MODERN NEW TESTAMENT SCHOLARSHIP AND PSYCHOLOGY IN REGARD TO THE MIRACLES OF HEALING

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SYNOPSIS.

Statement of the present work being done on "Spiritual Healing" subjects. Relation of the Medical Profession to the Church. Examination of the findings of representative Christian Scholars on the Healing Miracles. Application of these findings to the psychiatric need as revealed in loneliness, fear and guilt.

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Amongst the many advances of the Christian spirit to-day is the new approach that is being made to the mind-body relationship. Whilst theologians, philosophers and psychologists have been discussing this and advancing various academic theories, much practical work has been done quite recently which merits attention. The problem has been tackled both from the side of religion and medicine. It is of what has actually been done and of the foundation principles on which that achievement is based, that this paper speaks.

Let us begin with administration and practical affairs. There is no doubt that healing was regarded by the early Church as an integral part of its ministry to the world. Of the incidence of our Lord's healing miracles we shall speak later on, but that the healing of disease was regarded by Him as important, and indeed central to His mission, no one can doubt who reads the Gospels. Whatever modern thought may make of them, the healing miracles cannot be elided from the Synoptics without tearing them to pieces. Acts makes it clear that in the Apostolic Age the gift of healing was continued and actively possessed.
A comparatively recent study of the Ante-Nicene Church\textsuperscript{1} shows that it went on for at least three centuries. Irenaeus, Tertullian, Justin Martyr and Origen are some of the great names that can be quoted in defence of this.

But by the end of the third century a definite change had begun. Theological controversies, often on barren subjects, increased in the Church: worldliness and the grasping of political power developed at the expense of the spiritualities. The conversion of Constantine in A.D. 325 was a piece of statesmanship rather than of religion. From that moment the Church became more a movement allied with the State than a living thrust of the human spirit towards God. Inevitably, slowly, the gift of healing died out. Augustine, in the closing years of the 4th century, complains that though miracles did happen, yet they were sporadic and rather unusual. By Cuthbert's time (A.D. 635–687), though holy water and oil were used to cure sickness, the procedure was distinctly tinged with magic, having come a long way from the Gospels and Apostolic Church.

By the Middle Ages the stream of the Church's healing ministry had to all intents and purposes gone underground. There was an occasional revival in the work of St. Francis and the early Franciscans, but it is noteworthy that not even in the case of St. Catherine of Genoa, who spent much of her life ministering to the sick in the hospitals, was any continuous emphasis put on direct healing by prayer and sacrament. In the 17th century in England, George Fox, as H. J. Cadbury has shown us,\textsuperscript{2} performed acts of bodily healing, whilst in Ireland Valentine Greatrakes, "the stroker," as he was called, began to cure scrofula and other diseases by the laying on of hands. This practice had been usually confined to the two Royal Houses of England and France, and continued to be practised by the kings of England till the Hanoverians refused to sanction it any longer. With their refusal, apart from a few very occasional manifestations in John Wesley's early ministry, healing as part of the ministry of religion died out.

It is in our own day that the emphasis upon what has come to be known as "spiritual healing" has been revived in the Church. Leaving on one side the phenomena of Lourdes, the eccentric and non-Christian philosophy of Christian Science, and the practices of spiritualist "healers," recent years have

\textsuperscript{1} Evelyn Frost, \textit{Christian Healing}. (London, Mowbray, 1940.)
seen a new approach on the part of Protestantism to the problems of disease. Many reputable societies have grown up within the Church, such as the Guild of Health, the Guild of St. Raphael, the Guild of Pastoral Psychology and the Divine Healing Mission. In 1937, at the instigation of the Rev. Leslie D. Weatherhead, the Methodist Conference appointed a Committee to investigate the whole field of spiritual healing. From this has sprung a Society which groups clergy and doctors together for study and prayer. The Guild of Health was started at the turn of the century in 1905, whilst in 1944 came the Churches’ Council of Healing, an organisation which, like so many fruitful things in our modern Christian set-up, owes its origin to Archbishop Temple, and which now, under the chairmanship of the Bishop of Coventry, has representatives upon it from every great Christian Communion in Britain, except Roman Catholicism. All this growing movement works with the doctors, not against them, as witness the fact that the British Medical Association has appointed official representatives to sit on the Churches’ Council. Medical, psychological and psychiatric skill are regarded as part of the gift and ministry of the living God Himself, but are supplemented by the offices of religion, prayer and intercession for the sick, the use of the sacraments, laying on of hands and anointing with oil. It is believed that a living religion, with the real spiritual experience that it implies, means health not disease. A quiet mind stayed on God reinforces the vis medicatrix naturae.

From the medical and psychological side it can be said that the modern movement back to recognition of non-bodily forces at work in healing really began with Mesmer, 1733–1815. His doctrine of animal magnetism was inevitably discredited, but it is from him that the new currents of thought had their source. Through Braid and Lloyd Tuckey in England, Esdaile in India, Charcot and Bernheim in France, they passed on to Coué and his practice of suggestion (“every day in every way I am getting better and better”). Then came the epoch-making discoveries of Freud in relation to the unconscious, the schools of Adler and Jung, and the “Purposive” school of McDougall. All of these set the mind in the centre of the psyche and opened up a new conception of the relationship between unconscious mental forces and the human body. It was seen that much illness both organic and functional, if it did not have its origin in the mind, was at least vitally affected by it. A new medical approach
developed to the problem of suffering, modern psychiatry was born, and the incidence of neurotic illness recognised. Here and there, the older materialism fought rearguard actions, notably in the Behaviourist school of John B. Watson, which ignores all factors like freedom of the will, the imagination as a source of emotion, or the influences of emotion upon the body, and sets up in their stead conditioned stimuli and the unconscious drives of instinct and habit. But in general, the tide of medical practice has been against it. Man is seen to-day as an entity made up of a threefold nature, body, mind and spirit. A diseased soul or a disordered mind may upset the body. Illness and its cure are not entirely dependent on the knife, the bottle or syringe. When the mind can no longer deal with a conflict it projects it, at times, on to the body, as in various skin rashes and stomach troubles, and when the spirit is out of touch with God, Who is its natural environment, the whole personality is thrown out of order.

In May, 1947, the first official contact was established between the medical profession as a whole and the Churches’ Council of Healing. The Ethical Committee of the British Medical Association invited the Council to send a deputation to meet them at their headquarters. The upshot of the discussions was a statement prepared by a Sub-Committee of the Ethical Committee of the BMA in conjunction with the Medical Committee of the C.C.H., which was printed and is available to all doctors. It declares that there is no professional or ethical reason why doctors should not co-operate with the clergy in a joint approach to the problems of sickness, each profession working within its own sphere. Parson, doctor and surgeon are finding a new common interest, sympathy and understanding in their ministry to the sick. In the beginning, priest and medicine man were one. Now, after centuries of separation and mutual misapprehension, they are coming together again. Whilst on one side medicine has been tending to become more and more scientific, until, in classification and specialisation there has been a tendency to lose sight of the individual as a whole, on the other religion has again awakened to its ancient convictions regarding the healing power of God. Lord Inman, as the Chairman of Charing Cross Hospital, has testified to this. He writes: 3

“There is no earthly explanation of some of the things I have seen happen inside the walls of a hospital. They tell of a power

3 *Christ in the Modern Hospital* (quoted in report of CCH, 1946-7, p. 13).
that is greater than human. And that power is God.' In this new joint approach lies a fresh significant adventure of the Christian spirit to-day which is full of hope for the future of mankind. Such is a brief statement of recent events in the field of Christian healing. It is time to consider the foundation principles underlying this history.

Modern scholars have paid much attention to the healing ministry of our Lord. Works like those of L. W. Grensted, E. R. Micklem, A. Richardson, G. G. Dawson and Leslie Weatherhead have all considered them in detail, and attempted to appraise them in the light of the contemporary situation in theological and psychological thinking. Certain assumptions may be said to be common to all schools of Christian thought in this field: (1) The will of God for men is seen as health and happiness, not disease. A distinction is drawn by Weatherhead between the primary and secondary will of God in this matter, which is acutely pertinent. The primary will of God is that man should be healthy, perfectly integrated and balanced. "The primary will of God, His ideal intention, is perfect bodily health. Anything less...is a temporary victory of evil." But if at the same time, as in the case of St. Paul, or of "Trophimus who was left at Miletus sick," healing does not follow, then it is the secondary will of God that man should so deal with his suffering as to make it an occasion for spiritual victory. (2) Sickness often arises from causes outside of the person who is ill. We are all bound up together in the bundle of life and cannot enjoy the advantages of the family without at the same time enduring its disadvantages and limitations. Disease and pain are real and not imaginary, as they are conceived to be in Christian Science. (3) There is a great difference between theological and psychological faith. The latter may be, and often is, nothing more nor less than a varying threshold of suggestibility. An ignorant man with a low threshold, easily susceptible to outside influences, may respond and be healed, whereas a highly educated person who is just as devout a Christian, may fail to receive the

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10 2 Tim. 4: 20.
suggestions because of his high threshold. Theological faith is not faith in healing but faith in the living God as revealed by Christ, is independent of suggestion, and lifts the personality out of its depression to a new height of real fellowship with the Divine. It is that communion of the spirit with God which provides the medium through which healing comes. (4) Jesus apparently never emphasized the healing of the body. He never even claimed to be a healer. He always declared that the most important thing to do was to bring the sick person into living fellowship with God. (5) The outstanding purpose of the healing miracles was redemptive. They were meant to bring forgiveness to the sinful disordered spirit. There were many mysterious magicians and wonder-workers passing along the roads of the first century Græco-Roman world, but Jesus always refused to be put into that class. He would not work a “sign.”11 The roots of disease for Him were not in material causes, but in man’s evil will. Sickness belonged to the kingdom of Satan. His word to the paralytic borne of four, “Son, thy sins be forgiven thee,”12 go to the root of His thinking and practice. God, He said, is the perfect Father of all men. Unless a soul is saved bodily health means very little. Therefore His healing miracles had a moral reference, and the bodily cures may be said to be a sequence or by-product of the healing of the spirit. (6) Most important of all, in the healing recorded in the Synoptic Gospels, it is God who is directly at work in His Son Jesus Christ. Attempts have been made to interpret Jesus in this respect as a scientist before science, and a psychologist before psychology. It is said that His healings are susceptible of psychological and natural explanations, falling wholly within this sphere. His miracles were extensions of natural law, known to Him, but not to us or the men of His time. Such explanations break on the rock of the New Testament. Here is not a list of treatments to be paralleled in a Harley Street consulting room, but the Divine Healer at work, “very God of very God” ministering to the needy personalities of men and women. Only once in human history has a perfect personality appeared, One in whom body, mind and spirit have been completely integrated. Only once, therefore, has there been an entirely uninterrupted channel through which the healing Grace of God could flow. This

12 Mark 2: 5.
worked through the laws of the universe, but at the same time could extend and transcend them in the world of faith and love.

Says Alan Richardson, "The miracle stories form an essential and inseparable part of the Gospel-tradition." H. G. Wood points out that the evidence for many of the particular incidents recorded of the ministry of healing in that tradition is particularly good. Other Biblical scholars take the same view. The cures were not merely of neurotic or functional diseases. Organic troubles came within their scope as well. The Form Critics speak of a "miraculous technique," but there were cases in which Jesus never touched or came into personal contact with the sufferer at all. He healed by a word. Here we are not in the world of Hellenistic magic but in that of the Bible, in which we are in direct contact with God’s creative power and activity. There have been several papers read recently before the Institute concerned with the question of the miracles, so the present writer may perhaps be excused a detailed discussion of the definition of miracle. Indeed, E. R. Micklem deprecates discussing in this particular context as to whether or not a "miracle" in a more restricted sense can happen. He says that such an enquiry is not relevant to a study of the healing miracles. But the miracle stories, as Richardson points out, are part of the Evangel itself. If they are stripped from the Gospels not only does the narrative fall to pieces, but the Jesus who emerges in what is left is certainly not the Jesus in whom the disciples believed. So some definition of "miracle" is necessary, if "miracles" are not to be explained away in a non-Biblical fashion. May we take as satisfactory that given by Dr. Leslie Weatherhead in his latest book: "A miracle is a law-abiding event by which God accomplishes His redemptive purposes through the release of energies which belong to a plane of being higher than any with which we are normally familiar"? History and theology are inextricably mingled in the Gospels. We have an interpretation of the facts as well as the facts themselves. To the Synoptic writers (to confine ourselves only to them), Christ is "the power of God unto salvation," and the things He did were just the revelation of that power in action. A psychological or even

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13 Peake’s Commentary, p. 663.
17 Romans 1:16.
mythological explanation of miracle may be sufficient for those who stop short of the full Christian belief in Christ as God manifest in the flesh. But to those who see and worship Him as the Evangelists did, such theories fall far short of reality. Weatherhead’s definition makes it clear that in what is known as “miracle” God is directly at work, that Divine energies are directly released, and that yet the cosmos remains an ordered system not at the mercy of arbitrary will on the one side or the merely marvellous on the other.

We propose to give examples of the way in which three Christian scholars who are aware of the historical, theological and psychological background of the whole subject of non-physical healing through the centuries, have dealt with the miracles of healing. They are taken from three authoritative and influential books, E. R. Micklem’s Miracles and the New Psychology (published in 1922), G. G. Dawson’s Healing, Pagan and Christian (published in 1935), and Leslie D. Weatherhead’s great new work Psychology, Religion and Healing, of 1951. Between them they are typical of the modern Christian yet truly scientific attitude to the questions involved.

1. E. R. Micklem’s book is indispensable and was a landmark in these particular studies. Throughout he is sympathetic to the psychological and pathological point of view. He is furnished with an adequate psychological apparatus and in addition possesses the requisite New Testament scholarship. He accepts the tremendous suggestive power of our Lord’s personality, and says that this factor more than any other single fact, played a decisive and prominent part in His cures. Jesus understood the depths of human character and motive to an unparalleled degree. He had intense sympathy and unrivalled authority, all of which increased the emotional rapport between Him and His patients. Further, as Gustave le Bon has shown us, the suggestibility of individuals tends to be heightened in a crowd. Many of our Lord’s cures were accomplished before believing and admiring groups. There is no evidence that either He or His disciples practised anything approaching to what a modern psychologist would call “collective hypnosis,” but nevertheless, the crowd must have affected the situation. The reports of the healing of “multitudes” therefore do not present any particular psychological difficulties. This of course fits in with the present-day development of group therapy and has a direct connexion with

19 The Crowd. (London, Ernest Benn, 1930.)
the psychology and indeed the healing influences of Christian worship.

Micklem does not believe that the cures effected by Jesus were only of hysterical cases. This is in line with his emphasis upon suggestion. Is it possible for psychiatry to deal with organic as well as functional disease? So little is really known as to where the body begins or the mind ends that it is difficult to answer this question accurately, but he is disinclined to banish organic cures from our Lord's ministry.

It is indeed true that we have scant information about the nature of the diseases that were cured, and further, there is a distinct difference of approach manifested by the Synoptic Gospels on the one side and the Fourth Gospel on the other. "In the Synoptics," he says, "it is urged with reiterated insistence that miracle is only possible if there is an antecedent faith, while in John it is the miracle that induces the faith." Matthew, Mark and Luke represent Jesus as working "miracles" almost reluctantly, certainly refusing to regard them as in any way a proof of His Divinity, while John makes Him work "signs" with an evidential purpose. John's attitude on faith in this connexion is much more in line with modern Christian interpretations. Any act of spiritual healing which throws the onus on to the patient is not only false religion but bad psychology. It makes the sufferer feel that everything depends on his having the right kind of faith, so that if he is not healed, he is apt to pass into a state of depression and religious apathy from which it is difficult to arouse him.

The influence of current beliefs on healing in the time of our Lord is very obvious. The Jews believed that disease was due to sin, though there are indications that "the belief in the connexion of sin and disease was not universally accepted." Micklem says that "the direct evidence is indeed limited, but, so far as it goes, it points to the fact that our Lord at no time taught definitely the doctrine of the relation between sin and physical disaster, but on the other hand did 'really combat' that doctrine." This is true, yet it does not invalidate the redemptive purpose of the miracles of healing. There is no warrant for assuming that our Lord attributed the origin of disease either

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21 Cf. Lev. 26; Deut. 28: 15 ff.
to sin in general or to sins, though certain cases of disease may have been so individually, as witness the paralytic boy recorded by St. Mark.\textsuperscript{23} Further, the prevailing acceptance of demon possession as a fact did undoubtedly affect the situation. Jesus, he infers, was a man of His time, with the inevitable limitations of mental outlook that the Incarnation brought in its train.

After a careful enquiry into each healing miracle, the following conclusions are advanced.

\textit{(a)} There is no certainty that any cure worked by Jesus "has its parallel in the annals of modern healing by psychotherapy."\textsuperscript{24} Diagnosis in the Gospels is so vague and unreliable (what was meant by "leprosy" is a case in point), that precision is impossible. Yet it may be said that "the particulars of the miracles of healing upon which most reliance can be placed are not themselves incompatible with the view that such healing was accomplished through the agency of ascertainable psychological laws."\textsuperscript{25}

\textit{(b)} Scientific psychology must take into account the influence of prayer for the sick. It obeys its own laws and works according to its own method. The two instances of our Lord healing at a distance (the Syro-Phoenician's daughter\textsuperscript{26} and the Centurion's servant\textsuperscript{27}) suggest this. This again is true in the light of present day experience. The present writer has been for over twelve years the Secretary of the Methodist Church Spiritual Healing Committee, and has in his files a collection of instances of cure through prayer, all of which have been carefully scrutinised and checked. The experience of people in all the Churches who are to-day undertaking the work of intercession for the sick can no longer be dismissed as fiction, wishful thinking or even as coincidence.

\textit{(c)} The speed with which the Gospel cures were accomplished distinguishes them from present psychiatry.

\textit{(d)} Our Lord's cures were by no means due merely to suggestion or psychological method. They were of a permanent and enduring character, restoring the whole personality of the sufferer: suggestion on the contrary is

\textsuperscript{23} Mark 2: 1–12.
\textsuperscript{24} Op. cit., p. 130.
\textsuperscript{25} Op. cit., p. 130.
\textsuperscript{26} Mark 7: 24–30; Matt. 15: 21–8.
\textsuperscript{27} Matt. 8: 5–13; Luke 7: 1–10.
usually of a temporary nature, the sufferer having to return, not once nor twice, for a "refill."

(e) Jesus cured by bringing the sufferers into living contact with God and thus restoring their confidence not only in Him, but in the universe at large. It is in this context that the constant emphasis on faith in healing must be understood. "This 'confidence' is not the result of mere uncritical 'suggestibility'... it is confidence in a person; and the person is 'God,' 'the Father'—a name to which Jesus gave a wealth of meaning hitherto undreamed of; a meaning which included the attributes of sovereign power and unlimited love." 28

It is apparent that in this most influential and pioneer study the psychological emphasis is paramount. Micklem set in being a trend of thinking which has permeated much of the modern spiritual healing movement. A certain healthy revulsion against it is now becoming apparent, a return being made to religion instead of psychology, but there is no doubting the valuable or stimulating nature of his discussion.

2. We turn now to another book that had a strong influence in the attempt to re-invisage the Church's healing power in the light of 20th century knowledge and conditions, namely, G. G. Dawson's *Healing, Pagan and Christian*. This set the subject in the light of pagan and non-Christian custom, tracing the development of healing back to its earliest dawn. It also dealt with medical and professional healing, whereas Micklem had only been concerned with a study of the New Testament miracles.

Some time ago a doctor said to the present writer, "Some of us pray like parsons, others of us work like doctors." That dichotomy, so prevalent still in certain quarters, is negativized all through Dawson's pages. It is entirely false. Far too much suffering and far too many deaths are still caused by disregard of the doctor. But still, too, many hopeless cases get up from bed and cheat the undertaker. Dawson makes it plain that if we are to account for all the facts thrust upon us by daily experience, we cannot stop at physical or psychological healing. Sometimes the free and transcendent spirit breaks through, smashes physical conditions, and triumphs over the flesh. Dawson divides our Lord's cures into three classes: (1) those primarily psychological, (2) those telepathical, and (3) those...
which transcend altogether the operation of any known or hypothetical processes, only explicable by the direct action of God on the human psyche. Under (1) he gives as instances, the raising of Jairus’s daughter, the giving of sight to the blind man at Bethsaida, the cure of blind Bartimæus and the healing of the cripple at Bethesda. In every one of these he suggests there is a definite psychological technique. In view of our account above of Micklem’s work on this there is no need to follow his discussion any further. It is when he comes to speak of classes (2) and (3) that he introduces fresh material. It is true that cures at a distance have not been unknown, he says, but usually there has been, as in clairvoyance or cryptesthesia, some contact, however slight, between healer and patient. Charms and talismans were extensively used in the time of Christ, were blessed by the magician, and passed on to the patients who received them with faith and hope. Contrariwise, there are many cases on record in the annals of witchcraft in which deaths have been brought about by distant suggestion. But in the instances of the Syro-phoenician’s daughter and the centurion’s servant, there is no hint of any such contact. The patients concerned apparently did not even know that an appeal on their behalf had been made to Christ, or that it was successful. Dawson suggests that “the mother might well have been in some sort of telepathic rapport with her daughter, and the centurion with his servant.” “Spiritual laws transcend time and space, and telepathic rapport might have been sufficient with Christ as the Healer.”

This is interesting in view of the work now going on in America on the psi phenomena. But it goes beyond it to some such theory as that of Jung on the collective unconscious. Is the Pauline phrase “in Christ” but the expression in the spiritual sphere of a fact already known in the psychological? Deep down in the primitive levels of the unconscious, is the Christian linked with Christ, as the individual is with racial memories and experience? We need further theological and

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29 See his whole chapter on “Jesus Christ and Healing,” p. 112 ff., to which the above paragraphs are indebted.
31 Mark 8: 22-26.
32 Mark 19: 46-52.
33 John 5: 2 ff.
33a Op. cit., p. 120.
34 Ibid.
psychological investigation into this matter. Dawson has opened a door here through which we need to pass to see what lies beyond.

In class 3 the only instance he adduces is the healing of the ear of the High Priest's servant when Peter struck it off in the garden of Gethsemane. There are critical difficulties about this story. It is doubtful if the view that Luke wrote his Gospel with a medical emphasis is correct or that he used a technical medical terminology. H. J. Cadbury has suggested that there is nothing particularly technical about Luke's vocabulary. His language may be more literary than the other Evangelists but it is not more medical. How much scientific criticism of cases he records may be attributed to Luke is open to much question. Here, apparently, if the story is accepted, we are in a region where the writ of psychological process or natural law does not run. Says Dawson, "it must be remembered that Luke only says, 'Jesus touched his ear and healed him.'" This miracle is surely related to the accounts of the raising from the dead of Lazarus and the widow of Nain's son. God is not imprisoned within His universe, immanent as He undoubtedly is within it. He acts directly upon it as surely we can act upon that part of it that we can affect. Since the greater includes the less, it is difficult to believe that the human will can accomplish that which the Divine Will cannot. We know really so little of what we mean by "natural laws." They are only names we give to observed phenomena and the way in which they apparently work. We cannot prove that cases such as the healing of Malchus's ear, if the literary foundations can be substantiated, are violations of law. Before we do so, we must have mapped out the final frontiers of the universe, a task from which even modern science may well shrink.

Dawson agrees that Christ's healing work was redemptive. He points out that healing in itself has no moral or spiritual value. It was the holy love of God for man that came through in the healing miracles. The sufferer was linked up with "the eternal purpose of salvation," in which the motive was compassion and sympathy, not mere power.

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37 Cf. John 11:38-44.
3. In Dr. Weatherhead's *Psychology, Religion and Healing*, we have the latest investigation by a Christian scholar into spiritual healing. He agrees that there is no evidence in the Gospels that "the cure of physically-caused illness" is excluded, and dismisses most emphatically any idea that the healing miracles were performed to draw attention to the Divinity of Christ. But at the same time "the miracles of Jesus are no more in the same category as modern treatments than the parables of Jesus are in the same category as other stories, and for the same reason. The miracles compel amazement and admiration, but properly regarded they evoke faith and worship, and it was mainly for this reason they were handed down."\(^{41}\)

The Healing Miracles are classified by Weatherhead into a scheme which to a certain extent agrees with that of Dawson, though obviously quite independent of it. First, we have "the cures which involve the mechanism of suggestion," then, those "which involve a more complicated technique," and finally, "cures which involve the influence of a psychic 'atmosphere,' or 'the faith' of people other than the patient."\(^{42}\) He leaves out the healing of Malchus's ear, but apart from that, all the healings are included in the lists. He gives a detailed and most valuable study of each recorded case for which our readers must be referred to the book itself, and, as a result, comes to certain conclusions. He agrees that the "mental mechanisms" our Lord used can sometimes be "identified through our modern psychological knowledge," yet at the same time protests strongly that the healing miracles are in their essential qualities much more than clever psychological treatments. Much of Christ's healing work, he thinks, is "unique." Only as the Church lives its life on the same disciplined plane as He did will it be able to recover the healing ministry lost for so many centuries.\(^{43}\)

He has a fascinating chapter on "Guilt as Causative of Illness,"\(^{44}\) in the course of which it becomes apparent that this great authority also interprets the Healing Miracles as redemptive in purpose. He quotes the story of the paralytic to show how our Lord's healing brought an immediate cure of physical symptoms through the removal of guilt and the sense of forgiveness that such removal brings. "The proper conception of God's

\(^{41}\) Op. cit., p. 49.
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forgiveness . . . is not the cancelling of all the effects of sin, but the restoration of a relationship.” As is succinctly pointed out, this has a connection not only with the doctrine of the Atonement, but also, and more important, with the way in which that doctrine should be interpreted to-day. No man “transfers his guilt to Christ,” but Christ does transfer His Grace to man. This is the divine outgoing in love, sympathy and compassion, which is so manifest as the heart of the healing power of Jesus.

Another point brought out is that healing is mediated through the Christian Community. “Success in healing is not expected from the solitary individual, however saintly, but . . . the powers of the Kingdom are manifested through the fellowship of the whole Church.”45 It is through the discipline of the ecclesia that individuals are conditioned into healers. Not until the life of the present-day Church is lived at a much higher level will the healing power of God be set free to-day as it should be.

One further point: Dr. Weatherhead defines faith throughout in a theological and not purely psychological sense. To quote his definition, which we find particularly satisfying, “Christian faith is the response of the whole man, thinking, feeling and willing, to the impact of God in Christ, by which man comes into a conscious, personal relation with God.”46 Here we have guarded the necessity for the integration of the whole personality through its being lifted into a conscious communion with God. So long as this is emphasised and placed in the centre, the door is shut fast against all magical conceptions of healing on the one side, or purely psychological explainings-away on the other.

It should be said that these few excerpts have failed to do justice to a massively learned book which for years to come is likely to be the standard work on the subject.

To sum up, the three scholars whose writings we have examined agree, in the main, on the following conclusions:—

1. The evidence for the actual historicity of our Lord’s healing miracles is good and cannot be shaken unless the whole superstructure of the Gospels is to be endangered.

2. That the real explanation of them is to be found in Christ Himself, in His unique personality, uniquely integrated, and in the breaking through of God’s original power in Him. It is not

to be found in psychology, though psychological explanations of certain acts of healing may be accepted.

3. That “faith” in healing is faith not in healing but in the living God, the lifting of the whole psyche into fellowship with Him. All infer a difference in esse between theological and psychological faith. As Weatherhead puts it, it is possible “to have faith without healing and healing without faith.”

4. The purpose of the healing miracles was redemptive, the restoring of the broken fellowship of the sufferer with God. Christian healing, they all suggest, is spiritually conditioned. All that mattered to Jesus in healing was that a man’s inner state should keep him in harmony with God. It may be said that it is precisely because this is forgotten that we get so much eccentricity in this field. The belief that God has cured something previously deemed incurable may engender such a sense of being specially chosen by Him, that the egoism which is at the root of many disorders is accentuated rather than diminished. Then character defects replace previous physical symptoms. All this can be avoided if the emphasis on redemption and communion is sustained.

5. That a psychological “technique” was at times deliberately used by our Lord. His healings are not violations of natural law, for, even where they pass beyond technique, they are determined by God’s knowledge of His own universe.

6. That healing is often set in the midst of the Community of the Church. Its effectiveness is determined by the disciplined level of the community life.

7. They all agree that there is evidence that our Lord’s cures dealt with organic as well as psychogenic cases.

It is as well to say that the New Testament makes it clear that not all sufferers were healed. Weatherhead suggests that it may be that Jesus did not cure all who were brought to Him, and it may be that in certain cases He saw a patient more than once. Micklem does not agree with this. But whether or not this is true, it remains evident that healing took place under certain conditions and laws, at the meaning of which we are only just beginning to guess.

It remains to examine the way in which the above conclusions or principles, as perhaps they may be deemed, fit into the current

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psychological situation as revealed by present-day psychiatry. Three factors amongst others operate so often in many a
“nervous breakdown” to-day, guilt, loneliness, and fear.

All schools of psychological thought agree that guilt, both
conscious and unconscious, is one of the ever present factors in
the human situation at the present time. Freud has much to
say about the superego, the moral standard imposed upon the
personality through fear, as contrasted with the ego ideal, the
aim and object that the self freely chooses of its own accord.
He points out how the id, the repository of the primitive a-moral
savage in man, opposes the superego. The battle between the
superego and the id so often sets up the guilt which lies behind
many a remote illness. Jung talks about guilt, though from a
different angle. A man may be so smitten with fear of his
unconscious forces, that they have a repressive effect on his
personality. When in the attempt to extend personality the
unconscious becomes conscious, a heavy burden is often placed
upon the psyche. There is a contrast of sharp opposites and a
feeling of inner division, too often resulting in guilt.49 He has
much to say about the value of confession in this connexion.
Karen Horney points out how the unconscious guilt may often
lead to suffering as self-punishment,50 analogous to Freud’s
“death instinct,” while a recent work on inferiority suggests
that “feelings of minus value” often originate in a sense of
guilt.51 Often, all psychiatrists agree, this unconscious guilt is
a frequent cause of psychogenic illness. Some time ago (the
actors in this drama are now both dead so it may be men-
tioned), a man was sent to the present writer who every June
suffered from a painful skin rash that for weeks incapacitated him
from work. It had not yielded to patient and skilful medical
care. It was found that one June years before, when he had been
a young man, he had seduced a girl. No “consequences” had
followed. Neither had said anything to his or her people.
They had parted and not seen each other often afterwards and
had finally drifted away from friendship altogether. But,
brought up strictly as he had been, the guilt set up had gone
into the unconscious. Every June, about the time of the

49 Cf. Schaer, Religion and the Cure of Souls in Jung’s Psychology (London,
50 Karen Horney, Neurosis and Human Growth (London, Routledge, 1951),
pp. 230 ff.
seduction, the dermatitis set itself up. When he saw the connexion, lived through the experience again, and passing from psychology to religion, on his knees accepted the forgiveness of God, the trouble cleared up, and, for several years after, June passed without the disease breaking out. It is the message of redemption in Christ that alone can speak adequately to the experience of guilt. Healing must redeem the soul before it can deal with the body or even the mind. The deep sources of the spirit, where man makes contact with the living God, must be reached and affected. Redemption, forgiveness, restore the relationship of the soul with God. The consequences of sin may remain in body, mind or soul, either separately or together, but their nature is changed and their effect on the personality is altered.52

Loneliness is another factor in the psychogenic field to-day with which modern conditions often make it very difficult to cope. The growth of the complexity of the universe has, as we all know, dwarfed the significance of the individual man. At the heart of many a neurosis lies an intense loneliness. The neurotic feels that no one has ever passed his way before or suffered as he has suffered. He stands in a place of desolation where no voice answers when he calls and no hand touches his own. So many people in our modern civilization have been deprived of love. As little children they knew neither affection, good will, nor appreciation, and nothing as they have grown up into adult life ever makes up to them for the loss. The present writer has seen over 2,000 cases of marriage break down in the course of the years. Well over half of these, 65 per cent., are the children of broken homes. People deprived of love as children grow up to be unable to make a proper heterosexual adjustment. Too often, their unconscious is motivated by hate. Behind the façade of aggression, one finds a little frightened child peering out at life. Here again is a fruitful cause of much illness. Some of it is just an appeal for love, an attempt to get from an obscure place in the wings to the centre of the stage. Self-immolation, too, plays its part, whilst hate and hostility set up toxins in the blood. Many cases of sexual difficulty that have come under the writer's notice trace back to the deprivation of love and the intense inner loneliness that it brings. Here again the healing of the Christian message may play a decisive part.

52 Cf. Weatherhead, op. cit., p 241 ff., especially for the influence of this on the Doctrine of the Atonement.
“Lo, I am with you always, even to the end of the world.” During the writer’s ministry in a London Church a girl, sick and ill, at the end of her resources, stood one wintry Sunday evening for a long time on Hammersmith Bridge, debating whether or not she should throw herself into the river. With a shrug she finally turned away and obeying some impulse slipped into the warmth of the back pew of an old London Church. She has told the writer what happened to her that night. She felt as though a great Tender Presence came into her life, transforming her whole being. She is not an imaginative person. Further, that “Presence” has remained with her for years since then. Her whole health and outlook upon life has improved and remained so. It is Jesus who speaks to the individual in our masses of population. Each life was worth His healing and dying when He was on earth. It is so still. There is no more integrating factor in personality than an individual consciousness of the love of God. 53

Finally, there is fear as another dominating factor in the psychological situation. Anxiety neuroses are on the increase and produce many physical troubles. Conversion hysteria may be behind blindness or paralysis. So-called “neurasthenia” may be due to the fact that the patient is using up so much psychic energy in unconscious repression that he has little left with which to face the practical duties of life. According to Freud fear may stem from the Oedipus conflict, according to Adler from insufficient satisfaction of the will to power, while Pfister derives it from some damming of the impulse to love. It can be caused by an excess as well as by a deficiency of love, from claims of love which arise and cannot be met. Injuries to self-love are conspicuous as causes of fear. In a great majority of investigations into fear, search into motives reveals inhibitions of love, and amongst these dammings of self-love play a considerable part. 54 Once again, the healing work of Christ speaks to the situation. No one needs to be reminded how often the message “Fear not” peals through the Gospels. But “faith” as contact with a living Person, the healing of the group life in which that “faith” is so often set, and the deep peace which a real experience of God brings, minister to this sadness as no

other factor in modern life does. It is at this point that the intercession of people united in love for God and their fellow-men can often play an effective part, as has already been said. The time has gone by when the connexion between intercession for the sick and cures of their sickness can be dismissed as always due to coincidence on the one side or faulty diagnosis on the other. That prayer does not always achieve a cure or that we do not understand how it works, is no argument against it. Do scientists always understand the processes with which they deal? A great deal of research is needed into this subject, but that prayer is valid in this connexion is supported now by such a wealth of evidence that must be taken into account. Not least is it useful in banishing the fear that lies at the root of so much illness.

Thus the conclusions of New Testament scholarship on the healing miracles of our Lord are seen to meet the needs of the psychological situation as revealed by psychiatry to-day. There is need for the revival of the ancient Christian ministry of healing allied with all the resources of modern medical knowledge and skill. In the new alliance that is slowly being forged between the Church and medicine lies a great hope for the enduring welfare of humanity at large.

DISCUSSION.

The Chairman (Dr. WHITE) said: We are grateful to Mr. Crowlesmith for his paper, particularly in view of the increasing interest shown recently in the subject of Divine Healing.

Mr. Crowlesmith makes an important point when he states that "the healing miracles cannot be elided from the Synoptics without tearing them to pieces." A rejection of the miraculous element in the Gospel records must logically lead to a rejection of belief in the Resurrection.

Our author points out the distinction between faith in healing and faith in the living God. The history of various methods of healing compels us to admit that healing has occurred in an apparently miraculous way apart from faith in God. Hypnotism and powerful authoritative suggestion have brought about healing. Such methods of healing, however, whilst they may cure psychogenic or possibly even organic diseases, do not enrich the personality. Where faith in God is present, the resultant healing brings enrichment. The
sufferer is made whole, healed in spirit as well as in body, and brought into closer fellowship with God.

Mr. Crowlesmith refers to the prevailing belief in demon possession in the time of our Lord. This opens up a large subject. There appears to be some evidence for the existence of demon possession in these days. Some of the phenomena described by missionaries in the Far East are very suggestive of demon possession. In my own practice I have met with at least two cases where the patient appeared to be possessed and directed by an alien evil spirit. In both cases the patient had attended spiritualist séances, and had indulged in automatic writing with the planchette. It seems to me to be unsound to suppose that Jesus was limited by the beliefs of His time when He professed to cast out demons, or that belief in demon possession was nothing more than a superstition now outworn.

I am very interested in the reference to Jung’s theory of the collective unconscious in relation to certain Christian doctrines. I agree with Mr. Crowlesmith that there is room for further investigation along these lines. Jung’s own theory needs clarification. For example, does his theory refer only to common inherited mental characteristics, or does it imply some such concept as Emerson’s “Over Soul” or Plato’s realm of Ideas?

In his references to the psychology of guilt, both in relation to the doctrine of the Atonement, and in relation to the production of psychogenic illness, Mr. Crowlesmith touches on very delicate and debatable ground. Certain statements in the New Testament seem to suggest that in a sense our guilt was transferred to Christ on the Cross; e.g., “He bare our sins in His own body on the tree,” and “He was made sin for us who knew no sin.” This, however, is a theological subject which I do not propose to pursue.

On the psychological side, the problem of guilt has not, in my opinion, been satisfactorily solved. I do not find in psychology a satisfactory explanation either of its cause or of its cure. Christian doctrine contains answers to both these questions in its declarations concerning man’s spiritual relationship to God.

We have had, in this paper, an interesting summary of the bearing of modern psychology on the miracles of healing. It has surely made it evident to us that there remain many problems, theological, medical and psychological, to be solved in connection with the
miracles of healing recorded in the New Testament, and in relation to the phenomena of faith-healing occurring today.

Mr. B. C. Martin said: I would like to say how much I have appreciated this paper. There is one matter, however, which I think calls for clarification, and that is the relation of the Will of God to disease. On line 14 of page 59 there is a statement which I feel is too wide, viz.: "The will of God for men is seen as health and happiness, not disease." That may be true in that limited sphere of disease which is the result of some psychological maladjustment. But what of that larger sphere where the mind plays little or any part, e.g., contracting pneumonia through exposure, catching scarlet-fever from a patient, or succumbing to influenza during an epidemic? Quite clearly these illnesses cannot always rightly be attributable to the mental or spiritual state of a person. They are to a large extent the physical effect of a physical cause, and can we say that this is not the will of God? The laws of health are God's laws and if these are broken, as they often are, inadvertently or even inevitably, will not the result, viz., disease, usually follow; and is not therefore such disease, in a sense, God's will? The question cannot be disposed of by distinguishing between God's primary and secondary wills, as if all disease proceeded from an evil source, and was sometimes permitted by God, and permitted only.

Actually, there are instances in Scripture where it appears that God brought (not merely permitted) physical suffering upon individuals for disciplinary purposes, e.g., the leprosy of Gehazi (2 Kings 5:27) and the chastening of the Lord mentioned in 1 Cor. 11:29-32 ("For this cause many are weak and sickly among you").

Written Communication.

Mr. E. H. Betts wrote: The only regrettable feature of this paper is its exaggeration of the importance of healing in Christian revelation and early practice.

It is not unqualifiedly true to say that "Acts makes it clear that in the Apostolic age the gift of healing was continued and actively possessed." What is made clear is that it was in rapid diminishment after having played its proper part in the inauguration of the Christian faith. The Apostle Paul, himself too ill to proceed on his missionary journey from Pisidian Antioch, found no miraculous
healing to enable him to complete his plans, but preached in the Galatian cities under the testing disabilities of a grievous sickness (Gal. 4:13, 15). He left Trophimus at Miletus—sick. He needed the cloak for bodily warmth like any ordinary person.

All the miracles recorded in the Gospel of John, are called “signs” (σημεῖα). Not only so: they are commented on by the Apostle John himself as being evidential (John 20:30-31). Further, the early “works of power” wrought by the witnesses of Jesus are stated to be God’s own confirmatory attestation of their spoken word. There is no escaping the note of evidentiality in the Christian miracles.

Moreover, not only were believers called upon, often, to endure sickness and other hardships, but amongst the greatest triumphs of faith we find it recorded, “All these died in faith, not having received the promises.” This endurance and continuance in faith tends to be overshadowed by emphasis on healing. And surely any pressing of miracles of healing which tends to side-track the Christian from this pathway of God-honouring faith is mischievous.

Neither is there one scrap of evidence that early Christian miracle-workers were concerned in the least with “the recognition of non-bodily forces at work in healing” or with the recognition—and much less the use—of auto-suggestion or of such conceptions as the “unconscious.”

The healing which is recorded in Scripture (over and above that which, in its main purpose, was evidential) is intimately interlocked with moral considerations—self-judgment, repentance, humility and return to faith. What accompanies the “prayer of faith” which “shall save the sick” is confession of wrong (Jas. 5:14-16).

Faith brings God in—His will, His power (apart from all study of what may be instrumental means) and His healing, if He see fit, by whatever means. The unsatisfactory feature of most modern movements of healing is the fading out of God and the focusing of attention on the means. Conscience too is seldom brought in. Faith never acts so. Faith rests in God Himself.

**Author’s Reply.**

In relation to what Mr. Martin has to say, I believe the statement that “the primary will of God is never disease” stands true. It
depends on one’s estimate of the character of God. No earthly loving father would ever deliberately will disease for his child. Neither can I conceive of our Heavenly Father doing so. To me the argument is as simple as that.

Much disease is not the result of individual wrongdoing but rather the fault of the community. The individual is caught in the web of the body politic. God does not will the results of the social wrongdoing. They follow as inevitable consequences, apart from His will. He has made a world in which these things happen because it is the only way in which personality is ever to grow. Under these conditions His secondary will is that we should accept the consequences and seek to change and transform the social sin from which they spring. I believe the distinction between primary and secondary wills in this connexion is entirely valid.

In reply to Mr. Betts, I do not believe the paper exaggerates the importance of healing in the early Church or in Christian revelation at all. Confessedly, it is only one aspect of the Gospel message, but if it is taken as symbolic of the healing and forgiveness of the whole personality—body, mind and spirit—it is entirely supported by the Gospels.

I am in entire agreement with Dr. White’s comment.