approaches are held together in different ways in different authors. Some writers, e.g. Leslie Weatherhead, Paul Tournier, Frank Lake, combine together aspects of medical, therapeutic and prayer approaches. Leanne Payne’s work brings spirituality and psychological insights into conjunction in her prayer ministry. Many within the pastoral counselling movement operate with a holistic view; for example: Seward Hiltner’s discussion of the healing aspect of the shepherding perspective. He defines healing as ‘the restoration of functional wholeness that has been impaired as to direction and/or schedule’, and suggests that the efficient causes of impairment are defect (e.g. birth handicap), invasion (e.g. bacteria, virus, poison, the invasion of one person by another’s need to control), distortion (e.g. bad diet, false goals for living), and decision (e.g. certain life choices). In the broad, but not specific sense, impairment is related to sin —

30 K. Koch, Between Christ and Satan, Evangelisation Publishers, W. Germany 1972; also Christian Counselling and Occultism.
36 S. Hiltner, Preface to Pastoral Theology, Abingdon, Nashville 1958.
the ultimate condition from which healing is needed. Hiltner comments on the recovery of the view that body and mind are two basic perspectives of the one organism, and he develops a holistic approach to the ministry of the whole person.

In a few instances, of which Christopher Hamel Cooke’s work at St Marylebone parish church is perhaps best known, the holistic approach is set within a ‘healing and counselling centre’. At St Marylebone, the church crypt has been adapted to include an NHS G.P. surgery, counselling rooms, music therapy room and library, providing in one building worship, therapy, medicine, spiritual direction, and sacramental ministry, as well as ‘befrienders’ available to offer frontline care. The vision described in Health is for God looked forward also to the inclusion of those involved in ‘holistic medicine’, osteopathy and acupuncture. The work is based on the doctrine of God’s continuing creation, and the restoration of peoples’ relationships with their creator.

A number of other Christian healing centres have been established, some directly in the wake of the charismatic movement, others more on the model of Burrswood Christian Healing Centre in Kent, which was established by Dorothy Kerin in 1929 to provide a partnership between the Church and medicine. Kerin’s vision was to ‘heal the sick, comfort the sorrowing, and give faith to the faithless’.

Some Christians involved in holistic medicine, and in various approaches to inner healing (particularly visualisation techniques) and to Jungian psychotherapy have been criticised for selling out the gospel to New Age thinking, that blend of humanistic psychology, occult practice and fringe medicine which has become a major influence in the popular mind in some areas. Such critics believe that there is quite inadequate theological evaluation of some aspects of holistic medicine, and argue that some may be open to demonic influence.

Community care

R. A. Lambourne, a medical practitioner and theologian, wrote Community, Church and Healing in 1963, in which he argued that the healing ministry of Jesus should be seen primarily not as an instance of individually-oriented compassion, but as a series of community events. They were signs of a socio-political entity (the Kingdom of God); they were sorts of acted parables, and they functioned as disclosures of the judgement of God on the earthly communities of the time. The healing miracles of Jesus are... corporate effective signs. They are done “in you” and they both heal and confront the community. They are signs of the Kingdom, ushering in the Kingdom, the

rule of God and demonstrating its nature. As the Kingdom comes upon the community, the power of the blessings of the mercy of God burst upon them and the wrath of the holiness of God judges them. When God visits his people, healing their sickness as manifested in the sick one amongst them, this divine healing is the time of their judgement, the moment of decision.  

The needs of both individual and community together are thus part of the story. The challenge of the sick person to the community, and the needs of the community itself, must both be taken into account.

In his provocative Alive and Kicking, Stephen Pattison seeks to root Christian discussion of sickness in the complexities and ambiguities of modern technological society. How does Christian healing relate to wider concepts of justice in such a society? Pattison picks up for particular comment the way technological, medical and social changes in the West have disguised human vulnerability to disease, making us ill-prepared to cope with, for example, AIDS. 'Doubtless contemporary Christians can argue doctrinal niceties until the Second Coming. It is their response and attitude to the fear, suffering and death brought about by AIDS, amongst other diseases, which will prove the truth and relevance of the gospel for this generation. There are great opportunities for witnessing to the power of love, compassion and solidarity here. Equally, there is the possibility of isolation, moralistic indifference and complacency...'.

Public health

There has been extensive Christian discussion of the ethical problems concerning allocation of scarce health care resources. There has been comparatively little Christian writing on such public health issues as preventative medicine, long-term support for the chronic sick, health factors in the debates on environmental pollution, epidemiology, geriatric care, and so on, though Stephen Pattison's Alive and Kicking does address some of these questions from a Christian theological perspective.

Some underlying questions

The dispute between Christians of different persuasions concerning the Church's ministry of healing, to some extent reflected in the diversity of approaches indicated above, has a long history. It is seen in the antagonism of the main-line churches to the development of Christian Science since the publication of Science and Health by Mary Baker Eddy in 1875. It is seen in the disputes engendered by the development of Pentecostalism. It has surfaced in recent decades through the charismatic movement's effectiveness within the mainline denominations. It is evident in the development of the

43 Ibid., p 141.
phenomenon of the healing evangelist especially in the USA (although Morris Cerullo's visit to the UK in 1992 provoked controversy here). Some of these movements are linked also to the more recent 'prosperity cults', which link spiritual and material well-being as part of the blessing of God. It is worth asking sociological questions about such developments, and their relation to the income levels of the recipients. Is it the case, for example, as has sometimes been suggested, that the quest for supernatural healings flourished, as the cost of traditional medicine became prohibitive for the poor in the Mid-West? Much of this approach to healing is episodic, and dramatic. This contrasts with that other steadier and more formal approach to Christian healing ministry, the sacramental.

The following is a selection of the theological questions which are often raised in such disputes, all in their different ways questions about the Christian gospel. What is the Good News for a suffering world, and for diseased, ill and sick people? Each question could, of course, lead to further extensive theological, sociological and pastoral discussions, but these are beyond the scope of this article.45

1. There are questions concerning the ministry of Jesus. What is the continuing significance for today's Church of the healing ministry of Jesus? Has he given us an example, or a command to imitate him in this regard (and to raise the dead?) or is his ministry distinctive, and if so how? How do we understand the ministry of the early Church in the light of the ministry of Jesus?

2. There are questions concerning creation, and the physical world. What is the relation of body and soul? Christian Science of course opposes 'spirit' to 'matter', but believes that the truth of Christ heals both sickness and sin. Do some Christians work with a similar dualism?

3. There are questions about God's purposes in the world. How do we think God acts in the world — through supernatural intervention (and what model of space and time does that assume?) or through continuing creative engagement, or through some other means? What does our conception of God's action mean for our understanding of healing? And of prayer and sacraments? Is it God's purpose that we should all be in good health?— for everyone, all the time? What does that mean for theodicy? What does that mean in the face of cholera epidemics in the Third World? Should Christians in such settings spend their time laying hands on the sick? How far is what we call 'Christian healing ministry' a Western phenomenon? Is there an imperative on us to seek health? Can health become idolatrous? Does all healing come from God, or only some? Is the healing provided by shamans, spiritualists, magicians from God? How do we discern what is from God?

45 For some of these questions, I am grateful to an unpublished paper by Dr Stephen Pattison.
4. There are questions about suffering and death. What is our theology of suffering, frailty, disease, decay and death? How does our theology deal with the seven year old haemophilic child dying of AIDS? What is the relation between the suffering of Christ and his ministry of healing? What is the relation between sickness, sin and the demonic? What does the Pentecostalist doctrine that ‘there is healing in the Atonement’, mean, and do we accept it? What is the relation between healing and death? Is there a ‘pain that heals’? 

5. There are questions about the Church's ministry. How much of the testimony to healing is an interpretation of the person's own constructed self-understanding, and how much is objectively verifiable? Does it matter? What is the relation between healing and evangelism? Do testimonies of healing reassure the faithful rather than the sceptic? What do we think we are doing when we pray that an ill/sick person may be restored to health? What is the role and meaning of faith/prayer/expectancy in such a ministry? Does preventative medicine, public health and community care qualify as 'Christian healing'? Why has Christian healing ministry concentrated on the individual and his/her illness and its cure? Does it matter that there is a variety of approaches to Christian healing ministry? Is it all right for us to discover our own style?

Perhaps at this point we do well to recall Stephen Pattison's caution concerning definitions. By 'healing', some Christians mean 'instantaneous and miraculous removal of disease without medical intervention'; others mean 'progress back to health using medical and/or psychological and/or spiritual means — God uses all of these'; others reserve 'health' for the life to come, and speak of the 'healing' of dying in Christ; for others Christian healing is generally 'Jesus Christ meeting you at the point of your need'.

A theological perspective: resurrection and healing

In this final section, I do not propose to address each of the above questions directly. Instead, I offer a possible theological framework in which discussion — in relation to healing — of such themes as the ministry of Jesus, creation, the purposes for God, suffering and death, and the Church's ministry, can be set. It covers our physical life, and so our response to disease; it addresses our personal and relational life, and so our response to illness; it is an inescapably corporate approach from which we can address our social and community life, and so our response to sickness. This framework begins with the affirmation at the heart of the apostolic gospel, that Jesus Christ is risen from the dead. (Acts 2:31; 4:2; 4:33; 1 Cor. 15. etc.). All Christian life and ministry begins here.

47 A sentence, I think, from Morris Maddocks.
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Here are five major propositions (which broadly cover the scope of our earlier questions).

1. The resurrection demonstrates that Jesus is the Messiah of Jewish expectation (Acts 2:36) and the Son of God (Rom. 1:4). The Messianic hope of the Old Testament was for a royal priest/deliverer to come, who would bring shalom, peace in righteousness, with justice for the poor, freedom for the oppressed and healing for the sick. When Jesus replied to John the Baptist's disciples 'Go and tell John what you have seen and heard: the blind receive their sight, the lame walk, lepers are cleansed, and the deaf hear, the dead are raised up, the poor have the good news preached to them' (Luke 7:22), he was saying that indeed he is the expected Messiah.

Jesus began his ministry, which included from the outset expulsion of demons and healing of the sick, by announcing that the Kingdom of God was at hand. The Kingdom means both the present rule of God and also the future new restored creation. The 'Kingdom of God' refers both to the 'age to come' of messianic expectation, at present prefigured in Jesus' messianic signs, and also to the future kingdom of Christ's glory when all life will share in a transformed world. In the Synoptic Gospels, the theology of the Kingdom of God is essentially one of conflict and conquest over the kingdom of Satan—the powers of evil abroad in this world which contradict the rule of God. When the Kingdom of God comes close in Jesus, its light exposes the powers of darkness. This world is shown up to be what it is: disordered, diseased and alienated from its creator. The Gospels picture Jesus as God's messianic king, de-demonising the world, and through the 'powers of the age to come' (Heb. 6:5), making the whole world free and reordered (Matt.19:28).

So Jesus' healings both cure the sick and confront the watching world. The lordship of God in Jesus brings salvation, with its healing power, to all sorts of people and all sorts of needs. Healing is the gift of health. Salvation is the conquest of the power of death. As Moltmann puts it 'Healings and salvation are related to one another in such a way that the healings are signs, this side of death, of God's power of resurrection...; while salvation is the fulfilment of these prefigured real promises in the raising of the dead to eternal life.' Salvation has both a personal and a cosmic side: the personal, which the healings prefigure, is the resurrection of the dead; the cosmic, which the exorcisms prefigure, is the annihilation of death. There will be a 'transfiguration of the body.' (Phil. 3:21), and there will be a 'new earth' (Rev. 21:4).

In this eschatological framework, the healings of Jesus are thus seen as pointing forward to the new creation of all things. As Hans Küng puts it 'God's kingdom is creation healed.' In the context of the coming new creation, the healings of Jesus are not supernatural miracles, breaking into the natural order; they are the 'outcrops' of the true natural order, within this as yet ambiguous fallen world.

Sickness, then, is a manifestation of abnormality resulting, in a very general sense, from sin in the world, and from the binding power of Satan (cf. Luke 13:16). The resurrection of Jesus is the ‘first fruits’ of the new creation in which the power of sin is broken and the principalities and powers are disarmed (Col. 1:15f; 2:15; 1 Cor. 15:20).

2. The resurrection of Jesus is an affirmation of creation which is to be transformed into the kingdom of Christ’s glory. It also shows us that God’s creative engagement with his world continues (‘my Father is working still’ John 5:17). God is not deistically detached in a ‘supernature’ from which he occasionally intervenes in a ‘nature’ which is like some closed receptacle of natural causes. God’s action in the world is one of constant creative engagement and relationship with what he has made. However, much of that creation is at present groaning under a bondage to decay (Rom. 8:21), a groaning which is the labour pains of the kingdom of God’s glory, which he is bringing to birth. We now live between the times: not yet in the new heaven and new earth.

The resurrection of Jesus is the resurrection of the body. ‘The body’ is the whole person viewed from the perspective of our physical nature. So we must reject the secular ‘medical model’ of physical determinism and reductionism, and work with a holistic model. Yet our physical natures are fragile. Our ‘outer nature’ is wasting away (2 Cor. 4:16); but as we share in the power of Christ’s resurrection, and the gospel which ‘brings immortality to light’ (2 Tim. 1:10), this ‘perishable nature’ will put on the ‘imperishable’ (1 Cor. 15:53), and we shall be ‘further clothed’ (2 Cor. 5:4) with ‘spiritual bodies’. Before the Kingdom of God’s glory fully comes, there is sickness, frailty, decay. Sickness serves as a messenger that we are still affected by the rule of death. It can also serve as a messenger of salvation, by waking us up to dimensions of reality which were hitherto hidden. There can be, as Martin Israel says a ‘pain that heals’. This does not mean that the body is unimportant. On the contrary, we should care for the bodies God has given; we should will to live in our bodies, and so will and work to be healthy.

3. The resurrection is the work of the Holy Trinity. The Father raised the Son in the power of the Spirit. The heart of the universe is persons in a communion of freedom and love. The personal wholeness and the social wholeness described by the messianic gift of shalom, is found in fellowship with the Holy Trinity, in freedom and love. This is the holiness which underlies all true wholeness. The coming kingdom of God’s glory is a new community of righteousness, justice and shalom, and this calls into question the over-individualised emphasis of much contemporary Christian ministry.

4. The resurrection of Jesus established the victory of the cross. God’s being and God’s action are one and the same. God’s being reaches out in vulnerable self-sacrificing love to embrace our frail and sinful humanity, to share in the injustice of innocent suffering, and to put to death on the Cross the power of all that holds us in the grip of Satan, sin and death. The principalities and powers have been conquered (Col. 2:15), and we are now waiting for all things to become subject to Christ (1 Cor. 15:28). The power of Christ’s salvation is
that of weakness, suffering and pain. Part of Christian ministry may begin here, in providing a ministry in the name of the crucified God to a suffering humanity. We may not be able to receive the gospel of resurrection, until we see the depths of God's love for us in the suffering of Calvary, and that 'nothing more stands between God and me, because (Jesus Christ) has become my brother. At the bottom of every abyss he stands beside me.'50 Although theologically we make sense of the cross only by beginning with the resurrection, the order of ministry and the order of healing may be the order of history: suffering and death precede life and glory.

In one sense we have been saved (Eph. 2:5), and in the same sense we have been healed (1 Pet. 2:24); in another sense, we are being saved (1 Cor. 1:18) — and are being healed; in a third sense we shall be saved (Rom. 5:9), and shall be healed. There is 'healing in the Atonement', but this is not a statement of present experience, so much of eschatological hope. And living and waiting in that hope may involve us sharing now in the sufferings of Christ, until the kingdom of justice and peace is fully established.

5. The resurrection is the power of the Church's ministry (Eph. 1:19-20; 3:20) in this present age, while we wait for the full liberation of creation. It is through the Church that the purpose of God to unite all things in Christ is now made known (Eph. 1:10; 3:10). The Church lives in the power of the resurrection as the Body of Christ, with each member gifted for the good of all (Eph. 4:7ff). The goal of Christian ministry within the Church is that we should all attain maturity, the measure of the stature of the fullness of Christ (Eph. 4:13; cf. Col. 1:28). In this context we struggle in faith, we love our neighbours, we work for justice, we say our prayers. We wait in hope (1 Pet. 1:21); we will to live the life God has given to us; we will to be in health, the strength for life, and we work for the health of one another and of the communities in which we live: 'Seek the shalom of the city' (Jer. 29:7). We are concerned with what enables health (political and environmental concerns, justice in use of resources); we thank God for medical skill (cf. Ecclus. 38:2ff), we recognise the work of God in every pushing back of the power of evil and in every movement towards wholeness in holiness. And to this end we pray: we pray for health and for healing for one another, just as we pray for our and their salvation, meaning by this that we 'cast our cares onto him' (1 Pet. 5:7); we tell God our needs, our hopes, our fears; and we place ourselves and those we pray for in the hands of the risen Lord.

Sometimes the result of prayer is immediate visible release of some part of our life which is still under the power of the ruler of this age (physical change; forgiveness of sin; removal of guilt; motivation towards justice; restoration of relationship; change in business priorities — cf. Zacchaeus). All such small healings are pointers to the ultimate healing of creation. Sometimes this is part of a process of maturing. Sometimes, however, God leaves us with things which we would like changed in order to help us change in other ways first.

The ministry of healing is not merely or mainly an episodic response to particular sicknesses in order to proclaim God's miraculous power; nor should signs and wonders be sought for their own sake ('a wicked and adulterous generation seeks for a sign', Matt. 12:39). The ministry of healing, rather, is a 'sacrament of God's grace leading mankind to its proper place in the world'51 led on by the vision of a restored creation within which the healing of individuals and society are to be understood, and in which disease and suffering may sometimes be necessary for wholeness to be attained. This ministry is to be an ongoing part of the life of prayer and the sacramental life of the Christian worshipping community, in which we try to bring every part of life into touch with the resurrection power of the risen Lord, that we may be transformed from one degree of glory to another, as we are in the process of being changed into his likeness, (2 Cor. 3:18), to become the community of his kingdom.52

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