

Life as God Intended



Christian explorations into
health, sickness and healing

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What foundation?

In beginning to think about health it is important first of all to lay some foundation at the level of what is often called our worldview. The reason why this is important is because unless we have some idea of what reality consists of we cannot begin to understand who we are, and if we do not understand who we are we cannot decide what it means to be healthy, and if we don't know what health is we can't figure out how we should live in order to improve health and where to seek healing.

Naturalism – the dominant worldview in modern medicine

Modern medicine is, fundamentally, a branch of the natural sciences and it shares with other sciences a basic approach that may be called scientific or methodological naturalism. In other words, it seeks to understand, explain and solve everything in purely natural or material terms – based only on what consists of physical, material ¹ stuff that can be measured and quantified. This methodology does not necessarily imply disbelief in the possibility of a realm of existence beyond the physical, but it means that non-physical, supernatural or spiritual causes are not considered to fall within the remit of science and therefore of medicine. In fact, many modern philosophers and scientists are committed to a naturalistic or materialistic worldview that excludes even the possibility of the spiritual.

Naturalism has gained popularity in recent years and many people in the Western world now believe that human beings are nothing more than very complex machines, which came into existence through chance circumstances without any over-riding purpose, and that all our mental processes can be explained purely in terms of physics and biochemistry. Three factors have contributed to the growth in popularity of naturalism:

1. *Scientific research into brain function* – we are gaining increasing knowledge of the complex biochemical changes that occur in the brain when we think, act and have sensations. The argument that follows is that there is no 'me' (mind or soul) that is separate from the physical body. Some scientists commit the classic error of thinking that because we now understand **how** something works there is no room for a possibility that there is a further dimension to life including the question **why** we are here at all to think about it.
2. *Advances in computing* – although true artificial intelligence is still some way off computers that can mimic (often at greater speed) some of the functions of the human brain have led to the brain being compared to a complex computer. Ironically, though, the people who make the comparison fail to recognise that a computer and, more importantly, the complex information that allows it to function, is designed by human intelligence. Is it not, then, logical to think that our complex brains and the information that lies behind them (in our DNA) also originates from an intelligence?
3. *Increasing acceptance of an atheistic world view* – if the supernatural is denied, people must look for answers to the nature of reality in physical matter alone. The New Atheists (Dawkins, Dennett, Harris etc.) have been extremely active in promoting atheism on the basis of a naturalistic worldview, but they often do it by appealing to science as if there were no room for an alternative explanation of the facts. In reality the reasons for a growth in atheism have little to do with intellectual arguments and a great deal to do with lifestyle choices which are then justified by the intellectual case.

There are three main objections to naturalism from a practical and theological perspective:

1) It undermines the sanctity of human life

Naturalism has led to a tendency to judge a person's worth by their ability to reason. The result is that babies, brain-damaged people and people with dementia or significant learning disabilities are treated no differently from animals. Bioethicist Peter Singer has presented this argument in stark terms:²

¹ The terms material and physical are often used interchangeably as I have here, although strictly speaking, *physicalists* say that energy exists as well as matter.

² Singer, Peter. 1983. 'Sanctity of Life or Quality of Life?', *Paediatrics*, 72 (1): 128-9

Once the religious mumbojumbo surrounding the term human has been stripped away, we may continue to see 'normal' members of our species as possessing greater qualities of rationality, selfconsciousness, communication and so on than members of any other species, but we will not regard as sacrosanct the life of each member of our species, no matter how limited its capacity for intelligent or even conscious life may be.

Singer has advocated infanticide, euthanasia and animal rights on the basis of this view. These attitudes may shock us, but they do follow logically from the belief that human beings are 'less than persons' if they have lost, or never gained, reasonable mental faculties.

2) It cannot explain all of human experience

Naturalism struggles to explain psychological phenomena such as desires, intentions, sensory experiences, thoughts and beliefs. Most human beings believe that we have freedom to make choices, and that the 'I' that chooses is somehow independent of cause and effect, able to judge between alternative possible actions. If philosophical naturalism is true, then this choice is merely an illusion and our feelings, choices and actions will be determined solely by the interactions of chemicals in our brains. This does not fit with the natural instinctive belief most people hold that there is actually an 'I' that is conscious and knows guilt, pleasure and pain as well as a host of other sensations. As medical science advances we are increasingly able to measure and interpret the electrical impulses in the brain, the hormonal levels changes in the body and the facial expressions that accompany these sensations, but this ability to measure connected physical phenomena is not the same as knowing the other person's private subjective experience. We all know that two people could experience identical situations but feel entirely different. Even if we read their account of how they felt we are not experiencing those feelings, merely trying to identify with them through empathy. When counselling others we can say that we understand something of how they feel, but we can never claim to fully understand them. We are able to distinguish between being able to see and feel our own bodies and being able to see the world and feel it through them. In short, materialism does not quite match with our own instinctive sense of reality. It seems logical to conclude that mankind is more than merely a product of physical forces, although ardent materialists will argue that this perception itself is simply an illusion produced by the biochemistry of the brain.³

3) It does not fit with the Bible's teaching about man and truth

The Bible describes human beings as moral creatures, responsible before God for the choices we make. 'Free will' is potentially misleading term because our decisions are always influenced by the ideas of others including Satanic temptation and because we often find ourselves weak and powerless to do what we know to be right (see Romans chapter 7). Nevertheless, it would be wrong to suggest that we have no choice about our actions. The biblical story depends on the fact that Adam and Eve made a choice to rebel against God, and that God is calling people to decide to surrender again to Him. Only those Christians who take a hyper-Calvinistic view (believing that God has pre-determined absolutely everything without allowing any free agency to His creatures) could find some resonance with naturalism. This view neglects the Biblical tension between God's election of those He foreknew and the individual's response to His call to repentance. If man has no choice about sin and repentance then God's judgement on sin makes no sense. The Bible claims that absolute truth exists, resting upon the person of God Himself. He is the basis for truth and He is outside and distinct from the physical creation. There is such a thing as objective truth, and truth is not just the subjective result of our own experience.

There are some philosophers who raise significant concerns about naturalism and its dominance within science that leads to what can be called scientism, the belief that science alone is the pathway to all that can be truly known about our world. The term *New Mysteries* has been suggested for philosophers who, recognising that subjective experiences cannot be strictly measured and compared with one another, claim that science alone

³ For a longer discussion of the nature of human life and consciousness see my paper *What Does it Mean to be Human?*, available on the Bioethics page of my website and on www.bethinking.org.

can never fully explain consciousness.⁴ This is called 'New' to distinguish it from past philosophical theories that depended on a dualistic view of human nature – either that man is mind and body or soul and body. The New Mysterians do not necessarily claim that there is something more than just physical matter in the world but only that some dimensions of existence are not open to the methods of science.

Monism, dualism and the nature of humanity⁵

The discussion so far raises a very important question. Is reality fundamentally *monistic*, consisting of only one dimension, or *dualistic*, consisting of two dimensions. Naturalism is monistic, believing that only matter exists. The fact that God is spirit and He is distinct from the physical world and independent from it for His being means that Christians cannot accept the idea of philosophical naturalism. We understand that reality must be fundamentally dualistic. We must, however, ask whether we ourselves are composed of one thing or more than one thing. Should we have a monistic or dualistic view of mankind?

The New Testament uses three words to describe different aspects of man's nature:

- *Sōma* – normally translated 'body'
- *Psychē* – normally translated 'soul'
- *Pneuma* – normally translated 'spirit'

These three concepts are clearly recognised in the New Testament, for example in 1 Thessalonians 5:23, and appear in some instances to be distinct. Hebrews 4:12, for example, speaks of the word of God separating between the soul and spirit, suggesting they are not identical. The biblical account of creation also suggests distinct dimensions of human life – in Genesis 2:7 God forms a body for the man, then breathes into his nostrils the spirit of life (the same Hebrew word is used for breath and spirit) and he becomes a living soul (the Hebrew word for soul is used in the phrase "living being"). However, in many other places in Scripture the concepts of spirit and soul are not so easily distinguished, and there appears to be considerable overlap. Generally speaking, these three aspects of man can be defined best in terms of the ability to relate to different things:

- *Body* – the physical aspect of our being, capable of interacting with (relating to) the physical created universe and of being measured through the tools of science. The body houses the soul and spirit.
- *Soul* – the emotional and rational aspect of our being (also called the 'heart' or, in modern language, the 'personality'), capable of relating to other human beings.
- *Spirit* – the aspect of our being that is capable of relating to God and other spiritual beings. This is the centre of man's ability to worship.

All three aspects have been damaged by sin, so that the body is subject to disease, decay and death, the soul is corrupted so that we no longer trust one another and the spirit is dead because of its disconnection from God. Sin broke the harmony of mankind with God, with one another and with the physical universe.

The biblical usage of these three terms has resulted in debate between theologians over whether man is bipartite or tripartite (whether Scripture describes a dichotomy – the present of two distinguishable parts – or a trichotomy – the presence of three distinguishable parts – in the human identity). Some tend to speak of man as being three parts (body, soul and spirit), while others prefer to speak of two parts – the visible body and the invisible soul or spirit. In recent years, though, theology has tended to move away from these definitions to speak of the human being as a whole person. In our lived experience it is generally impossible to separate the body, soul and spirit, at least for the human mind, and to be fully human includes having all three in harmony with one another. If the soul is separated from the body, the body dies. Our eternal state will be in a body (1 Corinthians 15), although it will be a different kind of body than our present one. The terms used by Paul in 1 Corinthians 15 are interesting in themselves and only serve to highlight the dangers of trying to distinguish firmly between body, soul and spirit – our current body is called a *sōma psychikon* (literally "soul body") while the resurrection body is a *sōma pneumatikon* (literally "spiritual body"). The tendency to force a dichotomy between body and soul or spirit owes more to Greek philosophy (particularly the theories of Plato), which

⁴ The term *New Mysterians* was coined by Owen Flanagan in his 1991 book *Science of the Mind*.

⁵ Again for more detail on these questions I refer the reader to *What Does it Mean to be Human?*

viewed the body as the source of corruption and the prison for the soul. In this view, the body must be punished and cannot be enjoyed, and the ultimate destiny of man is to exist in spirit form out of the body. This philosophy is the basis for the popular concept of heaven as a place of spirits, but contradicts the Bible, which sees our ultimate destiny inhabiting the new earth in our new bodies. In biblical terms, the whole person (body, soul and spirit) is fallen and requires a new act of God's creation to restore it to its original potential. It is unhelpful and unbiblical to create a false separation between body, soul and spirit. As one dictionary of theology says:

the popular debate concerning whether human nature is a bipartite or tripartite being has the appearance of a rather ill-founded and unhelpful irrelevancy. The human person is a 'soul' by virtue of being a 'body' made alive by the 'breath' (or 'Spirit') of God.⁶

We may have to leave the ultimate question of whether our human existence is monistic or dualistic unanswered but we will need to think holistically if we are to move towards a balanced understanding of health. Through the Fall, the whole person has been corrupted, and we find the results of sin in our body (susceptibility to ageing, disease and death), soul (desires that are uncontrolled and personality flaws) and spirit (disconnection from God and the tendency to sin). All three are in need of redemption and regeneration. In glory we will be perfected in every part – we will have a new body which is incorruptible (1 Corinthians 15:42), our soul will be renewed in the likeness of Christ and our spirit will live eternally in connection with God and free from sin. In the meantime we can realise the truth that our bodies are the temple of the Holy Spirit (1 Corinthians 6:19) and can offer our bodies to God as living sacrifices (Romans 12:1 – the body representing our whole being but Paul's choice of word, with its rebuttal to any idea from Greek dualism that the body is intrinsically evil, is no doubt deliberate). Interestingly it is through the renewing of our minds (Romans 12:2) that we are transformed – the body and mind together become instruments through which God's will can be accomplished. The mystery of the nature of man may well be beyond our ability to fully understand, as the *New Mysteries* suggest, just as the mystery of the nature of God is beyond us. We cannot fully grasp the reality of the trinity, and so it should not surprise us if we cannot fully grasp the nature of man who is made in the image of the triune God.

In conclusion, then, we may find these three aspects of our being useful in terms of describing what it is to be human, but we must not create a false separation between them as they constantly interact with each other in the complexity of human existence.

Biblical dualism and the nature God's actions in His world

One final foundational issue for our discussion of health and healing relates to the nature of God's activity in the world. It is not uncommon to hear of a distinction being made between what is 'natural' and what is 'supernatural'. Although we generally understand what is meant by this distinction it is worthy of a little thought. When we speak of the 'natural' we generally mean those things that are predictable based on the pattern of how things normally work – the things that are measurable and explicable through science. In the context of health this could mean the ability of my body to fight a viral infection or of a surgeon to remove a cancerous lump. These are 'natural' events. We reserve the term 'supernatural' for those events and experiences that fall outside the power of science to explain – extraordinary things that are not predictable and that are remarkable because they are unusual. Such events are often described as miracles.

The Bible clearly recognises describes miracles that occurred in human history. The language it uses to describe these and the reactions of people who observed them clearly indicates that these are extraordinary events. They are generally described as signs pointing to the fact that God is acting in His world, although Scripture also warns that evil spirits are capable of counterfeit miracles (e.g., Exodus 7:11-12). It is, therefore, legitimate on biblical grounds to make a distinction between the miraculous and the natural, but there are some dangers that we must avoid in doing so. We must remember three truths:

⁶ 'Anthropology' in *New Dictionary of Theology* (IVP)

- **God is continually involved in His creation, sustaining it**

Any distinction between 'natural' and 'supernatural' that suggests that God is uninvolved in His world except when He acts in the miraculous is unbiblical. Scripture speaks often of God's involvement in the ordinary running of the world. Psalm 104 describes God as the one who directs the water cycle (v10-13) and causes grass to grow (v14). The whole psalm describes God as the wise designer of a world that runs well, sustaining life in all its diversity, but it uses language that suggests that God didn't simply 'wind up the clock' and let it run. Rather, He is intimately interested in all that happens and directly involved in overseeing His creation. In Job 38-39, God Himself speaks and describes His sovereign rule over creation and His awareness of all the details of its operation. In Matthew 5:45 Jesus describes God as the one who sends rain on both the righteous and the unrighteous. Colossians 1:16-17 describes Jesus as the one by whom all things were created and the one in whom all things hold together. Hebrews 1:2-3 speaks of Him as the creator and the sustainer of all things through His powerful word. We may wonder exactly how Christ's sustaining power operates in our universe, but we can be absolutely confident that it does. If God were to stop upholding our universe it would disintegrate.

- **All good gifts come from God, whether seemingly natural or supernatural**

James 1:17 describes God as the 'Father of the heavenly lights' from whom every good gift originates. Christians, following the Hebrew custom that Jesus exemplified, regularly give thanks for our food, acknowledging God as the one who gave it even though we are aware that it reached our table through a complex chain of events starting in a farm, involving transport to a distributor and then to a shop, our trip to buy it and our activity in preparing it to be eaten. We recognise that this food is a good gift from our Father. Jesus describes this kind of attitude in Matthew 6:25-34 where He tells His disciples not to worry about where they will find food and clothing, promising that God will provide. He doesn't mean that God will always supply these things miraculously – often they will come through 'natural' means, either our own work or gifts from others. Nevertheless, we trust God as the one who provides them. Even in biblical accounts of miracles it is sometimes difficult to tell where the natural ends and the supernatural begins or what is 'primary agency' (where God acts directly without any intermediate means) and what is 'secondary agency' (the means that God uses to accomplish the miracle). Consider the account of the parting of the Red Sea in Exodus 14:21 where God uses a strong wind (what might seem 'natural') to accomplish a dramatic event that appeared supernatural and miraculous to Israel. Likewise, the healing miracles of Jesus sometimes involved the use of an agent from the natural world (e.g., mud and saliva in John 9:6) for reasons that aren't always explained (perhaps the use of mud was an echo of God's creation of man in Genesis 2). We must be careful not to seek the miraculous and neglect our gratitude to God for the ordinary.

- **Miracles point to the nature of the world as God intended it**

Miracles are, by their definition, unusual. We will discuss different theological perspectives concerning how much we ought to expect healing today at a later point in this paper, but for now it is important to emphasise the purpose of miracles in the biblical account. Miracles are not strictly 'supernatural interventions of God' in the natural world – this definition would suggest that God is not active except when miracles happen which is, as we have seen, wrong. Rather, miracles are abrupt reminders of the constant truth of God's sustaining power in the universe – glimpses of the unseen reality of His sovereign rule. The miracles of Jesus are often called 'signs' because they point to the nature of the Kingdom of God, the identity of Christ as the King, the way the world would be if all was aligned with God's rule, and the hope of a future re-creation of all things in which sin, the curse and death will be no more. Miracles don't involve so much the suspension of the normal rules of the universe as the intensification in one place and time of the fundamental rule that undergirds all other rules – the creating, sustaining and restoring power of God. They point to the way the world would be if everything worked out exactly as God intended it, a world free of the effect of sin. In our future eternal home when the results of sin are stripped away and the curse is removed there will be no need of miracles because everything will be as God intends.

Death and disease

Causes of Death

The following table, based on data from the World Health Organisation ⁷ compares the top ten causes of death in 2008 (with percentages of deaths due to that cause in brackets) compared between the world, low income countries and high income countries:

Rank	World	Low income countries	High income countries
1	Ischaemic heart disease (12.8%)	Lower respiratory infections (11.3%)	Ischaemic heart disease (15.6%)
2	Stroke and other cerebrovascular disease (10.8%)	Diarrhoeal diseases (8.2%)	Stroke and other cerebrovascular disease (8.7%)
3	Lower respiratory infections (6.1%)	HIV/AIDS (7.8%)	Trachea, bronchus, lung cancers (5.9%)
4	Chronic obstructive pulmonary disease (5.8%)	Ischaemic heart disease (6.1%)	Alzheimer and other dementias (4.1%)
5	Diarrhoeal diseases (4.3%)	Malaria (5.2%)	Lower respiratory infections (3.8%)
6	HIV/AIDS (3.1%)	Stroke and other cerebrovascular disease (4.9%)	Chronic obstructive pulmonary disease (3.5%)
7	Trachea, bronchus, lung cancers (2.4%)	Tuberculosis (4.3%)	Colon and rectum cancers (3.3%)
8	Tuberculosis (2.4%)	Prematurity and low birth weight (3.2%)	Diabetes mellitus (2.6%)
9	Diabetes mellitus (2.2%)	Birth –asphyxia and trauma (2.9%)	Hypertensive heart disease (2.3%)
10	Road traffic accidents (2.1%)	Neonatal infections (2.6%)	Breast cancer (1.9%)

In total there are eighteen causes of death on these lists. Considering each of these, it becomes clear that many of these deaths are preventable:

- *Ischaemic heart disease* – 95% preventable by lifestyle and diet changes ⁸
- *Stroke and other cerebrovascular disease* – 80% preventable by lifestyle changes ⁹
- *Lower respiratory infections* – many preventable in younger, well patients, although often the final cause of death in old age
- *Chronic obstructive pulmonary disease* – 85-90% caused by smoking ¹⁰
- *Diarrhoeal diseases* – 88% due to lack of clean water and sanitation ¹¹
- *HIV / AIDS* – 100% preventable
- *Trachea, bronchus, lung cancers* – 86% caused by smoking ¹²
- *Tuberculosis* – 100% preventable
- *Diabetes mellitus* – 90% preventable through lifestyle (weight, smoking, diet, exercise and alcohol) ¹³
- *Road traffic accidents* – 100% caused by man
- *Malaria* – 100% preventable

⁷ WHO Fact Sheet No. 310, <<http://www.who.int/mediacentre/factsheets/fs310/en/index.html>> [accessed 5 Sep 2012]

⁸ Yusuf S. *et al.* 2004. 'Effect of potentially modifiable risk factors associated with myocardial infarction in 52 countries (the INTERHEART study): case-control study', *Lancet*, 364(9438): 937-52

⁹ National Stroke Association, 'Stroke Prevention' <http://www.stroke.org/site/PageServer?pagename=prevent> [accessed 5 Sep 2012]

¹⁰ American Lung Association, COPD Fact Sheet, Feb 2011 <http://www.lung.org/lung-disease/copd/resources/facts-figures/COPD-Fact-Sheet.html> [accessed 5 Sep 2012]

¹¹ UN Water, http://www.unwater.org/statistics_san.html [accessed 5 Sep 2012]

¹² UK figure Cancer Research UK, <http://www.cancerresearchuk.org/cancer-info/cancerstats/types/lung/smoking/lung-cancer-and-smoking-statistics> [accessed 5 Sep 2012]

¹³ Mozaffarian, Dariush *et al.* 2009. 'Lifestyle Risk Factors and New-Onset Diabetes Mellitus in Older Adults', *Archives of Internal Medicine*, 169(8): 798-807

- *Prematurity and low birth weight* – at least 75% preventable¹⁴
- *Birth* – asphyxia and trauma – significant reduction possible through improved care
- *Neonatal infections* – significant reduction possible through improved care
- *Alzheimer and other dementias* – currently cannot be cured
- *Colon and rectum cancers* – many preventable through dietary changes and weight loss
- *Hypertensive heart disease* – largely preventable through lifestyle changes and treating hypertension
- *Breast cancer* – rates can be decreased significantly by early diagnosis and treatment

Looking at the question slightly differently, we might ask what are the leading preventable risk factors that contribute to terminal disease? The following table summarises statistics from 2001 for the top ten factors:¹⁵

Cause	Number of deaths resulting (millions per year)	Percentage of all deaths
Hypertension	7.8	14.2%
Smoking tobacco	5.0	9.1%
High cholesterol	3.9	7.1%
Malnutrition	3.8	6.9%
Sexually transmitted diseases	3.0	5.5%
Poor diet	2.8	5.1%
Overweight and obesity	2.5	4.5%
Physical inactivity	2.0	3.6%
Alcohol	1.9	3.5%
Indoor air pollution from solid fuels	1.8	3.3%
Unsafe water and poor sanitation	1.6	2.9%
TOTAL	36.1	65.6%

The fact is that almost two thirds of deaths are due just to these ten factors. We inflict much suffering on ourselves through our own bad choices and through our lack of provision of care to those who need it.

It is worth noting that many of these causes of death include lifestyle choices (e.g. smoking and COPD, ischaemic heart disease and lung cancer) and external factors (e.g. injuries and infections) that are not directly the result of weakness in the human body.

Sin as the Origin of Disease

Human sin is directly or indirectly the cause of human disease and death. This must be said, and read, carefully, as we might automatically ask why we or someone we love got sick as opposed to someone else. We know that sickness does not always correspond to sin and I will discuss the question of whether an individual's illness may be a direct result of their sin in the next section. Still, if we consider the effects of sin as described in Genesis from the Fall (when Adam and Eve sinned) onwards, we discover that sin led to every aspect of disease.

1. Ageing began

The process of aging appears to be genetically programmed. Although environmental factors (e.g., smoking) can hasten ageing and some people seem to age faster than others, everyone ages eventually, so that even

¹⁴ Guardian, '75% of deaths of premature babies are preventable, says report', <http://www.guardian.co.uk/society/2012/may/02/premature-baby-deaths-preventable-report> [accessed 5 Sep 2012]

¹⁵ Lopez, A.D. *et al.* 2006. 'Global and regional burden of disease and risk factors, 2001: systematic analysis of population health data', *Lancet*, 367(9524): 1747–57

if we do not succumb to any disease or trauma we will not live forever. Biblically it is not clear whether ageing began with the Fall or not. Genesis 3:19 speaks of the inevitability of death, but not specifically of ageing or an age limit to the life of man. It is possible that the early generations of human beings, who are recorded as living for 700-1000 years (Genesis 5), were not subject to ageing, but lived until a disease or traumatic event took their lives, or at least that the ageing process at that stage was much slower than today. Genesis 6:3 is generally understood to mean that God limited the lifespan of human beings to 120 years.¹⁶ We might speculate that it was at this point that God introduced the genetic factors that cause ageing, or that God accelerated the ageing process greatly at that time. After the Flood lifespans decreased dramatically each generation until around 120 years became the normal maximum (Genesis 11:10-32). By the time that Psalm 90 was written the expected lifespan of a man was 70 years, or possibly 80 years for a strong man. For most of human history this would have been a reasonable limit of age, and in fact, in the classical world through the Middle Ages and into the Modern era, the average lifespan of a man was much lower (around 28 years in ancient Rome, 33 years in Medieval Britain, 38 years by the end of the 19th Century). It was only during the twentieth century that lifespan began to rise again due to advances in nutrition, sanitation and medical care, so that today the predicted lifespan in Western countries exceeds 80 years. Interestingly, however, the maximum lifespan seems to be exactly what Genesis said – around 120 years. The oldest person on record in modern times was French woman Jeanne Calment, who died in 1997 at the age of 122. Despite all the advances in medical science, the process of ageing means that we are programmed to decay and die.

2. Some organisms began to cause disease in others

Before the Fall we may assume that there were no organisms that were pathogenic (disease-causing) for human beings. After the Fall, either because of a reduction in the human immune system or changes in the organisms themselves, some organisms became harmful to human beings. Parasites, bacteria and viruses are now major causes of death and it is only the advent of antibiotics and other drugs from the middle of the twentieth century onwards together with advances in sanitation that enabled such diseases to be prevented and treated so that they are no longer leading causes of death in developed countries.

3. Copying of genetic material became prone to errors

Before the Fall we may assume that the process of replication of DNA was fool proof and that it was only after the Fall that this process became prone to errors which introduced mutations. A mutation is where the sequence of DNA is changed (like typos in a document). This may have arisen because of the impact of environmental factors or a reduction in the potential of the mechanism of DNA copying to correct errors or a combination of the two. Some of these mutations can be inherited while others happen in our own bodies and contribute to disease for us but are not passed on to future generations. Some mutations cause such significant changes that they are capable of causing disease on their own. In other cases we need to inherit two bad copies of a gene or to inherit one bad copy and then have other mutations in our own body that cause disease. In some cases, especially in the cause of cancer, a whole series of mutations have to occur for the disease to result. Some mutations do not cause disease on their own but combine with other genes and environmental factors to contribute to causing disease or to make the individual more prone to disease (these are called multifactorial diseases, meaning that many factors are involved in causing them). Differences in our genes explain why some people are capable of living for longer than other people who have the same environment – they simply have less damaged genes (it is the reason why some people can smoke all their lives and live to an old age while the majority succumb to heart or lung disease).

4. Our bodies natural defence mechanisms became faulty

Some diseases are known as autoimmune diseases. These include some cases of diabetes mellitus, many thyroid diseases (either overactive or underactive) and some well-known problems affecting our joints (such as rheumatoid arthritis) as well as many less well known problems. Autoimmune disease arises when our

¹⁶ There is an alternative view that the 120 years means the period of time God would wait until sending the Flood, but the context, coming after the remarkably long lifespans of Genesis 5, suggests that it is the length of life of human beings that is in mind.

body's immune system begins to attack our own cells. Often this is because it over-reacts to a genuine threat – a disease causing organism or other foreign body. Some people inherit a tendency towards autoimmunity which is then triggered at some point causing disease. Failure of our natural defences is also a major element in the origin of cancer. Many cells that develop mutations that could lead to cancer are never able to multiply to a point where they become problematic for us because our body's natural defence mechanisms recognise that something has gone wrong and kill the cells off. Cancer requires mutations that cause cells to behave abnormally and mutations that prevent our body from recognising and eliminating the problem.

5. Violence began

Before the Fall there was no violence, but in the very first generation after the Fall one brother (Cain) killed another (Abel). Statistics from 1990 suggest that 3.7% of deaths are related to violence.¹⁷ Of these 42% are due to suicide, 30% due to homicide and 27% due to war. Without the effect of sin self-inflicted violence would not occur – the root emotional problems and actions of others that contribute to this problem would not exist. Likewise, people would not kill one another and nations would not go to war.

6. Human population growth and competition for resources began

When the human population was very small there was no competition for space on earth and therefore no problems due to over-crowding. As the population grew, the challenge of feeding and housing larger numbers of people began to create greater pressures on human governments. In our alienation from God we became fundamentally greedy and selfish, with the result that some people became rich whilst others were oppressed and remained poor. To our shame we still see this effect in our modern world, with life expectancy varying between social classes and even more dramatically between rich and poor nations (the highest life expectancy in the world is in Hong Kong, Japan and San Marino (83 years) and the lowest is in Lesotho and Sierra Leone (47 years). This difference has nothing to do with genetic differences between ethnic groups and everything to do with poor government, lack of sharing between nations and lack of concerted efforts to educate people, reduce disease and improve medical treatment.

So, sin is the root cause of all illness and suffering in the world, whether indirectly through its effect on our genes and on other organisms that are now disease causing, or directly through violence and greed.

Is Illness God's Judgement for Personal Sin?

On the basis of biblical examples, we must accept that in some cases people may suffer as a direct result of God's judgement on them for a particular sin. In Scripture we see specific examples of God judging individuals through illness (e.g. Moses in Exodus 4:24, Miriam in Numbers 12:10, Uzziah in 2 Chronicles 26:16–21, Jeroboam in 2 Chronicles 13:20, Gehazi in 2 Kings 5:25–27, Ananias and Sapphira in Acts 5:5, 10, Herod in Acts 12:21–23 and Elymas Acts 13:11). Within the nation of Israel there are also indications in the Old Testament that judgement may be passed on to successive generations of a family because of the sin of one person (Exodus 20:5, 34:7, Numbers 14:18, Deuteronomy 5:9). In John 5:14 Christ seems to imply that a man's paralysis resulted from sin, although lack of greater detail about his case makes this inconclusive. Scripture also contains warnings about the risk of bringing God's judgement in terms of disease or even death if individuals or groups sin (for example 1 Corinthians 11:30 where Paul warns that some believers are sick and some have even died because of their sin against the body of Christ). To deny the possibility of God judging through illness would be to neglect the evidence of Scripture.

At the same time, Scripture also provides very clear evidence that not all suffering is a direct result of the afflicted individual's sin. Job is the most obvious example, but we may also point to numerous examples of godly people who nonetheless became ill and died. We might also note that the cases in Scripture where illness was a

¹⁷ http://www.cdc.gov/ncipc/pub-res/epi_of_violence.htm [accessed 6 Sep 2012]. The rate will, of course, vary depending on world circumstances.

judgement from God were all related to people who were significant in the story of Scripture at that point. They were prophets and their close associates (Moses, Miriam, Gehazi), kings (Uzziah, Jeroboam, Herod) or people who were obstructing God's unfolding purpose at key moments (Ananias and Sapphira, Elymas). In other words these seem to be rare cases where something important was at stake, causing God to intervene directly. In fact, disease and death are inevitable for all of us – they are unavoidable aspects of life in a fallen world. So, then, in practice it is seldom easy to tell whether an individual's physical illness is a direct result of their own sin and it is dangerous for anyone to proclaim with certainty that this is the case. Most cases of physical illness are not directly due to an individual's sin but are the result of bad lifestyle choices, the actions of another person, or just the general reality of living in a world tainted by sin. Even where it is suspected that the illness is a direct judgement from God we have the responsibility to respond in compassion and to seek to bring healing, which will be at all levels of the person's being.

Death – an enemy yet a blessing

Our view of death is well summed up in Paul's word in 1 Corinthians 15:26 – it is an enemy. The thought of death fills us with great fear – indeed without Christ we would live our lives in slavery to that fear (Hebrews 2:15). Death was not God's original intention for mankind – it entered the world because of sin (Romans 5:12). Yet in a sense death is a blessing. If we look carefully at Genesis 3, we see that the reason why God excluded Adam and Eve from the Garden was to prevent them from eating from the tree of life and so living forever (22-24). The implication seems to be that human beings never had the potential to live forever intrinsically but that Adam and Eve were free to eat the fruit of the tree of life (remember it was only the tree of knowledge whose fruit was forbidden) and so live eternally. This fruit sustained their lives. God's decision to exclude them from the Garden was a judgement because of their sin, but it was also an act of mercy. The idea of sinful human beings living eternally in rebellion against God is too horrific to contemplate. By imposing a limited lifespan on human beings, God ensured that our potential to destroy would not be limitless and forces us to face the fact of ultimately giving account to Him. We die once, after which we will face God's judgement (Hebrews 9:27). The realisation of our future death should cause us to think about what lies beyond the grave, to assess the value of the life we live and to return to the God who made us.

Death is an enemy, but we can also thank God that we will not live forever in the bodies we now have, which are subject to disease and decay or with the broken personalities we now have. Death allows God to transform us. The resurrection body will be in continuity in some sense with our current body, but it will also be radically new, free from sin's effects (1 Corinthians 15:35ff.). Death is an enemy – even with faith in Christ we still see death as a great enemy, the separator of loved ones and robber of life, and we may fear the process of dying the pain that often attends it – but it is ultimately a defeated enemy. We can shout, "Where, O death, is your victory? Where, O death, is your sting" (1 Corinthians 15:55) because we have victory over death through the death and resurrection of our Lord Jesus Christ. We will mourn those we love who have died in Christ, but not in the same way that the world mourns because we have hope in Christ (1 Thessalonians 4:13ff.). We do grieve because of the pain of loss, the anger at this unnatural robbing of life and the loneliness of separation, but we have confidence that we will see our loved one again when Christ returns.

Holistic Health – body, soul and spirit

The discovery of holistic health in modern medicine

In the Western world we tend to think of health and healing in terms of physical and mental illness only. In fact, even the recognition that mental health is equally as important as physical health is a relatively new discovery for Western medicine and one that is still not fully appreciated. In our society we are generally very sympathetic when someone suffers from a physical illness ('I broke my arm' or 'I have a tumour in my bowel') but we struggle to understand mental illness ('I can't see a point in life' or 'Reality is disintegrating'), despite the fact that mental ill health is an increasingly frequent problem in our fast-paced, pressurised society in which people lack any deep sense of rooted identity outside their own achievements and choices. The idea that social factors should also be taken into account in thinking about health is an even more recent admission. In 1946 the World Health Organisation defined health as follows:

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.¹⁸

This definition helpfully expands the idea of health beyond merely the physical to include the dimensions of life (mental and social) that we might describe as belonging to the soul (see the earlier discussion about the nature of humanity). As might be expected, however, it does not include the idea of spiritual well-being which must be added to make a complete Christian definition of health. The roots of the English word 'health' help us to understand this further. It is derived from the Old English root *hal*, which is also the root of the words 'whole' and 'holiness' (also the antiquated word 'hale' as in the phrase 'hale and hearty'). To be healthy, then, is to have a life that is whole – lacking nothing and perfectly integrated together. We can speak about holistic health.

Holistic health in Scripture – salvation and *shalom*

This same idea of holistic health is also found in Scripture. On several occasions when Jesus healed people, He spoke about their faith having made them "whole" (Matthew 9:22; Mark 5:34; 10:52; Luke 8:48; 17:19; 18:42 – translated "healed you" or "made you well" in the NIV). In each case the Greek word that is used is *sōzō*, which appears a total of 54 times in the gospels in relation to the work of Christ, whether physical healing (as in these cases), rescue from demonic influence, or spiritual salvation. The conclusion must be that Christ's saving work is about holistic salvation – restoring true health by dealing with the root problem of sin and all of its effects including physical sickness and death. Christ was a holistic healer who was concerned with holistic health (see below).

In the Old Testament the concept of health is tied up in the Hebrew word *shalom*, which is generally translated 'peace' but whose meaning is much richer than our usual meaning of that word in English. In fact, the idea of *shalom* almost certainly underpins the saving and healing work of Jesus. Eugene Peterson writes:

Shalom, "peace," is one of the richest words in the Bible. You can no more define it by looking it up in the dictionary than you can define a person by his or her social security number. It gathers all aspects of wholeness that result from God's will being completed in us. It is the work of God that, when complete, releases streams of living water in us and pulsates with eternal life. Every time Jesus healed, forgave or called someone, we have a demonstration of *shalom*.¹⁹

Shalom is much more than the absence of strife and conflict – it is the presence of wholeness and confidence. Shalom comes to the individual through good relationships, firstly with God and then with others in community

¹⁸ World Health Organisation, <http://www.who.int/about/definition/en/print.html> [accessed 31 Aug 2012]

¹⁹ Peterson, Eugene H. 2000. *A Long Obedience in the Same Direction: Discipleship in an Instant Society*, 2nd edn. (Grand Rapids: IVP), p.56-57.

and affects the whole person – body, soul and spirit. It includes the ideas of contentment, well-being and pleasure. Cornelius Platinga defines *shalom* as follows:

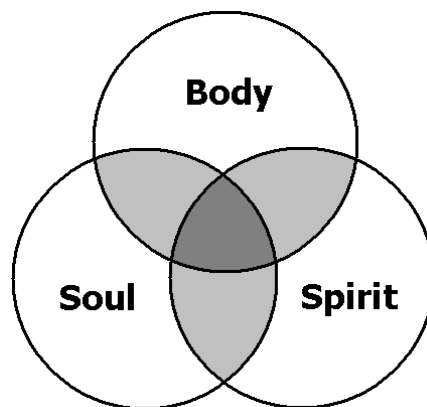
The webbing together of God, humans, and all creation in justice, fulfillment, and delight is what the Old Testament prophets called *shalom*. We call it peace, but it means far more than mere peace of mind or cease-fire among enemies. In the Bible *shalom* means *universal flourishing, wholeness, and delight*—a rich state of affairs that inspires joyful wonder as its Creator and Savior opens doors and welcomes the creatures in whom he delights.²⁰

In Biblical terms, therefore, healing includes the restoration of a good relationship with God and social harmony as well as physical health. In fact, for us to experience true health requires not only our own individual healing but the restoration of the entire creation into harmony with God. This is the true scope of Christ's saving work (see Ephesians 1:10; Colossians 1:19-20).

This concept of *shalom* pervades Hebrew thought. The standard greeting in Hebrew is *Shalom aleichem* (שָׁלוֹם אֵלֵיכֶם), translated 'peace to you'. This is the phrase that lies behind Jesus' greeting, "Peace be with you" (e.g., Luke 24:36; John 20:21). *Shalom* is not simply a noun in Hebrew, it can also function as a verb meaning to make amends, to put right or to restore. To speak of *shalom*, then, is not simply to desire it but to commit ourselves to working towards it. To wish *shalom* upon another is not simply to wish them well but to determine to act towards them in a way that enhances their well-being and promotes their health. Various other Hebrew words include the word *shalom* and help to emphasise the idea that *shalom* must be won or paid for. *Hishtalem* means 'it was worth it', *Shulam* means 'it was paid for' and *Meshulam* means 'paid in advance.' Within the meaning of *shalom*, then, is the idea that sacrifice and payment are necessary to maintain peace. We may also detect hints in advance of the fact that Christ had to die to make peace through His cross (Colossians 1:20).

Three dimensions in every illness

It is not pushing the point too far to say that any instance of illness will have physical, psychiatric, social and spiritual dimensions. In each instance the relative importance of these factors will vary – some illnesses will be primarily physical, others primarily spiritual etc. – and it is often difficult to determine which factors are causative and which are the results. The Bible reflects this degree of involvement of different factors, for example in Matthew 15:22 where we read of a girl who was (literally) 'severely demonised' (*kakōs daimonizetai*). The diagram below attempts to capture this concept graphically.



This diagram is not intended as a conclusive depiction of the nature of human beings (see the earlier discussion in this paper about the nature of humanity) but it can provide a helpful way to think about the inter-relationship of body, soul and spirit health. In the diagram there are some areas that consist of only body, spirit or soul – these represent problems that fall entirely within one of these spheres. The light shaded areas are a combination of two of these aspects of life, and the dark shaded area affects all three. I believe that the majority of illnesses we face end up in the dark shaded area, although they may originate in one of the separate

²⁰ Cornelius Platinga, <http://www.calvin.edu/about/shalom.html> [accessed 31 Aug 2012]

white areas. There is always a tendency for problems to gravitate to the centre to affect the whole person. For example:

- A person develops a physical disease (body affected) that then cuts them off from social support and leads them to feel depressed (body and soul affected), which eventually leads to them feeling far from God (body, soul and spirit affected).
- A person sins and does not repent (spirit affected) with the result that a relationship with the person they sinned against is damaged (spirit and soul affected) and the combination of guilt for the sin and the damaged relationship causes them to feel nauseous (spirit, soul and body affected)
- A person experiences bereavement of a person they loved (soul affected) which leads them to doubt their faith in God (soul and spirit affected) and to be unable to sleep (soul, spirit and body affected)

There are countless examples of how these three inter-play with each other, but these examples should serve to show that the tendency is for a problem in one aspect of our being to affect the other aspects sooner or later.

Practical Advice – maintaining good health

How, then, can a Christian maintain good holistic health? One Christian doctor, Dr Deidre Little, has said that:

I think the best biblical definition of health is threefold. Spiritually it is to be holy even as the Lord God is holy. Emotionally, to not let the sun go down on your anger and physically to remember that your body is the temple of the Holy Spirit and that though we fall, yet we will arise.

In this section I will try to give some wise advice for how to maintain good health in the body, soul and spirit.

BODY HEALTH

“Do you not know that your body is a temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honour God with your body.”
(1 Corinthians 6:19-20)

- **Sexual health** – this is the immediate context of the verses above. This is another good example of how something physical also has implications for the soul! Our current society has tried to divorce the physical act of sex from its emotional and spiritual significance, but as Christians we know that we cannot separate these three aspects. Sexual health is a vital aspect of holistic health and it is not just defined as the avoidance of sexually transmitted infections – it also includes having a healthy relationship with the sexual partner, which is defined biblically as a lifelong marriage commitment between a man and a woman.
- **What you take in** – this includes food, air and drugs. We must be careful about what we eat, and especially that we have a healthy nutritionally balanced diet. The realisation that our bodies are the temple of the Holy Spirit is also one of the key reasons why Christians ought to avoid drunkenness, chronic alcohol misuse, smoking and use of harmful drugs. We don’t avoid these things out of a legalistic sense but because we recognise that they are never beneficial to our bodies and that our bodies are not ours to do with as we will.
- **How you use it** – of course this is a broad subject, but I want to mention particularly two areas:
 - *Exercise* – our modern sedentary lifestyle is not healthy. Exercise is best combined with social interaction, in which case it helps soul health as well as physical. It also has benefits to our mental health, increasing confidence levels,
 - *Sleep* – many people today have highly unhealthy sleep patterns, whether because of over work or ‘over play’! We need good quality sleep to function well in every aspect of life. Sleep is a gift from God (Psalm 127:2), and one that we should not mess around so much with. Many people function at less than full power because they are not sleeping enough or at sensible times.

REMEMBER: Physical symptoms (e.g., stomach pains or breathing problems) can signify a problem that lies primarily with the soul (e.g., insecurity) or spirit (e.g., unconfessed sin).

SOUL HEALTH

“A cheerful heart is good medicine, but a broken spirit saps a person’s strength.”
(Proverbs 17:22, NLT)

- **Sabbath rest** – the principle of Sabbath rest is foundational in the Bible. God instituted this principle in the creation week and it is woven into the order of creation. We need to take appropriate rests from our normal work. If we fail to take at least one day off in the week then we are violating this principle. This rest is not merely rest away from work but rest unto the Lord and, therefore, this has spiritual implications too – lack of Sabbath rest harms our relationship with God and positive practice of Sabbath can help to restore it. Workaholism is never commended in Scripture and is not a virtue. We must make sure that we prioritise rest and that those who are employers foster this attitude in their employees.
- **A cheerful heart** – the attitude of our heart is a major factor in determining the health of our soul. Our attitude should be one of thankfulness. Whenever a person develops a critical spirit that focuses on the negative rather than rejoicing in God’s blessings it spells disaster for their health. Too many Christians have a wrong attitude. God does not want us to focus on the problems of life or the faults of others, but on His goodness and the potential in others. Having a right perspective will transform our soul health.
- **Fellowship** – Meaningful, accountable relationships are also vital to good soul health. It is extremely dangerous for a Christian to remove himself from fellowship with God’s people. We must seek out opportunities to be accountable to others so that they can help to keep us right. We all need the encouragement and the spurring on that others bring us if we are to continue with a healthy soul (see Hebrews 10:24-25). These relationships will also be a major source of security to us and of comfort when we face difficulties.

REMEMBER: Soul symptoms (e.g., depression or anxiety) can signify a problem that lies primarily with the body (e.g., thyroid problems) or spirit (e.g., lack of forgiveness).

SPIRITUAL HEALTH

“if we walk in the light, as He is in the light, we have fellowship with one another, and the blood of Jesus, His Son, purifies us from all sin” (1 John 1:7)

- **Forgiveness** – the principle of forgiveness is vital to maintaining spiritual health. If we do not forgive others God will not forgive us (e.g., Matthew 6:14-15). We cannot separate forgiveness of others from our relationship with God. Many Christians feel far from God or spiritually cold because they have never fully forgiven a fellow Christian who has sinned against them.
- **Repentance** – unconfessed sin in our lives is a major barrier to intimacy with God. I John 1: 8-9 teaches that Christians need to continue to confess their sins to God, in the assurance that Christ is faithful and just to forgive their sins and to continue to cleanse them. We must also confess sins to others against whom we have sinned if we are to have good spiritual health.
- **Communion with God** – we cannot neglect the importance of prayer, solitude with God and Bible reading for our spiritual health. God is the giver of life, and the sustainer of life. If we are to draw deeply on the richness of life He offers us then we must not neglect our relationship with Him. Our aim should be to live in constant communion with our Father – always in prayer, always listening to Him, constantly meditating on His word. This must also be supplemented with prolonged times of retreat in silence and solitude before Him.

REMEMBER: Spiritual symptoms (e.g. feeling far from God or doubts) can signify a problem that lies primarily with the body (e.g. exhaustion) or soul (e.g. a critical spirit).

Towards a theology of healing

God, the Source of All Healing

In light of the earlier discussion in this paper about the activity of God in His creation we can recognise that God brings healing to us through three means, all of which are good gifts from Him:

- **Natural healing** – the body's own ability to fight disease and heal itself based on good nutrition. This includes cases of spontaneous regression of medically incurable diseases.
- **Medical healing** – the skills of medical professionals to use the resources of God's world to bring healing to the body and mind. This comes from God indirectly in that he created mankind with the ability to learn and to use resources in the world to create drugs and instruments for medical use.
- **Miraculous healing** – spectacular divine intervention that is beyond the normal rules of nature. This healing is usually complete, instantaneous and permanent (as in the case of Christ's healing miracles). In Scripture miraculous healings always had a theological purpose – to show God's power or to testify to the identity of the agent of healing as the servant and spokesperson of God.

Since all three of these are good gifts from God, it is appropriate for Christians to seek medical help with illness as well as praying for God's healing. Yahweh is the one who heals His people (Exodus 15:26), although the means He uses may vary. In the Bible only God, the life-giver, is seen as the source of healing, and in the New Testament Christ is a healer, one of the great proofs of His deity. His healing was different from others because He did not ask God to heal through Him or proclaim healing in God's name – He assumed His own authority to heal directly. Other people who are agents of healing heal in God's power or in the name of the exalted Lord Jesus (see Acts 3:1–10, 9:34, 16:16–18). God should be acknowledged and thanked for every instance of healing, whether or not the means was 'miraculous'. Unfortunately, historically Christians have tended to separate spiritual healing from the concept of medical healing. Although the Church was at the forefront of founding hospitals and, in more recent years, Christians have been very active in the healthcare professions and medical missions, Christians have often accepted the false dichotomy that stemmed from Greek dualism. In some cases this has led Christians to neglect the importance of medical treatments, seeking only direct miraculous healing. Using medicine does not imply a lack of faith in God – so long as the person is still trusting in Him as the ultimate source of healing. In other cases it has meant that Christians have placed such confidence in modern medicine to treat their illness that they have failed to thank God as the one who have it and to pray for His miraculous intervention. Some Christians in healthcare have failed to integrate their faith and medical practice as well. They work hard for their patients but never pray for them or offer to pray with them. They do not stand as firmly for the importance of spiritual care in holistic health as they perhaps ought to.

Three Theological Views on Miraculous Healing

There are three main theological perspectives on our expectations of miraculous healing:

- **Cessationism** – this view sees miracles as confined largely or entirely to God's action in specific periods of salvation history. It recognises correctly there are three forty year periods in Scripture (Moses and Joshua, Elijah and Elisha, Jesus and the apostles) when miracles are frequent but that in the lengthy periods in between they are exceptional. There is some evidence that gifts of healing (and other miraculous gifts) disappeared from the church after the apostolic age, and later references, to quote BB Warfield (1851-1921), demonstrate "an infusion of heathen modes of thought into the church." Cessationists sometimes suggest that "perfection" in 1 Corinthians 13:8-10 refers to the completion of the New Testament. They claim this as Scriptural support for the concept of certain spiritual gifts disappearing from the Church after the apostolic age.

- **Triumphalism** – this view claims that healing is the birthright of every Christian on the basis of Christ's atonement. Those who hold this view argue for an expectation of healing from passages such as Psalm 103:3, Isaiah 53:4-5, Matthew 8:16-17 and 1 Peter 2:24. In the extreme form of triumphalism, only a lack of personal faith limits God's blessing. This view of healing is often associated with individuals who are recognised as gifted healers or anointed channels of God's healing.
- **Inaugurated eschatology** – this view seeks to hold the theologies of suffering and healing together through emphasising the 'now but not yet' nature of the Kingdom of God. Those who hold this view argue that God's Kingdom broke into our world in the person and ministry of Christ (see Luke 4:18–19, Matthew 8:14–17), but that it is not yet revealed in its fullness. Healing (whether natural, medical or miraculous) is an act of God and a foretaste of the final consummation of the Kingdom when Christ's victory over sin and all of its results is complete with the resurrection of the body (Romans 8:18-25). In this view healing is possible in this age, but is not guaranteed and cannot be claimed by every Christian in every situation. This view fits with Paul's use of the plural, "gifts of healings", in 1 Corinthians 12:9, 30, which may suggest that each occasion of healing is a separate gift of God's grace and that no individual permanently possesses the power to heal.

Although the cessationist view correctly identifies the pattern of frequency of divine healing throughout redemptive history, it minimises the fact that miracles **do** happen between the three forty year intense periods of miraculous activity. The idea that 1 Corinthians 13:10 refers to the completion of the canon is discredited by the vast majority of commentators, who explain that "perfection" means the return of Christ. Cessationists are also in danger of limiting God's freedom to act in His world as He chooses. Although a study of the miraculous in church history raises much concern since some accounts are clearly exaggerated or based on very little evidence, it nonetheless appears that there have been periods of history when God has used miraculous healing with greater frequency as signs of His action, especially in cultures where these miracles are more likely to demonstrate His power and function as signs of His rule. We cannot insist that God cannot or demand that He will not heal miraculously today.

On the other hand, triumphalism is fraught with major problems. It simply does not reflect the complex way that Scripture speaks of suffering (discussed below) and healing. What of the example of Paul who was not healed or of righteous Job suffering despite his faith? It also jars with our personal experience, in which even faithful, godly believers suffer and die. Even those people healed by the Lord Himself became ill again subsequently and died – not one of them remains alive today. Surely the apostles were people of great faith, yet they too died. In addition, although some churches, groups and individuals claim to have been involved in miraculous healings, it is notoriously difficult to find good documentation from independent investigators of true healings. Even leaving aside the clear manipulation for financial gain that some 'faith healers' engage in, it does appear that many claimed 'healings' are actually instances where people are freed from psychosomatic pain or debilitation or where they have a minor improvement in symptoms that is no different from the effect we might expect from a placebo. It is very rare to hear reports of healings of the same kind as those that Christ and His apostles were involved in – instant, complete and lasting healings – and even where such miracles are claimed there is little substantiating evidence. Some people might question my desire to see investigations and evidence proving that genuine miracles have occurred. Is this in conflict with faith? Certainly not. Scripture is nowhere opposed to the careful investigation of the facts and nowhere commands us to blindly believe everything we hear. In fact, we are urged to be discerning. When we hear a report of a miracle it is actually vital to ask two questions. Firstly, is it genuine? To spread word of a false miracle only serves to discredit our message and dishonour Christ. Secondly, is it from God? We must remember that not every spirit comes from God – we must test by the message the person proclaims, whether it centres on, glorifies and draws people to Christ the Lord (1 John 4:1-3) and by the fruit their life produces, whether it is godly character and good works (Matthew 7:15-20). The triumphalist tendency to focus on a few individuals as gifted or anointed healers is also worrying, both because of the amount of attention focussed on these individuals and also because of the lack of Biblical warrant for it. It is better to see the prayer for the sick as a role of the elders of the local church of which the ill believer is a member (as per James 5:13-16).

We must reject the extremes of cessationism and triumphalism. We should not be troubled if we do not see a large number of verifiable miraculous healings today in every place. All healing is a gift from God and He should be thanked equally for spontaneous regressions of disease and for healing through medical means. Furthermore, we should be slow to claim miraculous healing where this has not been verified. Doing this only opens us to the criticism of fabricating stories to defend our faith. Those who claim to have witnessed miraculous healing should not be afraid to have this tested and proved using scientific means. The Old Testament requirement for the priests to verify that a person was cured of skin disorders is a precedent for this process of testing (see Leviticus chapter 13). We do not gain anything by claiming miraculous healings that have not been tested, and in fact we risk damaging the reputation of the faith if we are careless in this regard.

Christ the Holistic Healer

When Christ healed individuals the healing was always complete (with one recorded exception in Mark 8:22-26 where a two-stage healing of a blind man has a figurative significance in the disciples' unfolding understanding of the identity and mission of Christ), instantaneous and permanent (people did not relapse in the immediate period after the healing). Examples of Christ's holistic healing of individuals are numerous:

- *Leprosy* – it is likely that people described in the Bible as suffering from leprosy rarely if ever had true leprosy (Hansen's disease caused by infection with *Mycobacterium leprae*), and the term could refer to a number of skin diseases. However, these skin conditions brought with them social alienation from the community of God's people and a ritual uncleanness that barred the individual from full worship of God. When Christ healed lepers He restored them not only physically, but also socially and spiritually. In Luke 17:11-19, ten lepers were *cleansed* (*katharizō*) by Jesus (v14). The emphasis in this word is on the ritual cleansing that allowed them to be accepted again into society, although physical healing must have occurred to allow this to happen. Only the one who was grateful is described as being *cured* (*iaomai*, v15), which obviously has a deeper sense of healing of the soul. This man was also told that his faith had saved him (*sōzō*, v19), which, although it can refer simply to being "made well", in this case almost certainly refers to his spiritual state. In other words, all ten men experienced physical and social healing, but only the one who returned experienced emotional and spiritual healing.
- *Exorcism of demons* – demon possession (in actual fact the Greek phrase would be better translated "demonisation") in the Gospels was responsible for a range of physical (e.g., dumbness in Matthew 9:32, blindness in Matthew 9:32 and epilepsy in Luke 9:37-43) and psychiatric symptoms (see Mark 5:1-20). Essentially, a person who is demonised may have their personality so influenced by a demon that they are no longer in full control of their actions (although there is no reason to believe that the demon's effect was so extensive in every Biblical case). It is important to note that the New Testament does distinguish between diseases, including epilepsy, which were not directly caused by demonisation and cases where demonisation expressed itself in the symptoms of a recognisable disease (see Matthew 4:24 and Acts 5:16). It is not correct to say that the people of New Testament times were mistakenly confusing disease with demonisation as the Gospels make a distinction and it was Christ Himself who determined those cases where people were demonised and He could hardly have been mistaken. A prime example of the broad ranging effects of demonisation is seen in the Gerasene demoniac in Luke 8:26-39. He was affected physically, mentally and socially. When Christ exorcised the demons that had possessed this man he was restored in each of these dimensions of life. There is no reason to assume that people cannot be demonised today, although it may be less common in the modern Western world than during Christ's earthly ministry (some people suggest that cases may be more common in Eastern countries where people are arguably more susceptible to influence from demons), but even where it does exist the Holy Spirit has the power to overcome this possession and cast the demon(s) out, and He is capable of working through God's people to accomplish this.

- *The woman with a haemorrhage* (Mark 5:25-34) – Christ healed this woman’s physical problem, with the result that she was also restored socially (the haemorrhage made her ritually unclean), but by speaking directly to her He also restored her emotionally (her sense of self-worth and value was renewed).
- *The paralysed man brought by his friends* (Mark 2:1-12) – Christ saw that this man’s greatest need was not his physical disability but his spiritual need of forgiveness for sins. In this encounter Christ first forgave sins and then, to prove visibly that His power to forgive sins was real, healed the man physically.

The Aim of Christian Healing – not always prolonging life

One problem with the recent increase in life expectancy is that many people are living longer but with a lower quality of life. Generally speaking many of the added years of life are years of chronic ill health. It seems that many health care providers focus on keeping patients alive rather than ensuring that their health is maximised in the broadest sense of the word. From a Christian perspective, death is ultimately a defeated enemy and is not the final chapter (see our earlier discussion of death), and therefore the ultimate aim is not prolonged life but fulfilled life. The responsibility of the Christian healthcare professional is not merely to keep her patients alive as long as possible, but also to help them prepare for a good death. It is not helpful when health care professionals act as if death is not inevitable or help to foster the illusion that modern medicine can, or at least will eventually, bring healing from every disease. The sure hope of the resurrection of the body and confidence in the triumph of Christ over the “last enemy”, death, transforms the Christians approach to the end of life. We can face it with confidence if our hope is in Christ alone.

A Word to Christians in Healthcare

Many Christians fulfil their vocation to serve God through entering into various professions within healthcare, following in the footsteps of Luke, the “beloved physician” (Colossians 4:14, KJV). Being a Christian in healthcare means that you will have a different approach to healing than your non-Christian colleagues, primarily because you have a different understanding of what health is. There are three main aspects of practice that will be enhanced by your Christian faith:

1. Christian healthcare professionals will seek to minister to their patients holistically

The Christian is armed with scientific knowledge **and** with prayer. She will pray for her patients at work and out of work. She will seek opportunities to share biblical wisdom with her patients, and, where requested (or if offered, where accepted) she will even pray aloud with her patients. She will include questions about spiritual health in her history taking (e.g., “Do you have a faith that helps you at a time like this”) and will be honest with her patients about her own perspective without forcing anything on anyone else. Her aims in treating the patient will be total health and quality of life, not merely prolongation of physical life.

2. Christian healthcare professionals will follow biblical ethical standards

The Christian will be motivated by a firm belief in the sanctity of human life, and will avoid compromising his ethical beliefs as well as influencing his profession towards biblical ethics.

3. Christian healthcare professionals will approach their patients with compassion

In this Christians follow the example of Christ, the Great Physician. This should be the single greatest thing that sets the Christian apart from her peers. Where they become critical of working conditions she will give thanks to God for the privilege of caring. Where they fail to respect other members of the multi-disciplinary team she will be humble and see herself as a servant. Where they draw limits on the emotional investment they make, she will love her patients with the love God has poured into her heart.

A Christian view of suffering

When God does not heal

Although the focus of this study is on health rather than suffering, it is worth taking a moment to comment on a Christian perspective on suffering. The reality is that God, in His wisdom, does not always heal His people. This should not surprise us as there are many Biblical examples of people of faith who were not healed from illness. In the epistles, for example, we do not read of any examples of miraculous healings, but we do read of four believers and servants of God who were not healed in the usual sense of the immediate removal of the illness (Paul in 2 Corinthians 12:7-9, Epaphroditus in Philippians 2:25-27, Timothy in 1 Timothy 5:23 and Trophimus in 2 Timothy 4:20). It is a mistake to take passages like Psalm 103:3 and Isaiah 53:4-5 to refer only to the present age. Clearly, healing (or restoration to wholeness) can never be complete in this present age. It is when Christ returns and our bodies are redeemed (Romans 8:23) that healing will be complete. The resurrection body will be incorruptible (1 Corinthians 15:52-53). In the New creation there will be “no more death or mourning or crying or pain, for the old order of things has passed away” (Revelation 21:4) and “no longer will there be any curse” (Revelation 22:3). God’s project of redemption – restoring fallen man – will be complete, and only on the basis of the Lamb’s atoning sacrifice. Ultimately, as Isaiah 53:3-5 shows, it is through the cross that all healing is possible. The Biblical theology of suffering finds its most profound depth in that moment when God in Christ entered into our suffering and bore the full consequences of our sin in His body on the tree (1 Peter 2:24). Through that sacrificial offering of Himself the entire Fallen universe can be reconciled to God (2 Corinthians 5:19).

Our attitude to suffering

How, then, can Christians approach suffering as we patiently wait for the return of Christ? Three passages will be helpful for us in thinking this through:

1. John chapter 9 – Suffering is an opportunity for God to be glorified

The belief that all illness was the result of a specific sin committed either by the individual or by his or her parents or grandparents had become common amongst Jewish thinkers by the time of Christ, but Jesus spoke out against this view. In John 9 He healed a man born blind. The disciples had assumed (v2) that this disability was the result of either the man’s sin or the sins of his parents, but Christ clearly said that neither was the cause (v3). Christ’s response is interesting, because He brought a new perspective on suffering – that all instances of suffering are opportunities for God’s work to be displayed in the life of the person suffering. This is an important Biblical principle. In suffering God can be glorified either through healing the individual or through providing grace for them to stand up under the suffering. This is the great truth that lies behind the Old Testament story of Job. Job suffered terribly and we know that it was not because of any fault of His. Instead, behind Job’s experience was a cosmic drama with Satan seeking to prove that God was not worth trusting in the absence of tangible blessings while God allowed Job’s suffering to show that human beings are capable of trusting Him even through the worst of suffering. In the midst of His suffering Job spoke some of the greatest Old Testament statements of faith in God. God even spoke directly to Job (although His answer to Job’s questions was not what we might have expected) and restored him after his trial to a position of greater blessing than he had known before it.

2. Romans 5:3-5 – We can rejoice in suffering because we grow through it

Paul knew a great deal about suffering, yet he confidently claimed that we can rejoice in suffering. This does not mean that suffering will be enjoyable – Paul was not a masochist! What Paul is saying is that because God has justified us and we stand in grace (v1) we can have a new perspective on life’s suffering. In fact the word translated ‘rejoice’ is better translated ‘boast’. We do not find joy in suffering itself, but we boast through suffering about God’s faithfulness and love. We know that suffering leads to perseverance, and that produces Christ-like character in us. That character is a foretaste of how we will be when we are

glorified at His return. This reminds us of our hope – the hope of the glory of God (meaning the future when we will be made perfect, our healing complete)! Not only do we have that future hope, but right now we have the power of God's Holy Spirit at work in us so that we can face suffering confident in God's perfect love for us (v5). Our hope does not disappoint! This is why we can actually learn to have joy (deep contentment and satisfaction) even through sufferings. It is often through times of suffering that we learn most about our relationship with God and that we grow most into Christ-likeness.

3. 2 Corinthians 12:7-10 – God's grace is sufficient; His strength is made perfect in our weakness

The apostle Paul had a problem that caused him to suffer. We don't know the exact nature of his problem or whether his suffering was primarily in body, soul or spirit, but we do know that he asked God three times (v8 –the word is "pleaded", indicating a strong or desperate request) to remove this source of suffering (which he calls a "thorn in the flesh"). God did not heal him, and Paul tells us that this was to keep him dependent on God rather than becoming proud in himself (v7). God's reply to Paul is a great source of comfort for us. God will not leave us in any suffering without sufficient grace for us to bear it. When we are weak it is an opportunity for God's power to be seen. If I can continue to serve Him despite my weaknesses then it will be all the more clear to everyone that the glory belongs to Him. If you are suffering, depend on God's grace.

These examples show that at times God chooses not to heal so that His strength can be made perfect in our weakness, to shape our character or to draw us into deeper relationship with Him. These are important truths for us to grasp when life is going well. They may be difficult to grasp when we are in the midst of the most painful suffering and when we approach people pastorally we must be sensitive and slow to speak, quick to listen and constant in our presence with them. Nevertheless, by being firmly rooted in our confidence in God's faithfulness, love and purposes for us we can trust Him through every circumstance of life. When we suffer it is appropriate, like Paul, to ask God to heal us, but we must also accept that this will not always be His will for us. In our suffering we should:

- Remain confident of God's love for us and our future hope of sharing in His glory
- Depend on God's grace and the power of the Spirit in us
- Persevere in serving God, allowing His strength to be seen in us

For further study on the Christian view of suffering I recommend a study of I Peter (especially chapters 3 and 4), which was written to suffering Christians to encourage them to stand firm in the true faith. Peter's summary words towards the end of this letter are an appropriate ending to this brief consideration of a Christian perspective on suffering. Although these Christians were suffering more in terms of persecution than illness, Peter's challenge to resist Satan, to hold on to our faith, to depend on God's grace and power, and to remember our hope of future glory is relevant in suffering of any kind:

Be self-controlled and alert.

Our enemy, the devil, prowls around like a roaring lion looking for someone to devour.

Resist him, standing firm in the faith, because you know that your brothers throughout the world are undergoing the same kind of sufferings.

And the God of all grace, who called you to his eternal glory in Christ, after you have suffered a little while, will himself restore you and make you strong, firm and steadfast.

To him be the power for ever and ever.

Amen.

(1 Peter 5:8-11)

A practical pastoral approach to the ill

In pastoral practice it is often unhelpful to try to determine whether the exact cause of the problem lies in the body, soul or spirit and it is far more important to know how to address each of these dimensions. Even where the problem appears on first impressions to be entirely physical the pastoral carer will consider the soul and spirit, and where the problem appears initially to be purely spiritual the effects in the soul and body will also be considered. In approaching a person with illness the skilled elder or pastoral carer will employ all of the following in every case:

- **Prayer for and with the person**

It is always wise to pray for God's healing. It is generally helpful to lead the person in prayer, especially if they feel too weak to pray themselves. This prayer should be in faith that God is powerful to heal but that His will in the situation is best.

- **Rebuking of Satan and evil spirits**

Satan will undoubtedly seek to use this illness to weaken or destroy the faith of the suffering one or to 'demonise' an unbeliever to keep them from believing. We must not give the person who is suffering the idea that once the influence of evil spirits has been dealt with the problem will always go away immediately.

- **Biblical counselling**

Regarding unconfessed sin and the person's spiritual condition before God. The aim of this counselling should be repentance and deeper trust in God, and it is important to encourage dependence on Him rather than on the counsellor. It is biblical counselling because the focus is on bringing the authority of God's Word to play in the person's life. Many secular counselling theories emphasise listening, helping the individual to reach conclusions for themselves about what needs to be done and building self-confidence in the individual. The biblical counsellor will listen but will also share God's truth, encouraging the individual to trust in Him rather than in self.

- **Relational healing**

Addressing problems in relationships with loved ones that may be contributing to ill health.

- **Social support**

Offering support from the church in terms of visitation, a listening ear and practical help such as food if the person is ill and unable to cook.

- **Advising appropriate professional care**

From counsellors with experience in specific issues affecting the individual and medical professionals where there is a clear physical or mental dimension to the problem. Remember that it is not in any sense a failure of faith in God to recognise the part that healthcare professionals will play in helping the person – it is recognising that God heals in different ways.

Often as the elder or pastoral carer spends time with the person and in prayer the root cause of the problem will become more clear and this can be tackled directly, but in practice it is important to consider all aspects above and to address each area with sensitivity and compassion. James 5:13-16 tells those who are sick are told to call the elders to come and pray with them. This passage focuses particularly on people who are ill because of a spiritual problem of sin (again emphasising the interaction of body, soul and spirit in illness) but the advice contained in it for the ill person is relevant for all sick believers. The phrase translated "anoint him with oil" (*aleiphō*) means literally "massage him with oil" rather than specifically anointing (the standard Greek word for anointing is *chriō*) and normally carries the meaning of medical application of the oil. The suggestion is that the person should seek both spiritual and medical help. This principle is also seen elsewhere in Scripture (e.g., the fig poultice for Hezekiah's boil in Isaiah 38:21 and Paul's advice to Timothy to take wine for his stomach's sake in 1 Timothy 5:23). This remains an important guideline for believers who are ill today. It would be foolish for a believer to depend wholly on medical input for healing without seeking spiritual help, but equally foolish for them to refuse to seek medical help because they are 'depending on God' to heal them.

'Conventional' and 'Alternative' medicine

Defining 'Conventional' Medicine

So far in this paper my focus has been on 'conventional medicine', by which I mean the form of medicine that is taught in universities in the Western world, regulated by bodies such as the General Medical Council, practiced by the mainstream within the National Health Service and developed and tested through scientific methodologies. This form of medicine has also been called 'mainstream medicine', 'allopathic medicine' (a term coined by the founder of homeopathy) and 'orthodox medicine' (an interesting term given its religious overtones and the clear implication that other forms of medicine are unorthodox and therefore to be treated with suspicion). Of course this approach to medicine has evolved in the Western world under the influence of Enlightenment philosophy with its confidence in the scientific method based on experimentation, the belief in absolute truth and the importance of evidence. Conventional medicine seeks to be 'evidence based' meaning that any treatment that is offered to the patient should be able to be demonstrated to be effective for their specific condition and minimally harmful. The gold standard for testing this is to compare the proposed treatment with other treatments and/or with a placebo either through a randomised controlled trial or, where such a trial is impossible or unethical, through historical studies.

Defining 'Alternative Medicine'

Having defined conventional medicine we can now suggest that alternative medicine is any approach to the treatment of disease ²¹ that falls outside the remit of conventional medicine. Robina Coker proposes the following definition:

all medical practice not currently included within the medical curriculum, orthodox medicine comprising those subjects with which medical students may reasonably be expected to be familiar before becoming fully qualified doctors. ²²

It must be noted that these definitions are entirely from the perspective of conventional medicine and therefore reflects an innate bias – the assumption, which is not beyond challenge, that conventional medicine is the 'gold standard' against which other approaches to medicine should be tested. It should also be noted that Coker's definition includes the word 'reasonably', which is a helpful reminder that what is currently views as an alternative therapy may in future come to be regarded as a conventional treatment should it be subjected to testing, shown to be safe and efficacious and accepted by the medical establishment.

Alternative medicine is sometimes known by other names such as 'complementary medicine' (this term is unpopular both with some advocates, since it implies that it is only an add on to conventional medicine, and with some opponents, since it suggests that the two approaches are equal and parallel) or 'holistic medicine' (although this is a misleading term as conventional medicine ought to be holistic as defined above and it implies that complementary medicine is a cure for all kinds of illness). Alternative medicine includes novel therapies and some approaches to medicine with very ancient roots such as ayurvedic medicine (based on Hindu thought), Chinese traditional medicine and folk remedies with a long heritage in European societies. Some common forms of alternative medicine include chiropractic manipulation, homeopathy, reflexology, witchcraft and yoga.

The appeal of alternative medicine

Alternative medicine is appealing to many people in Western societies for a number of reasons:

²¹ I recognise that medicine is not concerned only with the treatment of disease – it also focuses on the prevention of disease – but in the interests of simplicity I have restricted this discussion to the issue of treatment of disease.

²² Coker, Robina. 1995. *Alternative Medicine: Helpful or Harmful?* (London: CMF; Crowborough: Monarch)

- *Postmodernism* – conventional medicine is firmly wedded to modern science, whose roots are firmly in the philosophy of the Enlightenment. In recent decades there has been a backlash against modern thinking that has generally been known as postmodernism. Postmodern people are suspicious of any claim to absolute truth and especially of any authority that claims to have a monopoly on the truth. To many the claims of conventional medicine seem arrogant (indeed the attitude of arrogance has not been totally absent from the medical profession). The postmodern suspicion of authority appears to have influenced view of the medical profession less than many other traditional authority figures and doctors remain relatively trusted, but postmodernism has undoubtedly played some part in the rising interest in alternative medicine.
- *Alternative spiritualities* – there has, since the 1960s, been a decreasing regard among many in the population for the Judeo-Christian principles that historically dominated Western culture. The declining influence of the Church and of Christian thinking has led many to explore alternative spiritualities and in some cases this has led to experimentation with forms of medicine that are associated with them. Most notable are New Age spirituality with its connection to yoga and pagan spiritualities with their connection to traditional healing and witchcraft. Many other people who have not explored these spiritualities have been drawn to these alternative medicines simply because of the increased prominence they have gained.
- *Limitations of conventional medicine* – with the increasing democratisation of information (especially through the advent of the internet) it is easier than ever before for people to find information, both reliable and spurious, about medical conditions and possible treatments. This has implications for conventional medicine, not least because the medical professional can no longer take the stance of being the wise man or woman who advises the patient – in some cases his or her role has now become that of a gatekeeper who connects people to the services they have already decided they need. People have also become more aware of certain limits of conventional medicine including:
 - The fact that all treatments carry risk and many cause harm through side effects.
 - The absence in some people's experience of a sense of holistic care, especially the way in which changing patterns of healthcare provision (even if these are, in some cases at least driven by an evidence base for better outcomes) have reduced the degree of relationship between patient and doctor (e.g., because people stay in hospital for shorter periods and because of the loss of a sense of a family doctor in primary care). Together with this is a sense of an over-dependence on drugs and poor availability of more relational therapies.
 - The relative ineffectiveness in managing some conditions, for example chronic back pain.
 - The fact that ultimately conventional medicine cannot deliver what it appears to (or at least used to appear to) offer, namely a life of complete health and a cure for every ill.

Where alternative medicine promises to make up for the deficiencies of conventional medicine on one or more of these fronts it becomes appealing to people. Consider the facts that:

- Alternative therapies may be less open about their risks and potential side effects. In some cases they may actually have less side effects because they contain no active ingredients. In other cases the research that might identify risks has not been conducted because these therapies are not subject to the same rigorous tests that are applied to conventional medicine.
 - Alternative therapists can often spend more time and build more meaningful relationships with patients because they are less busy and are paid by the hour for time they spend providing therapy.
 - Alternative medicine often promises most in the areas where conventional medicine is perceived or known to be most limited (e.g., chiropractors focusing on back pain).
 - Alternative medicine can promise more than it delivers without the same checks that are applied to conventional medicine or can offer to fill in some gaps as an addition to conventional approaches.
- *Boosted placebo effects* – some aspects of alternative medicine can actually boost the 'placebo effect' by making patients feel better in themselves. The multi-sensory atmosphere that is often created in alternative medicine clinics (lighting, scents, sounds) contributes to this as can the fact that alternative therapies are paid for (we are more likely to value what we pay for and to believe that it has been beneficial).

In general, most users of alternative medicine in European countries use it in addition to conventional medicine, often after conventional medicine appears to have failed, but it is also possible that some people turn to alternative medicine as a first port of call, perhaps even delaying seeking help from conventional medicine.

A Christian approach to alternative medicines

How should Christians view alternative medicines? We may propose several tests to help us discern whether or not to be involved with an alternative therapy:²³

1) Does it work?

You need to look behind the claims made for the therapy to discover whether there is actually any concrete evidence that it works. It may be difficult to find the level of evidence that is available for many of conventional medicine's therapies but it is always good sense to investigate a little before allowing yourself to receive any therapy. Look for more than the occasional anecdote or the publicity the practitioners produce. An internet search might reveal some interesting perspectives that give a more balanced assessment of the treatment. Also look out for evidence about risks of the treatment. In general we may be more suspicious of therapies that are new and have not been tried and tested over time, but we must also be discerning about ancient therapies.

2) Why does it work?

A therapy might work but it might not work for the reason suggested by practitioners. An example might be yoga or transcendental meditation, which can reduce blood pressure and stress but not because of any spiritual dimension that might be claimed for them – they work because they relax the individual and any form of relaxation will have the same benefit. The placebo effect is a well-documented phenomenon that shows that people will experience some benefit, at least in how they feel within themselves, from a tablet or other treatment with no active ingredient so long as they believe that it will benefit them. This raises an important ethical question. Is it ethically acceptable to give someone a placebo when we know it is not effective in the way we are suggesting (i.e., the claims we are making for it are not true) but that it can have some benefit to the patient? Conventional medicine would see this as unethical, at least in its current form, although historically when there was a greater culture of paternalism this behaviour may have been acceptable. Parents may use this kind of tactic when convincing their children to accept something, but then we aren't talking about children but adult patients. What effect does it have on a person when we convince them to believe a lie, even if it is 'for their good'? Are we not then diminishing their independence and lessening them as people? Are we creating an unhealthy dependence on the therapist? Are we setting them up for greater disappointment and hurt when in the future they discover our deception? These questions begin to get to the real heart of the issue, for me, surrounding not just alternative medicine but conventional medicine too, which is what effect it has on the person in terms of where we are encouraging them to place their fundamental trust in life. I will explore this question in the final part of this section.

3) What worldview underlies it?

Christians ought not to be happy to accept a therapy simply because it works, even if it works through the mechanism its proponents suggest. We will also want to know what values underlie this therapy. Where did it come from? What are its roots? Many 'alternative therapies' have their roots in traditional folk religion, Eastern philosophies or New Age thinking, all of which are hostile to God. If the therapy has been demonstrated to work and practicing it does not necessarily involve additional elements that are more openly related to an anti-Christian worldview then it may be acceptable for the Christian. An example might be acupuncture, which originated in a Chinese worldview based around the idea of a spiritual energy (*chi*) that flows through the body. This worldview is not Christian but acupuncture can be practiced without any trappings of that worldview and can be demonstrated to work through a mechanism that does not depend on the false worldview (the insertion of needles stimulates the release of endorphins, which are the body's natural pain killers). If a therapy cannot be, or is not by a particular therapist, practiced without additional

²³ These are a modification of tests proposed by Andrew Fergusson in his chapter 'Alternative Medicine' in M. Dominic Beer (ed.). 1995. *Christian Choices in Healthcare* (London: CMF; Leicester: IVP), p.241-2

trappings that point to an anti-Christian worldview than it should be avoided by the Christian. When making this decision it will not be enough to simply say 'Well I know those additional bits aren't real so it's ok for me', we also need to think of the impact it might have on our weaker brothers and sisters, especially those who may have come from a background in the worldview associated with the therapy. The principles laid out in Romans 14-15 should help to guide us.

4) Does it involve the occult?

Here we are not simply talking about trappings of a non-Christian worldview but the possibility that some therapies may actually connect people with demonic powers. In Scripture God is the source of true healing, as we have already seen, but evil spirits can counterfeit some miracles through human agents (e.g. Exodus 7:11, Matthew 7:22). The difference is that even if an evil spirit brings physical healing it will further ensnare the person at a spiritual level. In the Western world we may tend to underestimate the influence of evil spirits but we must not do so. Satan will always try to ensnare people and we must be sensitive to anything that has connections with the occult. God's people are to have absolutely nothing to do with any form of sorcery or occult practices (see Deuteronomy 18:9-11). We see examples of this in Scripture, such as the magicians who became Christians in Ephesus burning their scrolls of sorcery (Acts 19:19). Of course, we must also realise that it is not only overt appearances of the occult that have the power to ensnare us spiritually – this can also happen at the level of the mind or of our faith when we begin to believe what is not true and trust in what is not God. Again I will expand on this in the next section.

The key issue – where is our faith?

In what I have already said about testing alternative medicine I have emphasised the fact that the fundamental issue is the effect the therapy has on our faith. God wants us to know the truth and to trust in Him. He wants us to acknowledge Him as the ultimate source of all healing – the giver of all good gifts. Satan wants to trap us in lies and to shift our confidence away from the true God onto any lesser god that can attract us. The ultimate danger of alternative medicine is that it can become an alternative god – we can begin to trust in it and depend on it (perhaps even so strongly that it may be called an addiction) or on the therapist to a degree that supplants God as the true foundation of our lives. What we must recognise, however, is that this is equally true of conventional medicine. It too might become a god – a foundation of trust. It too may promise more than it can deliver. There are very strong values within conventional medicine about the value of prolonging life and preventing death. Does this have an impact on us spiritually? Do we then begin to live primarily to prolong life rather than to be faithful to God? In many situations the two will lead to the same actions – healthy living is honouring to God as well as good for us – but what if they conflict? What if there is a risk that God wants us to take that could shorten our lives (I am thinking of a call to go to another country where healthcare provision is less complete)? What if our routines became so focused on healthy lifestyles that we neglected important spiritual priorities – if sport or trips to the gym squeezed out devotional time with God, regular commitment to fellowship with God's people or prioritising witnessing? What if healthy dietary choices stopped us from eating with others who need to know Jesus because the food they eat has too many calories? What if we couldn't witness to smokers because of our fear of passively inhaling their smoke? All of this may sound ridiculous, but they are important questions that might help us to ensure that our own health does not become our primary value in life. When we access conventional medicine we must also be careful to keep it in perspective. We can thank God for it and accept it as a good gift from Him but we will not allow it to control us or become our source of security. I am secure because nothing can separate me from God's love in Christ Jesus, not because I live in a country with universal access to healthcare that is free at the point of need!

There is a challenge here too for Christians who are providers of healthcare. Where is our confidence and are we thanking God as the giver of our skill and the tools we can use? I was concerned in reading Christian comments on alternative medicine to see the following test proposed: "Is there a rational scientific basis for the therapy?" I fear that this test displays too great a confidence in science as if it alone is rational and the only way to truth. We must beware of being so wedded to our received wisdom that we are closed to new wisdom and we must ensure that science does not supplant God as the one we serve and trust in.

Further reading

This paper is part of a series of papers I have produced that explore various aspects of health and ethics of life. They are all available freely on my website: www.paulcoulter.net (look for the 'Ethics' page under the 'Writing' heading). Other titles that are currently available include:

- **Introducing Ethics**
Definitions of ethics and morality and a summary of dominant ethical theories followed by a proposal for a specifically biblical ethical framework.
- **What does it mean to be human?**
A consideration of this question drawing on science, philosophy and Christian theology. What do Christians believe about mankind? Is this in contradiction to the discoveries of modern science?
- **Misconceptions?**
A Christian perspective on issues in early life ethics and family planning
- **Christian Sexual Ethics**
A study on major sexual health issues facing our society and what the Bible says about sex and sexuality (including homosexuality).
- **End of Life Ethics**
Biblical foundations and ethical reflections on end of life issues including advance decisions, withdrawing treatment, euthanasia and assisted suicide.

I hope that these papers are useful to you. I would love to hear any feedback on how they have helped you or how I could improve them. I also commend to you articles and books produced by the Christian Medical Fellowship, of which I am a member. They have numerous articles on their website: www.cmf.org.uk.

About the Author

Paul Coulter was born and raised in Northern Ireland where he continues to live and work. He is married to Gar-Ling and they have two young children. Paul studied medical genetics (BSc with first class honours in 1997) and medicine (MB, BCh, BAO with distinction in 2000) at Queen's University, Belfast. He subsequently worked in NHS hospitals and then in the Northern Ireland Hospice before leaving his medical career to engage in pastoral ministry. He also holds an MA in theology, which he obtained with distinction in 2007. He is currently engaged in part time doctoral studies in theology, teaches at Belfast Bible College, serves as a Lay Magistrate in Belfast, acts as a non-executive director of the Patient and Client Council for Health and Social Care in Northern Ireland, and engages in an itinerant Christian ministry as a Bible teacher, podcaster, trainer, seminar speaker, apologist and evangelist. You can connect with Paul and access other materials by him through his website:

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