

Nathan Smith
Dr. Tony Headley
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Faith Healing Fallout

Abstract:

This paper will attempt to address the problem of theodicy when in a pastoral counseling situation. Specifically, it will deal with those who are struggling with faith due to unsubstantiated *name-it and claim-it* promises for physical healing. Far too often, especially in the pervasive affluent culture of the United States, people equate outward visible success with God's favor and blessing. While it is true that the Lord's influence is often visible in the countenance of a believer, the fact of the matter is, not everyone leads a life which is filled with material wealth and health. Despite the fact that God can and does heal miraculously, people still die due to mortal bodies, and there is a disproportionate distribution of wealth throughout the world. However, the blame cannot be placed on God, because much of the suffering in this life is a result of the inherent fallen nature of mankind as mentioned in Romans 8:20-21. This notion is not a novel one, having been spelled out as early as Genesis 3:15, in which God pronounced judgment on Adam and Eve. In this paper, there will be two main components: scriptural exegesis and reflection upon medical research findings. After presenting these, a possible approach towards pastoral counseling will be discussed.

Vignette:

My wife is currently in Estonia, helping to translate curriculum for a Bible college that is being planted by Victory Bible Institute, an offshoot of Oral Roberts University. Some of the teachings

presented are being met with a certain measure of skepticism by the local Russian and Estonian scholars, mainly because their teachers are approaching their lectures from an American mindset. The students could be likened to the people of Berea as depicted in Acts 17:11 who "received the word with all readiness of mind, and searched the scriptures daily, whether those things were so." Currently, the Americans are teaching on faith healing, promoting the mantra that you will be healed according to the amount of faith you have, but that if you pray for healing yet do not receive it, then you do not have enough faith. This is a logical paradox, because being told "You do not have enough faith" does not instill more faith the next time around. So, the person is left praying for healing that for whatever reason is not happening, each time being criticized for lack of faith if the healing does not occur. This creates a downward spiral of self-doubt and shame, ultimately resulting in the person doubting God's love and omnipotence. There is one such woman in my wife's home congregation, who is weary of being prayed for because of the inevitable rejection that will be expressed in light of the persistence of her physical ailment. In short, she continues to trust God, but does not much care for the fanaticism of such Christians. In light of such circumstances, how can one in a pastoral role best counsel someone like this?

Exegesis:

Even Paul himself described his own infirmity as a "thorn in the flesh" in 2 Corinthians 12:5-7, which despite his willingness to serve the Lord remained. He rightly attributed it to Satan, and took it as a reminder to keep himself humble while being entrusted with a great deal of notoriety. There is of course clear Biblical evidence of Jesus healing people according to their faith, as seen in Matthew 9:29. However, there are also multiple scriptural instances in which people were allowed to suffer. To assume that faith and healing share a one-to-one relationship is to treat God like an ATM, rather than

sovereign Lord over all that he created. When we allow ourselves to think that we are bending God's will with our prayer, we fall into the same superstitious trap of early pagan cultures, who believed in multiple gods that could be orchestrated into producing desired results. We as Christians must be humble in our supplication, praying the way Jesus taught in the Matthew 6:9-15 and Luke 11:2-4, rather than buying into the *Prayer of Jabez* mentality, thinking somehow that we actually deserve our blessings. We as Christians should know that there is no power above that of God, and that we cannot tap into some sort of meta-divine form of mystical idolatry. While it is certainly permissible to pray for sustenance and healing, we must not fall into the trap of thinking of prayer as a vending machine.

It should be noted that I do actually believe in God's power to heal. My father had kidney cancer, which was surgically removed, only to have the cancer reoccur later on in the void where his kidney had been. The doctors prescribed a form of chemotherapy to be self-administered through a series of regular injections. Due to the aggressive nature of the cancer, he was told that he would have a 50% chance of living, and that he should prepare his family and loved ones for the possibility that he might die within ten months. I am happy to say that his cancer is now in remission, and that he has consistently had healthy results at his checkups. We give praise to God for healing him, and feel fortunate and blessed that he had access to a skilled team of surgeons and physicians who were experts in their respective fields of study. That being said, despite this powerful healing I still realize that one day my father will die, as will I. To imply that the Christian life will be one free of physical pain or mental suffering is to do the Bible a disservice by taking only surface-level examples. If anything, the case of Enoch as described in Genesis 5:24 and Hebrews 11:5 is the exception to the rule, not the norm. Ascension directly to heaven has only been granted to a few others, such as Elijah and Jesus, in 2 Kings 2:11 and Mark 16:19 respectively. For the most part, humans live their lives with some measure of toil and die of natural causes, such as prolonged disease or injury resulting from accidents, Christians

notwithstanding. What sets us apart then, is not the absence of hardship in our lives, but the way in which we carry ourselves in the face of adversity.

I know of an Air Force chaplain who, when he was in seminary, was told that his son who had Down syndrome was not mentally retarded because of a genetic flaw in his chromosomes, but because he was demon possessed. This professor chastised the fledgling seminarian for not having enough faith to cast the demon out. After the professor himself was unsuccessful in changing the boy from being mentally handicapped to fully cognitive through prayer, the seminarian transferred to a different school and pursued ordination through another denomination. Such is the danger of attributing direct spiritual significance to problems that have already been medically proven to be otherwise. It gives way to doubt in the power and goodness of God, and breeds insecurity which manifests itself through questions such as: "Is God judging me through my child's misfortune?"

An informed hermeneutic would say otherwise. While there are of course examples of God's judgment as seen with Sodom and Gomorrah in Genesis 19:24, there are also instances in which righteous people such as Job endured much undeserved suffering and were stronger because of it. As beings who possess only a finite capacity for understanding, we must be willing to live with these tensions, and simply trust that God is good. To claim that God is somehow not good is to misunderstand the original use of the word "good," which simply means according to God's purpose, exemplified by him repeatedly describing his own creation as good in Genesis chapter 1. As Christians we must measure good and evil by the degree to which people and events fall into either one of two categories: of God or not. We cannot judge God himself. Though, it is not necessarily sinful to have questions, because it shows our dependence on the Lord for answers, as seen in Jeremiah 12:1 – "Why do the wicked prosper?" From our limited vantage point, this life does not seem fair. In realizing this, we also bear some responsibility for helping to alleviate and off-set the injustice. We who follow the

God of Abraham, Isaac and Jacob should know that we were not promised a life without suffering.

Jesus himself said both: "My yoke is easy and my burden is light." – Matthew 11:30; but also "If any man will come after me, let him deny himself, and take up his cross, and follow me." – Matthew 16:24.

Taken in conjunction, this means that the Christian life is to be one of endurance, aided by the Lord.

Paul touches on this in 2 Timothy 4:7 as he looked back on his life: "I have fought a good fight, I have finished my course, I have kept the faith."

Research:

Case 1, Colombia University

In doing Internet research as described by the assignment for this paper, I found a few studies which purportedly had proven remote medical improvements through prayer. Initially, I was delighted to find so many articles related to clinical studies on faith and healing. Though, I quickly realized that many of these so-called medical findings were inconclusive at best, due to the methods by which the research was carried out, as well as the questionable nature of those involved. This was disheartening news as a Christian who believes from a faith standpoint in the power of prayer, to see so many others mis-using it as a vehicle for profit or notoriety. Nevertheless, I will present what the findings were, and then describe by what criteria they were proven to be unreliable.

The first study was done at Columbia University, and involved a group of volunteers praying for women in South Korea who were undergoing in vitro fertilization. The study was originally given quite a bit of attention, because it was published in 2001 by the respected, peer-reviewed *Journal of Reproductive Medicine*. The study reported that those being prayed for had double the pregnancy rate than those who were not. Later on, the study was shown to have several major problems. First, one of

the key researchers named Daniel Wirth was found to be a criminal with a string of false identities who had defrauded the technology company Adelphia Communications of millions of dollars. The other two researchers, Dr. Rogerio Lobo and Dr. Kwang Cha, quickly withdrew their names from the study. At the time, Lobo was chairman of the Obstetrics and Gynecology Department at Columbia University in New York, and Cha was director of the Cha Columbia Infertility Center. This left Wirth holding the smoking gun, as a lawyer with a criminal history and a degree in para-psychology, which hardly makes for a credible study.

According to Bruce L. Flamm, MD of the *Scientific Review of Alternative Medicine*, there are far-reaching implications for studies such as this receiving the authentication implicit with being published in a peer reviewed journal. For instance, insurance companies could insist that people try prayer before seeking help from a doctor, or if one particular study showed that Christian prayer yielded higher healing rates, doctors could be pressured to advise their clients to convert. Mixing ad hoc medical studies with matters of faith is traversing a dangerous path, according to Flamm. He also questioned the ethical ramifications due to absence of informed consent, because the women being prayed for in the Columbia University group were not informed beforehand, nor did they give their consent for their photos and names to be published worldwide upon news release of the staggering study results. This was in violation of US federal regulations set forth in the Health Insurance Portability and Accountability Act (HIPAA) of 1996. Additionally, the results of the study were released to the public well before any other research group had the chance to attempt to duplicate the results. One of the main tenets of scientific research is that the results are able to be verified as authentic. Despite all the room for reasonable doubt in the findings of this study, the results are still being touted as reliable on the website of the National Center of Policy Analysis. While personally I would like to see proven prayer results, this study hardly constitutes what I would call empirically

verifiable evidence. This was a case of gross negligence due to approaching things with an agenda.

Case 2, Mid America Heart Institute

This next study I found was at least free of scandal, though critics did voice a few concerns over the methods. First, I will give the findings, and then present the other side of the argument. In 1999, the Mid America Heart Institute of St. Luke's Hospital in Kansas City studied 990 coronary patients over the course of a one-year period. They were randomly split into two groups of 495 patients. One of the groups was prayed for regularly by volunteer intercessors, whereas the other patients did not have anyone assigned to pray for them. The researchers were led by Dr. William Harris. In the end, their findings were that patients who were prayed for suffered 10% fewer complications. The study concluded "This result suggests that prayer may be an effective adjunct to standard medical care." Dr. Harold Koenig, director of the Duke University Center for the Study of Religion/Spirituality and Health said that this study shows significant results because it is published in the *Archives of Internal Medicine*, a journal of the American Medical Association.

Those on the other side of the camp pointed out that the patients did not know they were involved in a study, and as such the placebo effect could not be accounted for. While the patients' names were at least kept confidential, some might cry foul over the possible implications for HIPAA violations, due to the fact that others were tracking their data without their knowledge or expressed consent. Dr. Stephen Barrett of the health fraud tracking organization Quackwatch said "This study is a well-designed waste of time... You can't generate magical forces with magical thinking. It's absurd."

Additionally, Barrett said that there may have been unaccounted prayer affecting the outcome, such as the family members of the control group. It is ironic that to discount the results of the study, he accuses outside prayer of having possibly influenced the situation. This at least shows his willingness to attribute some form of power to prayer in affecting the healing process. Dr. Michael Janson of the

American College for the Advancement of Science took the middle ground by saying, "It's impossible to explain from a scientific basis, and I'm personally skeptical... But I don't want to preclude the possibility of things I don't understand. A thousand years ago there were lots of things we said were impossible."

Case 3, Harvard Medical School

This study was probably the most thoroughly tested from a scientific standpoint. The investigation was headed up by the Study of Therapeutic Effects of Intercessory Prayer, known as STEP. It involved 1802 coronary bypass surgery patients at six different hospitals, split into three groups of approximately 600 patients each, with the mean age of 64. The first group was not prayed for by anyone involved in the study. The second group was told that they may or may not be prayed for. The third group was told specifically that they would be prayed for from the night before their respective surgeries and through the following two weeks. Those doing the praying were from three different Christian groups, two Catholic and one Protestant. In the end though, it was found that the group being prayed for actually fared slightly worse in terms of health complications after their surgeries. The results of this test were published in March of 2006. While these findings are disappointing to hear as a Christian, they do not necessarily indicate a challenge to the existence of God. I admire that despite these difficult results, the Christians involved in the study had the integrity to report them accurately, a stark contrast to the previously mentioned Columbia University research.

Looking at all these studies from a Christian theological perspective, I think that even the most sincere efforts to measure prayer presupposes that God will play along with our human research efforts to define his ability to heal. It could be likened to Satan telling Jesus to throw himself from the pinnacle of the temple in Luke 4:9, to which Jesus replied "Do not put the Lord your God to the test." It begs the question, is the Lord really quantifiable by the means which we are attempting to use? This was a

question raised by David G. Myers in an article entitled "Arm-twisting With the Almighty" which ran on April 7th, 2006 in the *Science and Theology News* online. He questioned the very motives of wanting to prove medically that prayer works. He offered a humorous antecedent, in which ailing wealthy people might feel inclined to outsource prayer warriors in an effort to sway God's favor in their direction. He likened it to a cosmic popularity contest. In that regard, perhaps the whole reason that these prayer experiments are not yielding desirable results is that the prayers being offered lack the sincerity often involved in fervent faithful prayers. In other words, it might be a bit like observing an otherwise untamed animal within the confines of an artificial environment. Perhaps the very act of attempting to study God displeases him, and as such he does not honor our human-driven efforts. Of course, I have no way of actually proving that theory!

Christian author and speaker James Watkins said this about faith healing on his personal site:

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"Romans 8:20-21 clearly points out that illness in general is a result of the fall and the human sin condition. But Matthew 4:24, 10:1, and 10:8 reveal that individual illnesses are not satanically inspired. The disciple makes a clear distinction between diseases and demon activity... Thirty-seven accounts of healing are detailed in the Gospels and Acts. Only ten occurred with a crowd present. Twelve occurred in small groups and fifteen in private settings. Rarely today do we hear Christ's admonition to the healed, 'Don't tell anyone!' Instead, we have weekly television programs featuring healing services, and monthly mailings with a plague of pictures of the 'healer.' Genuine healers will be more concerned about God's kingdom being built up than their own" – [Source](#)

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Watkins also pointed out that those who belittle medical treatment in favor of faith-only healing

should not be trusted. Being Christian does not mean divorcing ourselves from common sense, especially when things have been proven to be effective. Medical science is not mutually exclusive with believing in the Bible. Paul himself suggested that Timothy drink some wine to sooth his stomach, as documented in 1 Timothy 5:23.

Counseling Implications:

In light of the results of these studies, how then does the sincere Christian who finds him or herself in a counseling situation most effectively minister to someone who has been burned by *name-it and claim-it* theology? Equally as important is the question, how do we go beyond our own cultural predispositions, to minister as Christ would, with a proper perspective of both God's boundless love and sovereignty? The issue of theodicy is hard enough to answer when talking to a fellow countryman, let alone trying to explain that notion in a cross-cultural situation.

In the case of my wife ministering in Estonia, she is seen somewhat like a foreign celebrity in her own hometown. She has been told that others have named their daughters after her, because they admire what she has accomplished. For the last eight years, she spent the majority of her time in the United States receiving her college and then seminary education. For some, she is the model for what it means to "make it," not unlike someone rising to a position of prominence from humble beginnings in American culture. As such, she is looked to as something of an authority. Still, the harsh reality remains that their country has still not yet fully recovered from Communism, and not everyone is afforded the unique set of circumstances or educational opportunities that she had.

Clearly then, the typical American "boot strap" encouragement of "work harder" to achieve ones dreams does not quite fly in that situation. Many people there do not have stable jobs, and as such do not have access to adequate health care. Without any other alternatives, faith healing becomes a last

resort. While God sometimes heals, it is not always the case, and we cannot fully understand the reasons why. Thus begins the vicious cycle of trying to muster up enough faith to merit healing. Taken to the fullest extent, this will eventually cause doubt in the existence or caring nature of God himself.

I believe the best course of action in such counseling situations is to first simply let the person talk through their emotions. Often, they will be distrusting of someone in a position of authority, due to past negative experiences with church pastors promising miraculous healing. Most likely, they will either be doubting their own faith, or will be adamantly protective of it due to feeling exploited by a group setting, in which these public healing services usually take place. Needless to say, it might take some time for them to open up and feel comfortable sharing about how they view Christianity, and even then it might take quite a bit of time for them to actually arrive at the point they are willing to talk about their infirmity in relation to prayer.

In order to create a safe environment for sharing, the Christian counselor must suspend his or her own needs to play an authority figure. In the pulpit, pastors have a tendency to dispense advice in a matter of fact manner, but in a counseling situation it is imperative that the counseled individual is afforded the necessary venue to speak. This was covered well in chapter four of *The Lost Art of Listening*, by Dr. Michael P. Nicholas. He explains how simply sitting and letting someone talk will not really cut it. How many times have all of us as school children stared out the window rather than listening to a teacher give a lecture? Obviously, simply remaining silent while the other person is monologuing does not show real empathy, nor does it help the counselor maintain a steady level of concentration. A good counselor must offer feedback both vocally and non-verbally, while at the same time not dominating the conversation. Sometimes this dialog may seem to go painfully slow for the counselor, but the pace is irrelevant so long as the person sharing the story does not feel rushed.

That being said, the counselor should not be afraid to challenge some of the presuppositions

brought into the session. The notion of God still loving this person must be addressed, albeit gently. In some cases, there might even be a bit of learned helplessness. In reading *Counseling Across Cultures*, there was one chapter in particular that stood out to me. In it, Patricia Arredondo covered the topic of counseling individuals from marginalized and under-served groups. While her focus was mainly on the Indigenous Natives of North America, I realized that this is also applicable to people who have lived under Communism. In both cases, there exists the potential for learned helplessness, in which there were government hand-outs. At first, the notion seems like a good one, but for some people it creates a victim mentality that becomes almost ingrained in ones own psyche. My wife has told me on several occasions about how the work conditions were established under the Soviet Union. Since the government still gave out a steady paycheck whether or not any work was being done, many people got used to this. So much so, that after Communism crumbled, it is the attitude of some people that they should not have to work, and they complain about that necessity, despite the fact that they also complained under the USSR. Thus, it is important as a counselor to realize when someone truly is being victimized, and when it is a result of a pattern of subjugated social status. In the case of not receiving faith healing, this would be due to an incorrect view of who God is.

In his book *The Creative Leader*, pastor Ed Young describes many people's perception of God as an incomplete photo album, with only certain aspects of the Lord's multifaceted personality represented. In order to help those embittered and jaded in their faith, it will be necessary in counseling sessions to help round out their view of God the Father, Son and Holy Spirit. Pastor Young described quite accurately what I consider to be some of the key misconceptions about God. They represent two polar opposite views that can result from a *name-it and claim-it* theology:

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"The Candy-Land God is really perpetuated by certain televangelists. They paint God as the

Candy-Land God who just rains candy and money down from heaven. They say, 'God doesn't want you in that Mazda. He wants you in that Mercedes-Benz. All you need is a Mercedes-Benz faith.' Don't get me wrong – God does want to bless His children, but giving material gifts is just one way He does that. And looking exclusively at God as the Giver of good things is a limited and incomplete picture of God... Others have a picture of a Supreme-Court God. They picture Him as an austere man in a black robe, proclaiming, 'You're guilty! You are going to hell!' The love of God is missing in their picture; they only see severe justice doled out" (Young, 27-28).

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While one might expect that the first case scenario would be true after being promised abundant blessing, it is often the second persona that people attribute to God in the wake of disappointment. It would be especially applicable for someone who is terminally ill, or has someone close to them who is suffering. This is something that was covered in the book *Helping People Through Grief*, by Delores Kuenning. Chapter 17 is entitled "Living on Borrowed Time," and describes the difficulties faced by a man named Ed Westendorf, along with his wife as they cope with the news that he has amyotrophic lateral sclerosis, also referred to as Lou Gehrig's Disease. The process of gradual muscle deterioration is described, to the point where this once athletic man is now bed-ridden and gasping for breath. At one point, he reported having a foretaste of heaven. Here is his recounting of that near-death experience:

"Whether I stopped breathing, then started again, I don't know. I had the feeling I was falling down a long tunnel. All I can remember was it was easy to breathe and I felt as if there was nothing wrong with me. A voice at the end of the tunnel told me to 'go home.' They weren't ready for me yet. It had a very calming effect on me." He also shared another glimpse he had, in which he saw his uncle who had passed away from cancer waiting to greet him, but again he was told "go back, not yet," but not before his uncle reassured him that in heaven, there would be no more pain (Kuenning 199-200).

Another inspiring story I came across was that of Chris Maxwell. He is the pastor of Evangel Assembly in Orlando, Florida. When only in his mid-30's, he had a bout with viral encephalitis, which affected the left temporal lobe of his brain, causing severe memory loss and a tendency towards epileptic seizures. His recovery was long and grueling, but by the summer of 2004, he had regained a certain level of normalcy and recounted his difficult journey to reclaim his own personality in an article for *Christianity Today* entitled "Where Did My Mind Go?" In it, he described the effects of his condition on his wife and children, as well as the change in the way people related to him. Despite all of that, he continues to be a pastor, while relying a lot more on those around him for support and even day to day things such as remembering how to spell certain words or people's names.

As Christians offering counsel to those struggling with faith, we would do well to recount instances of enduring through hardships such as these. We must help to guide people's focus from this temporal life to the next, where there will be no suffering and all knowledge will be made complete. Paul said it best in 1 Corinthians 13:12, "For now we see in a mirror, darkly; but then face to face: now I know in part; but then shall I know fully even as also I was fully known." With such an attitude, those who are in the midst of present suffering can look forward to a day in which they will be in the presence of the Lord, and will know him as completely as he knows us now.

We as Christians in counseling roles must help people to have a complete hermeneutic and understanding of the character of God. Yes, he is infinitely good, all powerful, and completely loving. At the same time, because of the sinfulness and fallen nature of humankind, there will be instances of difficulty in this present lifetime. There will always be a tension between what we may deem to be fair or acceptable and what actually is happening in the world. At the risk of sounding like a cop-out: We must be willing to accept this tension, if indeed we really believe in the Bible as the true Word of God.

Works Cited:

Barrett, Stephen. "Some Thoughts About Faith Healing." *Quackwatch*. 3 Mar. 2003.
<http://www.quackwatch.org/01QuackeryRelatedTopics/faith.html>

Bowen, Jon. "Faith Healing." *Salon Media Group*. 3 Nov. 1999.
<http://dir.salon.com/story/health/feature/1999/11/03/prayer/index.html>

Cromie, William J. "Prayers Don't Help Heart Surgery Patients." *Harvard University Gazette*. 30 Mar. 2006.
<http://www.news.harvard.edu/gazette/daily/2006/03/30-prayer.html>

Flann, Bruce. L. "Inherent Dangers of Faith-Healing Studies." *The Scientific Review of Alternative Medicine*. Fall 2004.
<http://www.sram.org/0802/faith-healing.html>

Grossman, Jeff. "Prayer: Healing Hoaxes." *Psychology Today*. Sept. 2004.
<http://www.psychologytoday.com/articles/pto-20041202-000005.html>

Harris, William S., et al. "A Randomized, Controlled Trial of the Effects of Remote, Intercessory Prayer on Outcomes in Patients Admitted to the Coronary Care Unit." *Archives of Internal Medicine*. 25 Oct. 1999.
<http://archinte.ama-assn.org/cgi/content/abstract/159/19/2273>

Kuenning, Delores. *Helping People Through Grief*. Minneapolis: Bethany House Publishers, 1987.

Maxwell, Chris. "Where Did My Mind Go?" *Christianity Today, Leadership Journal*. Summer 2004.
<http://www.christianitytoday.com/le/2004/003/20.29.html>

Myers, David G. "Arm-twisting With the Almighty." *Science and Theology News*. 7 Apr. 2006.
<http://www.stnews.org/commentary-2776.htm>

National Center of Policy Analysis. 8 Oct. 2001. <http://www.ncpa.org/iss/soc/pd100901d.html>

Nichols, Michael. *The Lost Art of Listening*. New York: Guiliford Press, 1995.

Pendersen, Paul B., et al. *Counseling Across Cultures*. London: Sage Publications, 2002.

United States Department of Health and Human Services - HIPAA. <http://www.hhs.gov/ocr/hipaa/>

Watkins, James. "Healing: Faith or Fake?" <http://watkins.gospelcom.net/heal.htm>

Young, Ed. *The Creative Leader*. Nashville: Broadman & Holman Publishers, 2006.