

# CHARISMATIC HEALING:

A Phenomenological Study of Spiritual Healing  
in Ottawa, Canada

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Thesis submitted to the  
Faculty of Graduate and Postdoctoral Studies  
in partial fulfilment of the requirements  
for a Master's degree in Religious Studies

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University of Ottawa,  
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## ACKNOWLEDGEMENTS

I am fortunate to have received financial support from the University of Ottawa and from the Social Sciences and Humanities Research Council in the form of a Joseph Armand Bombardier (CGS) scholarship during my Master's degree.

Additionally, I am grateful for the influential guidance and invaluable feedback that I have received from my thesis supervisor, Dr. Anne Vallely. Dr. Vallely has been a long-standing source of inspiration and encouragement with regard to my understanding of religious phenomena in general; I feel blessed to have learned from/through/with her during these past few years. I have also had the privilege to work alongside many brilliant, caring professors and colleagues over the years. (All things considered, the fact that there are too many of you to name is a rather good sign!) I have learned much from all of you; your helpful critiquing and careful refining of my ideas have been instrumental to the completion of this thesis. I must also express my deep gratitude to my friends and family for their abundant love and support, and for taking my existential crises in stride.

Lastly, to the individuals who shared their incredible experiences of healing with me: this project was impossible apart from you. Thank you for opening yourselves to me; for sharing your thoughts, stories, and memories, and for welcoming me into your hearts and homes. Your stories are transformative; I hope I show that here.

**ABSTRACT**

Spiritual healing is a ubiquitous and fundamental part of Charismatic Christianity; it is indelibly linked to understandings of God, society, and individual identity. And yet, the phenomenon of spiritual healing—particularly its expression within North American, Abrahamic traditions—has been understudied within academia. In this thesis, I take a phenomenological approach in order to better comprehend the meaning-making process behind spiritual healing rituals amongst Charismatic Protestant Christians in Ottawa, Canada. Through a small-scale, local ethnographic study in Ottawa in which I conducted participant observation and several in-depth interviews, I explore Charismatic Christianity through the lens of lived religion. Based on a series of focused case studies, I conclude that the Charismatic cosmological worldview (one in which cosmic-wide restoration is emphasised) correlates with, and contributes to, the Charismatic emphasis on individual healing.

**KEY WORDS**

Spiritual healing, Charismatic, Protestant, Christian, lived religion, phenomenology, cultural anthropology, ethnography, Ottawa, Canada

## A NOTE ON COMPOSITIONAL TECHNIQUE

There are two brief points about my compositional technique that I wish to draw the reader's attention to:

First, I make use of italics as a way of conveying narrative elements, such as indicating a lapse in the temporal period or a verbal emphasis. Unless otherwise indicated, all italicised emphases that are within direct quotations are reflective of the way an individual spoke rather than my own emphasis.

Second, I often place emic terms and phrases (such as "word of knowledge," "led by the spirit" "prophecy," "heart issues," etc.) within quotation marks. The use of quotation marks is not a comment of my view on the veracity of these terms, nor is it some sort of textual tongue-in-cheek of whether what is being claimed by Charismatics is ontologically true. Rather, it is to emphasise that these specific terms were used verbatim either throughout interviews or during my participant observation research. When not directly quoting from my research participants or the academic literature, I have strived to keep my use of other quotation marks to a minimum.

## INTRODUCTION

The front door was ajar as I approached it. Not knowing what to do, I knocked, inadvertently pushing it open further. “Hello??” I called out as I stepped tentatively through the doorframe, entering the home. Seconds after I stepped inside, a woman’s head popped around the banister. “Hello! You found it! You’ve made it!” I smiled and nodded, and we made our introductions. Soraya<sup>1</sup> was tall, had dark hair, and piercing light blue eyes—piercing yet kind, and inviting. She offered me a cup of tea (which I refused—I was not about to down a diuretic before getting on a massage table for ninety minutes) and then beckoned me toward her massage room.

Soraya had contacted me one month earlier, after I sent out an initial message saying that I had heard she had some experiences with spiritual healing and that, if she was willing to share, I was interested in meeting with her. Soraya had replied not only indicating her willingness to speak with me, but to tell me that she had felt “led by the Holy Spirit” (a phrase I would hear time and time again while conversing with Charismatics) to offer me a healing massage. She motioned to the massage bed, which had already been prepped with the same formation of towels, sheets, and pillows that I’d seen in every physiotherapy or massage clinic I’d previously received treatment in. “Take off your jewellery and all of your clothes,” she paused, “you can keep your underpants on. Lay under this sheet—” she motioned to the bed, pulling up the sheet so I could see it, “—with your face down in the pillow. I’ll come back inside after you’re ready.” And then she left.

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<sup>1</sup> Pseudonyms are used only when indicated; if a pseudonym is not indicated, the individual’s first name is being used with his or her expressed consent.

After a brief contemplation of whether I was breaching some protocol from my research ethics board, I stripped down and slipped under the sheets. With the covering sheet pulled high up to my neck, my eyes wandered around the room as I waited for Soraya to re-enter. I took note of my surroundings and tried to find ways to remember the details I observed: the pocket-sized prayer books stacked on the bottom shelf of the glass table; the collection of feel-good phrases and scriptural sayings that had been transformed into artwork and mounted on the walls; “God grant me the serenity...” stitched in needlepoint. On the table near the massage bed, there was a bottle of oil that resembled the one I had seen my regular massage therapist use. There was also a second bottle, which was significantly smaller than the first, labeled “Anointing Oil: for prayer.” This bottle (as I found out only upon further inspection afterward) was specified as “Oil of Gladness” and contained both frankincense and myrrh—no doubt influenced strongly from the biblical connotations of these substances. I later found identical 4oz bottles online for \$34.

When Soraya re-entered the room she took a moment to put on a musical CD (“Relaxation for Women”) and then she began. She drew back the sheet and laid both hands on my back, praying out loud and thanking God for creating this “beautiful temple” (me) and for knowing “all the rooms” within it. She asked the Holy Spirit to guide her as she performed the ninety-minute massage, to give her wisdom and discernment about which “rooms” of my “temple” needed healing, and she asked that ultimately it would be “the hands of God,” not her own hands, that I felt upon me. As she said these words I became instantly more aware of the heat that her hands produced as they made contact with my own skin. After this prayer was said—and with the added exception of a brief “please turn over” part way through—no words were exchanged between us until the end of the massage.

When Soraya had finished, she quietly spoke my name and gave me a thumbs up with a

big smile. I smiled sleepily in return, and she once again left the room, telling me to take my time in getting changed. I stood up and leisurely looked around the room. My limbs were like liquid; the music still played softly in the background, and I felt drunk with relaxation. My whole body was saturated in what I'm sure was a combination of massage oil and anointing oil; I wiped my face and body with the towel that I had been laying on. Shortly after I re-dressed, Soraya re-entered the room, holding out a glass of water that I gladly took from her. Ensuring I consumed an abundance of water was very important to do after such a massage, she informed me.

Soraya and I had agreed in advance that we would set up a second, separate, time to meet—both for me to hear her experiences in more detail, but also for her to share with me what “God told her” during my massage. But there and then she began to tell me, “[...]The Lord told me it was heaviest over your shoulders and head. Because it's like you're carrying things...very heavy things... you've been bearing the weight of something very troublesome on you but it's gone now, I wiped it off—gone in the name of Jesus. So that was along your high back and your shoulders. But also there was something around your neck and head—it was like a dark cloud. But it's gone now too—I pushed it up.”

Though I was still a bit unsure about what exactly “it” was, I could recall the moment, struck as I was by what I thought was a somewhat unusual massage technique. Starting at the base of my spine, Soraya had slowly and firmly pushed her thumbs up toward my neck and, as she reached my cervical spine, she continued to press her fingers upward. She did this three times. Following this, she had used her fingers to apply pressure to different areas of my face. Referring to this, she explained, “The Lord Jesus told me where all of the spiritual doors were for things to escape from—and so they left. So you know when I pushed along your head and your face? Those were the doors. And then, of course, we closed them and sealed them [...] But those

blockages are gone—all gone! I wiped them off and pushed them up. Gone in the name of Jesus!”

I received Soraya’s message without stating my own thoughts or voicing any of my many questions—instead, I thanked her for her generosity, and agreed to be in touch to set up a time to speak in more detail about her experiences with spiritual healing. And then I left.

### **0.1 Development of Project**

My research explores spiritual healing as it is spoken of and practiced by Charismatic Protestants in Ottawa, Canada. Broadly speaking, Charismatic Christians believe in spiritual gifts (*charismas*) of the Holy Spirit that are in turn channelled through human agency. This belief directly informs Charismatic understandings of spiritual healing. Charismatics experience different types of spiritual healing, some of which defy standard etiological explanation. Among other things, recipients of spiritual healing may claim: a sense of unexplained euphoria; the alleviation of physical pain and/or mental illness; the biological [re]construction of properly-functioning limbs, organs, and sensory perceptions; and “deliverance” from demonic spirits. As will be elaborated upon throughout this work, many of my research participants emphasised “holistic healing”—that is, a near-simultaneous healing of body, mind, and spirit. I do not aim to validate these claims. Rather, I focus on the experience of spiritual healing, and seek to explore the role of spiritual healing in the Charismatic Protestant understanding of the sacred. I do not aim to do this through considering official doctrinal positions on healing (as has been popular in the study of Catholic Charismatic healing due to the readily-available nature of Catholic documents regarding the evaluation of miracles), but rather through considering the particular stories of individuals.<sup>2</sup>

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<sup>2</sup> See Randall Sullivan, *The Miracle Detective* (New York: Grove Press, 2004) for an overview of the way in which the Catholic Church investigates miracles.

This thesis develops from an ethnographically-informed study of spiritual healing among Charismatic Protestant Christians; it is based on roughly one year of localized fieldwork—that is, anthropological fieldwork conducted in the city I was already living in (Ottawa, Canada).

Throughout 2013-2015, I held individual interviews and focus group sessions, and conducted participant observation in a number of facets— including observing individual spiritual healing sessions, and attending spiritual healing retreats in both observing and participating capacities.

When I first began my research, I originally planned to focus on one particular internationally-renowned centre whose mandate is to instruct and offer spiritual healing. I met with the director of the Ontario branch to explain the nature of my research and to discuss with him what might be an acceptable way for me to go about inviting people to speak with me. He was very straight forward with me, telling me that my research seemed interesting enough but that he was more personally interested in furthering my own spiritual journey of healing, rather than having me [only] learn about the journeys of others. This is a rather common occurrence within anthropological research. In anthropology—particularly during research conducted by anthropologists who advocate for being an “observing participant” in addition to being a “participant observer”—it is generally accepted that one’s active participation in the rituals and acts of the research community often leads to a greater depth of understanding. However, as was certainly the case in my experience, the research community additionally invites the anthropologist to participate with the community on the community’s own terms—and, in doing so, places the anthropologist in the community’s own conceptual framework. The anthropologist then inhabits two worlds simultaneously—the first in which lies the origin of their academic inquiry; the second in which they’ve been placed into by the research community. Often, these worlds collide, and the line which once seemed to delineate them so clearly becomes remarkably

blurred.<sup>3</sup>

### **i. Researcher Participation**

In my own case, my participation at a healing retreat—and even the subsequent interviews that both the director and I expected would emerge from this—was not simply seen by my research community as a means for me to gain a deeper and more accurate understanding of Charismatic healing so that I could produce an adequate ethnographic portrait of the community. Rather, the director saw this as a way to expose me to a depth of healing that would in turn evoke my own experience of healing. In response to his rather blunt suggestion that I “pursue my own healing,” I applied to attend a “group healing retreat” through the centre. The three-day, free-of-charge, intensive retreat included group teaching sessions focusing on the biblical principles upon which the healing methodology was based, times of musical worship, shared meals, individual healing sessions, and individual prayer/reflection time; I partook in all of this as best as I knew how.

In addition to providing the kind of insight that is available through participant observation, I believe that my active participation in certain healing rituals helped establish my acceptance into the community. This is certainly not unique to my own research—perhaps one of the most frequently-cited instances of this within anthropology is Clifford Geertz’ participation in watching an [illegal] Balinese cockfight; Geertz and his wife found that their decision to flee the police (along with the locals of their research community) led to “a sudden and unusually complete acceptance into a society extremely difficult for outsiders to penetrate.”<sup>4</sup> Similarly, I

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<sup>3</sup> See Karen McCarthy Brown, *Mama Lola: A Vodou Priestess in Brooklyn* (Berkeley, LA: University of California Press, 1991); Sarah Caldwell, *Oh Terrifying Mother: Sexuality, Violence, and Worship of the Goddess Kali* (Oxford: Oxford University Press, 2006); and Edith Turner, “The Reality of Spirits” (2003) as three excellent examples in which the anthropologist becomes rather intricately wrapped up in the research.

<sup>4</sup> Clifford Geertz, “Deep Play: Notes on the Balinese Cockfight” in *The Interpretation of Cultures: Selected Essays*, ed. Clifford Geertz. (New York: Basic Books, 1973), 416.

found that my involvement with particular healing rituals established a certain depth of acceptance by my research participants.<sup>5</sup>

Additionally, the actual content of my interviews was inarguably formed and informed by my experiences at these healing retreats. Since almost all of my research participants had attended one or more of a near-identical healing retreat (I used a “snowball” technique in which my first research participants were all directly associated with the healing retreat that I had attended), such retreats were often brought up by individuals during the interview. When this happened, I drew from my own understanding of the content of the retreat to formulate my questions. I did not use a rigid questionnaire for my interviews and not all of my research participants were asked identical questions. Rather, I began each interview by asking individuals to share a story from their life that, to them, provides an example of a spiritual healing. I then used their stories as springboards to ask other questions on broader thematic topics, such as individual faith, the limits (if any) of physical healing, demonology, the nature of God, etc.

During my interviews, it was not uncommon for individuals to give lengthy responses, to share their stories freely, and to lead the direction of the conversation. I attribute this to the fact that many evangelical Christians are taught to “share their testimony” as a way of “giving glory to God.” Specifically in regard to their stories of healing, I found that Charismatics were eager to share their experiences as a way of ensuring that God was “rightly glorified”—some individuals even expressed a fear that their healing might be “taken away” from them if they did not give

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<sup>5</sup> I am aware of the criticisms within anthropology (and, certainly, outside the discipline) of Geertz’ portrayal of his fieldwork at the Balinese cockfight. In particular, in “Hermes’ Dilemma,” Vincent Crapanzano (1986) critiques Geertz for using certain story-telling features to emphasise, first, his “invisibleness” among the Balinese and, second, his full-on embrace by the community. Crapanzano speculates that Geertz intentionally crafts his narrative so to over-emphasise this, and argues that Geertz takes on “phenomenological and hermeneutical pretensions” while offering “no understanding of the native from the native’s point of view [but] only constructs understanding of the constructed native’s constructed point of view” (p. 74). In spite of these criticisms, Geertz’ narrative effectively portrays the process of an anthropologist becoming increasingly accepted by the community based on his or her direct participation in certain community activities.

God the proper glory. The way one of my interviewees, Anna<sup>6</sup>, explained it to me was as follows: “We have to be humble. I always pray, ‘Lord, keep me humble,’ you know? Because God gives us all this that we have in our lives and we *have* to be thankful and give Him all the praise and glory. We are only receiving any of this healing because of Him.” Charismatics further emphasise the power of testimony by explaining that “Satan’s power is in secrecy” and once individuals “bring their stories [of struggle and of healing] into the light,” then there will be an automatic sense of freedom.<sup>7</sup>

Although the bulk of my own participation occurred during the group retreats, I also, from time to time, was offered to receive different forms of individual, private spiritual healing from some of my research participants—this is what happened with Soraya. I do not refer at-length to my own experiences within this work, but I believe it is important to acknowledge the way that my participation in individual healing sessions, much like my participation at the group healing retreat, has shaped my research. In some ways, my participation was a learning device used to better understand what people later explained to me during interviews—such as the way it feels when an individual lays hands on you and prays for the Holy Spirit to surge you with His healing power and love. Of course, I cannot claim that I felt what my informants felt, but I am confident that my own experiences helped me to better formulate coherent questions during our interviews.<sup>8</sup>

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<sup>6</sup> Pseudonym used.

<sup>7</sup> This sentiment was expressed during my first focus group session, and there was a general consensus amongst the group of five women.

<sup>8</sup> While conducting research on *Kali* worship in Kerala, Sarah Caldwell (1999) recognizes the controversies surrounding researcher authority and effectively reifying the “us/them” divide, but she seeks to explore the possibility of acquiring emic knowledge in an experiential way. She affirms, “if culture is embodied, code-transactional, shared and bodily, then by entering into it in all these ways the culture enters the ethnographer and reveals itself in her own experience” (p. 278). Caldwell’s inclusions of her own journal entries allow the reader to track with elements of Caldwell’s personal journey throughout the research process. Her preliminary entries signify her boredom (and, at times disappointment) with the rituals of her research community, but she gradually moves toward a final sense of awe. Caldwell never directly testifies to experiencing a spiritual experience first hand, but the

Additionally, some of my research participants were quick to ask me to share my own experiences with things like prayer, prophecy, physical healing, etc. (all of which are standard components of Charismatic healing, and which I will return to) before they went on to disclose certain details of their own experiences. Though I had not anticipated the extent to which people would ask me about my own experiences and beliefs, it was not particularly difficult for me to formulate honest, thoughtful answers about my own experiences with this—since I come from a Christian tradition in which many of these beliefs/practices are widely accepted. For example, it was fairly easy for me to respond when people asked me to share my experiences with and/or thoughts about things such as prayer and prophecy. Additionally, during (and leading up to) my research, many of my research participants offered different forms of spiritual healing to me, and I found I was often able to draw from these experiences in my interviews. The healing massage that Soraya gave me was one of these experiences.

## **ii. What is Spiritual Healing?**

Not all of my research participants who practiced spiritual healing were in the business of giving ninety-minute massages. In fact, as far as I learned of, Soraya was the only one whose spiritual healing rituals took the primary form of physical touch. Indeed, rather than following a singular and uniform manner, the spiritual healing practices of my research participants ranged from physical massage, the use of pre-written prayers which were “declared” over an individual with “the authority of Christ,” anointing with oil, long term prayer counselling, attending secular psychiatry sessions alongside the supplicant, “random evangelism healings” (i.e. meeting a stranger on the street corner and “feeling led” to pray for his or her healing), the laying on of hands, the use of therapeutic artwork, and even “binding down demons” through text messages

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inclusion of her journal entries in the final product of her ethnography acts as an effective method of “bridging the gap” between (what were formerly) radically different worldviews without relying exclusively on a reductionist analysis.

or via Facebook chat. The details of some of these procedures will be elaborated upon in chapter three.

Certain components of some of these healing processes are more easily comparable than others with secular forms of healing such as therapeutic counselling or registered massage therapy. Indeed, if one did not know that Soraya was praying continuously throughout the ninety-minute procedure—asking God to guide her hands, and also hearing ongoing revelation from the Holy Spirit (this will be returned to in chapter three)—one might easily mistake Soraya’s practice of spiritual healing as secular Registered Massage Therapy. But, in spite of these sometimes striking similarities, the practices of the individuals whom I spoke with are all understood as ultimately different from secular models of healing—they are distinctly *spiritual* efforts of healing.

### **iii. Defining Spiritual Healing**

A more-refined portrait of how spiritual healing is understood for Charismatics will be presented throughout this thesis, for both words in the term (“spiritual” and “healing”) must be adequately nuanced in order to speak to the contemporary Charismatic context. But, for the time being, I offer a notably-generic and purposefully-broad definition of spiritual healing: simply put, *spiritual healing is a movement toward health/wholeness that is inseparable from one’s spiritual belief system.* Though this definition varies significantly depending on religio-cultural contexts, there are two broad categories of spiritual healing: (1) physical healing in which spiritual practices play a role; (2) emotional/psychological or other “spiritual” healing which occurs at a non-physical level—namely, “inner healing” and “deliverance ministry”. For many of the Charismatic Protestants I spoke with, these two types of healing were integrally connected,

because Charismatics understand individuals to be comprised of a tri-part self: body, soul and spirit.

Although Charismatics emphasised the intertwined nature of these three “types” of healing, their distinctions can be broadly identified as follows: firstly, and perhaps the most straight forward, physical healing is targeted at illnesses or physical ailments that could be equally identified by someone outside of the community (i.e. a medical doctor) as by someone inside. For example, Charismatics might pray for *physical healing* if an individual’s limbs were mismatched in length—limb-lengthening is a common claim within Charismatic healing circles. Physical healing might also be invoked for illnesses such as cancer, infertility, broken bones, and even the common cold. Secondly, *inner healing* is understood to target emotional, psychological, or other kinds of “spiritual” injuries which are understood to have occurred to the soul and/or spirit at any point in the individual’s lifetime. Many Charismatics believe that individuals can experience “inner trauma” from the moment of conception onward, and so inner-healing involves a chronological working through of the individual’s life experiences from the time they were in their mother’s womb until the present.<sup>9</sup> These traumas range from aspects such as rejection by parents or other authority figures, physical accidents or other undesirable medical conditions, and a number of other things. Thirdly, *deliverance ministry* is based on a very similar conceptual foundation as inner healing, but it insinuates an individual’s “deliverance” from evil spirits. While inner healing might be addressed by asking Jesus and/or the Holy Spirit to “fill” an individual and “heal” his/her wounds, deliverance ministry necessitates first “binding down” and “casting out/off”<sup>10</sup> a demonic spirit that has, through one way or another, has been able to

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<sup>9</sup> This same emphasis (from the moment of the conception onward) was noted by Thomas Csordas, *The Sacred Self* (1994) in his phenomenological study of spiritual healing in Charismatic Catholic communities.

<sup>10</sup> This distinction between “casting out” and “casting off” was particularly important to a number of the individuals I spoke with. Some Charismatics emphasise that “a believer cannot be *possessed*”, and so they explain that demons /

“attach” itself to the individual. Charismatics often claim to *feel* the demonic leaving in a very tangible sense—one woman, Anna, spoke of feeling “physically weak” during the process of it leaving and “lighter” once the spirit had “lifted off and left.” These three types of (or, approaches to) holistic healing are elaborated upon in chapter three.

## **0.2 Theoretical Framework and Methodological Approach**

### **i. Embodiment**

For my research participants, the corporeal body is the site of spiritual healing.<sup>11</sup> This was true whether the particular type of healing was physical healing, inner healing, or deliverance ministry—or any combination of the three. Although some elements of healing were more concretely explained in terms of the body than others (for example, physical healing wherein a limb or an organ begins to function properly, or healing through deliverance wherein the demonic is often said to “exit” the individual through a tangible method, such as a flicker in the eyes, belching, or vomiting), all types of healing ultimately play out in the individual’s body. Even in “inner healing” where the locus of healing is understood to affect the individual’s spirit and soul (though, notably, even this is often linked to both physical healing and deliverance ministry due to the Charismatic doctrine of an intertwined, tri-part self), individuals’ corporeal bodies are an integral part of all Charismatic healing processes. The re-visitation of memories, prayer-counselling, the use of mental images, physical touch, spoken-aloud prayers—to name only a few—are all used by both the healer and the supplicant in the process of inner healing; these each take place in the body.

The individual body can then be seen (and, indeed, is here being treated) as a site where spiritual healing occurs. More specifically, it is through and with an individual’s body that she or

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evil spirits do not need to be cast *out*, only cast *off*. However, the intricacies of this belief were not hold unanimously, and many seemed to use the terms interchangeably.

<sup>11</sup> See also the work of Anthony Synnott, *The Body Social: Symbolism, Self and Society* (London: Routledge, 1993).

he experiences—and subsequently conceptualises these experiences as—spiritual healing. In applying this “embodied” framework to Charismatic healing, I draw methodologically and conceptually from Thomas Csordas, whose own work is a phenomenological study of Charismatic Healing amongst Catholic communities in New England, USA. In turn, Csordas’ work is heavily influenced by the works of Maurice Merleau-Ponty and Pierre Bourdieu. Merleau-Ponty and Bourdieu both looked to the study of “embodiment” as a way of collapsing the dualities that popularised academia at the time of their studies; they found the rigid binaries of these dualities—those of subject-object, and structure-practice, respectively—to be dissatisfactory.<sup>12</sup>

Merleau-Ponty suggests that “the body is our general medium for having a world.”<sup>13</sup> By this, he refers to three things: (1) the body’s innate structures (i.e. the very fact that one possesses “hands, feet, a body,”<sup>14</sup> (2) its particular embodied capacities/limits (i.e. he points out the plain fact that an individual cannot simply walk through a mountain), and (3) the ways that our bodies have been literally and figuratively shaped by our culture (i.e. the shapes that we form when greeting someone—what we do with our hands, the manner in which we position our torso, or the way we move the muscles on our face—correspond to what we have learned within our particular culture). Drawing from this, I argue that, in addition to being the “general medium for having a world,” the Charismatic body is absolutely central to experiencing Charismatic healing. One woman, Olivia<sup>15</sup>, explained, “God closed my eyes [to the drugs that were around me during my initial recovery period], so that I didn’t smell [the drugs], see them, hear them, touch them, or

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<sup>12</sup> Pierre Bourdieu, *Outline of a Theory of Practice* (Cambridge: Cambridge University Press, 1977); Pierre Bourdieu, *Distinction: A Social Critique of the Judgment of Taste* (Cambridge, MA: Harvard University Press, 1984); Maurice Merleau-Ponty, *Phenomenology of Perception* (New York: Routledge, 1962).

<sup>13</sup> Merleau-Ponty, *Phenomenology of Perception*, 146.

<sup>14</sup> *Ibid.*, 440.

<sup>15</sup> Pseudonym used.

know that they were there.” Individuals’ corporeal bodies are central contributors to their greater stories of healing.

### **Culturally-constituted bodies**

Focusing primarily on that which occurs in the individual body—as I shall do throughout this thesis—does not negate the reality that even individuals’ bodies (ritual actions, the mental processing of images, the use of touch, etc.—and the subsequent delineations of what is and is not appropriate in a context of healing) are all culturally constituted. Although I recognise there is much that can be explored with regard to the cultural influences on my research participants’ experiences of spiritual healing, I aim to focus primarily on the experiences had within the individual body (what Merleau-Ponty calls the “pre-objective” and the “subject-object,” and what Csordas refers to simply as “embodiment”) rather than focusing on the cultural backgrounds which form and inform these experiences (what Bourdieu calls the “behavioural environment” and what Cassaniti and Luhrmann have more recently referred to as “cultural kindling”).<sup>16</sup> However, though my focus is on individual bodies and experiences of lived religion, it should be noted that the broader cultural environment of Charismatic Protestant Christianity has an undeniable relationship with individual experiences of healing; I return to this in chapter four.

I should here clarify that what is here being referred to as “the individual body” is inseparable from all the rest that is contained within an individual—namely, for Charismatics, the soul and the spirit. In other words, although Charismatics often make theoretical divides between material and immaterial parts of an individual (i.e. the Charismatic emphasis on the holistic self as “body, soul, and spirit”), these distinctions are largely theoretical; even for

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<sup>16</sup> Julia L. Cassaniti and Tanya Marie Luhrmann, “The Cultural Kindling of Spiritual Experience,” *Current Anthropology*, 55, (2014).

Charismatics, the body, soul, spirit components are not understood as being possible of separation, or separate analysis.<sup>17</sup> My research community repeatedly emphasised to me that the individual self is a holistic, tri-part self.<sup>18</sup> And so, though Charismatics may identify something as taking root in one's soul or spirit (rather than "the body"), the very locus of the problem, the identification of the problem, and the healing process are *all understood as embodied processes*.

### **Why embodiment?**

My goal in focusing on individual embodiment is, in the words of Csordas, to "advance our understanding of a particular practice."<sup>19</sup> I focus on the embodied aspects of Charismatic healing so to try to come to a better understanding of the phenomenon itself.<sup>20</sup>

This is not to say I believe this is the best/only way to study spiritual healing—or any given phenomenon, for that matter. Far from making that claim, I believe that there tend to be several aspects of any topic of study that benefit from multiple, distinct approaches. I think this is particularly true of the study of religious phenomena. Along these same lines, in his discussion of the different frameworks scholars use to interpret religion, William Paden writes, "physicists know that light will be interpreted as waves *or* as particles depending on the type of instrument used for observing."<sup>21</sup> Paden's analogy speaks to the ways in which a scholar's methodology changes his or her understanding of the phenomenon they study; interpretations of the phenomenon of spiritual healing differ depending on the observational/analytical method that is

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<sup>17</sup> Within psychology, neuroscience, and related academic fields, there are extensive debates on this very topic—the "mind/brain divide," among others. See Jeffrey Schwartz' *The Mind and the Brain: Neuroplasticity and the Power of Mental Force* (New York: HarperCollins Publishers, 2002) for an overview of this debate.

<sup>18</sup> Interestingly, there are few examples of the doctrine of the tri-part self that are expressed in the case studies in chapter three, in which I quote several interviews at-length. That is, with a few exceptions, it was rare for people to differentiate between their soul and their spirit when actually describing their stories of healing to me. Yet, these same individuals were careful to, throughout the interview, inform me of the tri-part understanding of the self.

<sup>19</sup> Thomas Csordas, *Body, Meaning, and Healing*. (New York: Palgrave MacMillan, 2002), 78.

<sup>20</sup> Importantly, my goal is NOT that of scientific analysis (I am far from capable of conducting a medical analysis of people's bodies before, during, and after healing treatments) nor am I theologically-driven (I have limited abilities and even less desires to conclude this study with proclamations of what is—or is not—a good, or "doctrinally-sound" approach to spiritual healing.)

<sup>21</sup> William Paden, *Interpreting the Sacred: Ways of Viewing Religion* (Boston: Beacon Press, 1992), 4, emphasis his.

used. Agreeing with Paden, I recognise that any given phenomenon will be interpreted according to the framework and tools used in approaching it.

The academic study of spiritual healing has, I believe, greatly benefited from structural anthropological approaches<sup>22</sup>, psychological approaches<sup>23</sup>, and medical and other types of scientific inquiry<sup>24</sup>—some of these will be returned to in chapter two. It is in noting the inarguable richness that has been contributed by each of these distinct methodological approaches that I believe that a phenomenological approach—that is, an approach which is grounded in embodiment and lived religious experiences—will equally contribute to a richer and more holistic understanding of spiritual healing. Focusing on the phenomenological experiences should not replace the positivist-rationalist and other analytical approaches that have been standard to Euro-American scholarship, but it should complement them, allowing scholars to come to a more complete understanding of the lived aspects of religious traditions.

## ii. Lived Religion

Nuancing this phenomenological approach, I also approach Charismatic expressions of spiritual healing through the lens of lived religion. Although the study of the lived experiences of individuals has long been a component of anthropology (Malinowski emphasised the importance of ethnography in the 1920s), it is a fairly recent trend within the social scientific study of religion at large. In both secular studies of religion as well as theologically-driven studies, there has been a tendency to look at official religious documents and to privilege these accounts of

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<sup>22</sup> Claude Levi-Strauss, *Structural Anthropology* (New York: Basic Books, 1974).

<sup>23</sup> Jerome David Frank and Julia B. Frank, *Persuasion and Healing: A Comparative Study of Psychotherapy*. (3rd Revised ed. Baltimore, MD: Johns Hopkins University Press, 1991); Tanya Luhrmann, *When God Talks Back: Understanding the American Evangelical Relationship with God* (New York: Alfred A. Knopf, 2012); Justin Meggitt, “The historical Jesus and healing: Jesus’ miracles in psychological context” in *Spiritual Healing: Scientific and Religious Perspectives*, ed. Fraser Watts (Cambridge: Cambridge University Press, 2011); Bruce Kinsey, “The Psychodynamics of Spiritual Healing and the Power of Mother Kissing it Better.” in *Spiritual Healing: Scientific and Religious Perspectives*, ed. Fraser Watts. (Cambridge: Cambridge University Press, 2011).

<sup>24</sup> Anne Fadiman, *The Spirit Catches You and You Fall Down* (New York: Farrar, Straus and Giroux, 2011); Candy Gunther Brown, *Testing Prayer: Science and Healing* (Cambridge, Mass: Harvard University Press, 2012).

religion. This scholarly tendency has significant overlap with the *modus operandi* of the Church's longstanding "insistence on monopolistic control" regarding miracles; anything that was not "clearly under the control of the [Church's] hierarchy" was cast aside as illegitimate and unworthy of consideration.<sup>25</sup> Yet, there has been a growing trend within the social scientific study of religion to look outside of institutionalised religion.

While teaching a university class on urban religion in America, Robert Orsi noted that many of his students were shocked—and some quite visibly perturbed—to learn of the way that religious terminology was used to describe the seemingly mundane and everyday practices of the individuals who embarked on a "pilgrimage" to the Bronx Lourdes "grotto."<sup>26</sup> Orsi's students were adamant that "real religion" is experienced within "true sacred sites." Presumably, what was meant by this was that—more often than not—religious practices, religious rituals, and even religious beliefs are expected to occur within the boundary lines of a religious institution. In other words, actions such as being anointed with holy water within the context of a Mass, or gathering water from the Lourdes pilgrimage site can easily be considered "religious" activities...but the acts of, say, filling one's car radiator with Bronx water for protection on the road, or sipping directly from the stream (a stream that, as many at the Bronx grotto recognised, emerged from the same water supply of anywhere else in the city), or scooping Bronx water onto one's own head while making the blessed sign of the Cross were brushed off, were not viewed as "religious" enough to be discussed as "religion." The Bronx grotto was outside the delineated boundary line of official religious institutions, and it therefore did not qualify as "religion."

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<sup>25</sup> Thomas Kselman, *Miracles and Prophecies in Nineteenth Century France* (New Brunswick, NJ: Rutgers University Press, 1983), 141.

<sup>26</sup> Robert Orsi, "Everyday Miracles: The Study of Lived Religion," in *Lived religion in America: Toward a History of Practice*, ed. David Hall. (Princeton, N.J.: Princeton University Press, 1997), 3-18.

Responding to his students' somewhat vehement reactions regarding what precisely constitutes "religion," Orsi concludes that "'religion' is best approached [...] by meeting men and women at this daily task, in all the spaces of their experience." He suggests that the study of religion "entails a fundamental rethinking of what religion is and of what it means to be 'religious.' [...] Religion comes into being in an ongoing, dynamic relationship with the realities of everyday life."<sup>27</sup>

Building on Orsi's work, Meredith McGuire proposes that, in order to understand what is meant by "religion" or by "being religious," we must first focus on "individuals, the experience they consider most important, and the concrete practices that make up their personal religious experience and expression."<sup>28</sup> She suggests that religion, at the individual level, is "an ever-changing, multifaceted, often messy—even contradictory—amalgam of beliefs and practices that are not necessarily those religious institutions consider important."<sup>29</sup>

### **Unique, individual experiences**

Therefore, following the proponents of lived religion, I concentrate this study on the unique *experiences* of individuals rather than attempting to solely understand the professed *belief* system of a religious organisation. To be sure, "belief" and "experience" might be inseparable at the individual level, but it is important to ensure that any questions regarding "belief" are directed at gaining an understanding of the belief of the individual—rather than of a religious institution at large. This individual understanding is what I endeavoured to accomplish throughout the phases of my fieldwork, and is what I will attempt to portray throughout the writing up of this thesis: I explore the individual lived religious experiences of a number of

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<sup>27</sup> Ibid., 7.

<sup>28</sup> Meredith McGuire, *Lived Religion: Faith and Practice in Everyday Life* (Oxford: Oxford University Press, 2008), 4.

<sup>29</sup> Ibid., 4.

Charismatic Protestants who have undergone diverse and varied forms of spiritual healing. This epistemological structure in which “stories make meaning” is indebted to anthropologists like Victor Turner, Ed Bruner, and Clifford Geertz.<sup>30</sup> The individual stories of each research participant contribute to the way that we can understand the meaning-making processes of spiritual healing. Their experiences do not always align perfectly with the official doctrinal viewpoints of the religious institutions they affiliate themselves with—in fact, a number of my research participants expressed significant points of contention between their own worldviews and the professed doctrinal statements of their religious communities and/or churches.

### **General Charismatic culture**

However, even with this contention, there is a sense of community. For Christians, this can be explained theologically by the biblical doctrine of “the body of Christ” (see Romans 12:5; 1 Corinthians 12, among others). In this understanding, diversity—in talents/gifts, in functions, and, arguably, even in belief—is an expected and fundamental part of community. Diversity at the individual level is thought to be necessary to the success of the community at large. And so I want to be clear that, by privileging the particular lived experiences of individuals over the doctrinal belief of an institution, I am not here advocating for the total annihilation of categories, as if there could be no common threads drawn after having recognised the uniqueness of individual experience. To be sure, my research participants self-identify as belonging to a number of categorical labels that could be checked off on a survey: they are “Christian,” “Protestant,” “Charismatic,” etc. And, even though these categories are insufficient in telling us about the intricacies of an individual’s belief system, these broad labels can provide us with a sort of skeletal structure that can then be filled in by the individuals’ intricate belief system. The

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<sup>30</sup> See Victor Turner and Edward Bruner (Eds), *The Anthropology of Experience* (Illinois: University of Illinois Press, 1986) and Clifford Geertz, *The Interpretation of Cultures* (New York: Basic Books, 1973).

broad category of “Charismatic Protestant” is necessary at the point of structural soundness, but it remains rather empty until it is filled with individual stories and experiences. Individual experiences breathe life into the skeleton.

And yet, it is equally true that the intricacies of individuals’ belief systems can give form to the broader categories of “Christian,” “Protestant,” and “Charismatic,” etc. In the words of Merleau-Ponty, “any form of lived experience tends toward a certain generality.”<sup>31</sup> There is a reciprocal “give and take” between the individual and the whole; the unique experiences of individuals of Charismatic Protestants enable us to understand the broader belief system of Charismatic Protestantism. A study of lived religion is not simply a study of doctrinal points which are being lived-out by individuals. Rather, it is a study of a religion that is alive. That is, scholars of lived religion recognise religion to be dynamic and changing. And so I do not focus on individual experiences of spiritual healing merely to “fill in” a pre-existing structural understanding of what is entailed in being a Charismatic Protestant. Rather, I endeavour to allow the stories and experiences of my research participants to shape my understanding of what it means to be a Charismatic Protestant today. To borrow the words of anthropologist Stanley Tambiah, these individual experiences are “particular” stories which can tell us about “the general.”<sup>32</sup>

### **iii. Shared Human Experience**

Throughout the process of this research, I have come to conceptualise my work as touching upon / drawing from three distinct types of “sharing.”

#### **Sharing across cultures and religions**

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<sup>31</sup> Merleau-Ponty, *The Phenomenology of Perception*, 137.

<sup>32</sup> Stanley Tambiah, *Buddhism and the Spirit Cults in North-east Thailand* (Cambridge: Cambridge University Press, 1975).

Firstly, I believe that these particular stories of Charismatic healing can be viewed as a window into a deeper level of shared human experience; they point to (or, perhaps more accurately, glimpse at) a shared human condition. Because (and I suspect that each research participant would be quick to agree with me on at least certain aspects of this claim) as much as the stories shared with me by my research participants are uniquely their own, there is also something distinctly “bigger” about them: they are a part of a greater story. Within the anthropology of religion, the most standardized way of saying this is to recognise that our individual and unique stories can be understood as a part of a shared human experience—they make up a piece, or several pieces, of the “human condition.”<sup>33</sup> The extent of what aspects of “being human” are unequivocally shared across diverse cultural and religious landscapes is important. One particular aspect of this human condition to which I am referring is the shared experience of healing. As suggested by my definition provided above, by “healing” I do not mean to infer something that is bound up in a discourse of medicalisation—that would immediately push out any cultural-religio groups that have not associated themselves with a rather particular form of knowledge production. Rather, the term “healing” here connotes that life-long process in which we struggle, and triumph, and fail, and are wrong, and are wronged, and forgive, and move forward, and waver, and stumble, and fall, and rise, and keep walking. This is the human process of healing.

Charismatics understand their particular healing journeys to be inseparable from the Trinitarian God: they invoke the “healing blood” of Jesus Christ, the “healing power” of the Holy Spirit, and they understand this power to be channelled through people who have made an individual declaration of Christian faith—and, as I learned throughout my interviews, this almost

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<sup>33</sup> Early philosophical speculation of a shared human nature began with Socrates and Aristotle. A well-referenced, more recent work that explores the notion of a shared human condition is Joseph Campbell’s *The Power of Myth* (1991).

always meant a declaration of “Protestant” Christian faith. For Charismatics, healing is one of the “gifts of the Holy Spirit,” and “true healing” is conducted under the authoritative power of Jesus Christ. It is the fact that these components are linked to a broader, spiritual cosmology that makes Charismatic healing “*spiritual* healing.” To be sure, the particulars of the practice of Charismatic healing are inexorably wrapped up in the particulars of the theory of Charismatic theology. But, across diverse religions, cultures, continents, nations, and neighbourhoods, humans all participate in some form of healing.<sup>34</sup>

### **Sharing across disciplines**

Secondly, I hope that this work will contribute to the emergent efforts within academia to recognise those varying degrees of shared human experience which not only transcend the boundaries of cultures and religions, but which also break through the alleged boundary line of “researcher” and “informant.”<sup>35</sup> Robert Orsi explains that his approach to the study of religion is meant to “eliminate the comfort of academic distance and to undermine the confidence of the claims, ‘we are not them’ and ‘they are not us.’”<sup>36</sup> In keeping with Orsi, I am not here condoning or celebrating the particular religious practices of my research participants—but nor am I dismissing them as naïve/disillusioned. Orsi (among others) has criticised scholars of religion for rejecting research participants’ experiences and being all too quick to offer alternate explanations which reduce the experience to explanatory terms that are near-unrecognisable by the very people who claim to have experienced it.

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<sup>34</sup> See McCarthy Brown, *Mama Lola* (1991); Turner, *Among the Healers* (2006), Willis, *Some Spirits Heal, Others Only Dance* (1999); and Hufford and Bucklin, “The Spirit of Spiritual Healing in the United States.” (2006), among others.

<sup>35</sup> See Luhrmann, *When God Talks Back* (2012); Orsi, *Between Heaven and Earth* (2005); Keller, *The Hammer and the Flute* (2002); Holmes-Rodman, “They Told What Happened on the Road” (2004); Throop, “Articulating Experience” (2003); Throop, “Intermediary Varieties of Experience” (2009); Turner, “A Visible Spirit Form in Zambia” (1994); Turner, “Our Lady of Knock” (2011); Northcote, “Objectivity and the Supernormal” (2004); McCarthy Brown, “Mama Lola” (1991); Young and Goulet (eds.), *Being Changed* (1994).

<sup>36</sup> Orsi, *Between Heaven and Earth*, 7.

Some of these alternate explanations have become so commonplace that it is easy to construct theoretical examples: i.e. “God wasn’t ‘present’ as you prayed or when you sang worship music; it’s just that an adrenaline rush combined with a sense of a safe, cohesive community triggered a certain reaction within your limbic system, which *felt* like...” The latter part of such an explanation might very well teach us plenty about the state of one’s brain while she is experiencing what she explains as the presence of God. But the former part (the part which states “God wasn’t”—or, effectively, “God isn’t”—and which often seems to be the driving force behind the entire explanation) does not—and, even scientifically, cannot—dismiss the possibility of the sacred. And, importantly, it teaches us little (if anything) about human thought and behaviour.

We should be open to learn from a rational-empirical study that can describe the state of what can be scientifically-observed during an alleged “mystical experience.” But we should be equally open to listen to a practitioner describe what she felt in her body, and to learn of the cosmological framework in which she situates herself to make sense of it—as this study aims to do. I believe that, through using the methodological tools of phenomenological anthropology, academic analyses can “share” in (or, at least strive to better understand) insider claims of spiritual healing.

### **Sharing across the interview desk**

Lastly, I want to propose that the actual word ‘shared’ is of utmost importance—this time as a verb, rather than an adjective. Firstly, and most straight forwardly, the stories were “shared” with me as in *told to me*—most often in the quasi-formal atmosphere of an interview setting, though sometimes they were told nonchalantly during car-rides or around dining room tables. But another way they are “shared” stories is that, from time to time, my research participants

brought me into their story, establishing me as a character whose presence played a role in their healing journey. I do not at all mean to insinuate that I actively *did* anything to improve the healing journey of my interviewees (though, certainly, I hope I did not do anything to impede it). Rather, somewhat less arrogantly, I acknowledge that the re-telling of their stories to me in our interviews often entailed a re-experiencing of the stories. For better or for worse, I was made a part of their journeys by aspects such as pausing the interviews to allow for moments of prayer, by offering (or, sometimes, inevitably receiving) a hug after a heart-felt sob which occurred during an interview, and by ultimately bearing testimony to their descriptions of the transformations/healings that God has done in their lives. As was explicitly told to me during one interview, by the very act of recounting her stories to me, Marilyn was “re-feeling” and “re-experiencing” the painful moments of her life for which she had sought healing. Although not all the individuals I interviewed spoke of a “re-experiencing” due to the interview process, many emphasised to me that the testimonial act of the interview itself was a way of deepening their healing process. Another woman, Olivia, concluded our interview by thanking me for listening to her story; she has come to understand that each re-telling of her story enables a deeper depth of healing.<sup>37</sup> In some unsought after (and entirely unexpected!) way, I shared in their healing journeys.

### 0.3 Chapter Synopsis

**Chapter one** summarises the foundations upon which contemporary expressions of Charismatic healing have been built. Responding to the frequent biblical references that I came across during my attendance at group healing retreats, individual interviews, and within much of the devotee literature, I begin this chapter with a brief summary of the theological positioning of

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<sup>37</sup> This retelling is the basis of much of psychotherapy; formal recognition of this connection varies among the Charismatics with whom I spoke.

Charismatic healing. Much of this is grounded in particular biblical verses which tell stories of physical healing, as well as proverbial writings which speak to inner healing and/or deliverance ministry. The latter half of this chapter summarises the historical development of Charismatic healing within North America. I draw from the historical work of scholars who explore the divine healing movement and faith cure movement which emerged in the 19<sup>th</sup> century. Although the foundational figures from these early movements were almost never referenced by my research participants (whereas the same individuals were quick to tell me, with astounding detail, about various biblical stories of healing), recognising the historical development of the contemporary practice is helpful in establishing that contemporary Charismatic healing practices did not emerge in a cultural vacuum.

**Chapter two** reviews the literature on spiritual healing—particularly the academic literature which focuses on spiritual healing in North American, Christian contexts. In it, I define some key terms that are specific to my research community, and which are pertinent to the study of spiritual healing more broadly. I also refer to key works which span diverse methodological approaches in studying the phenomenon of spiritual healing.

Following the contextualization of both the foundations of “Charismatic healing” in particular and the study of “spiritual healing” more broadly, **Chapter three** presents focused case studies of Charismatic healing. I begin the chapter by introducing the reader to several of the individuals with whom I conducted in-depth interviews and/or observed participating in spiritual healing practices. Rather than amalgamating several stories from different participants and presenting it as a series of singular cases, I have chosen to present individuals’ actual stories, each with their own experience of healing. Although I focus on particular individuals, my discussion of the various components of their stories is more broadly informed from the sum

total of my interviews; the reader will note bits and pieces of various individuals' experiences are strewn throughout the five focal stories; as I elaborate on the details found within one individual's story, I sometimes refer to other interviews. As a result of this, the observation from an individual (who is not an active part of the story at hand) might make its way into the story that is being told—or perhaps a particular explanation will be attributed to an individual who has not yet been introduced to the reader at all, but whose observations are helpful in understanding that particular case. To some extent, this is done out of pure structural necessity—there is unfortunately not enough space in this text to adequately situate each individual within the context of his or her own story; certain individuals whom I spoke with at length might only appear in this text for a moment or two. But, interestingly, this is also somewhat reflective of life within Charismatic circles. It is not uncommon for an individual to “speak into” the experiences of another through manners such as prophecy or the giving of “words of knowledge”; ties of familiarity are not necessary, nor does a person need to hold a certain position in order to become incorporated into the spiritual journey of another. The five cases that I focus on each demonstrate a significantly different approach to spiritual healing; each of these distinct approaches is standard within Charismatic Protestant practices of spiritual healing.

In **Chapter four**, I draw from the above-mentioned five descriptive processes in order to further elucidate the Charismatic understanding of what illness/sickness is, and how Charismatics respond to healing efforts—in both “successful” and “unsuccessful” attempts at healing. Importantly, these reveal the way in which Charismatics relate to God, and I discuss this at length. I also consider the similarities that these contemporary expressions of Charismatic healing have with the early years of the divine healing movement.

In the Conclusion, I return to my earlier definition of spiritual healing (as proposed in this Introduction and subsequently elaborated on throughout the thesis) and re-assess it in light of the particular case studies. Lastly, utilizing this definition of spiritual healing and the particularities of Charismatic healing demonstrated throughout the case studies, I explore the extent to which contemporary Charismatic Christianity—and, in particular, Charismatic expressions of spiritual healing—might give us the grounds to re-conceptualise our ever-changing understanding of religious beliefs and practices.

## 1: THE THEOLOGICAL AND HISTORICAL FOUNDATIONS OF CHARISMATIC CHRISTIANITY

My research participants all self-identify as Protestant Christians. They attend a myriad of different churches throughout the Ottawa region, they come from distinct denominational backgrounds and profess certain theological differences, but they share the “Charismatic” element of their personal faith. And so, despite the particularities of their belief systems and experiences, it is useful to begin with a general understanding of the broad theological landscape of Charismatic Christianity. I have proposed that, through considering several particular stories of spiritual healing, we can gain a broader understanding of the Charismatic Christian community at large. In other words, I believe that spiritual healing can be understood by scholars and non-practitioners as a dominant metaphor in which Charismatic Protestants experience their faith—and, indeed, their relationship with the triune God. Naturally, this begs the question whether spiritual healing has *always* been a central practice amongst Charismatics. This chapter first explores the biblical context for the contemporary Charismatic emphasis on healing, and then provides a brief summary of the history of the Charismatic healing movement within North America.

### 1.1 Biblical Context

The story of Pentecost, as well as various stories of physical healing in the bible, are summarised and analysed briefly here so to provide the reader with a theological basis for the contemporary Charismatic focus on healing. Such stories are referenced within much of Charismatic devotee literature, in Charismatic sermons/written teachings on spiritual healing, and were alluded to during various conversations I had with Charismatics. The particular ways in which biblical literature was used by my specific research participants (during both interviews

and focus group sessions) to explain/describe their particular understandings of contemporary Charismatic healing will be explored more thoroughly in chapter three; a broad foundational theological understanding (explored here) will be useful in understanding these specific nuances. These biblical stories are of significance because their implications continue to hold true for contemporary understandings of spiritual healing; the theologies of many of the Charismatics I spoke with have been heavily influenced by the traditions of Evangelical Christianity, where the bible is revered and is looked to as a way of informing present decisions. In other words, that which is included here can be understood to provide the reader with a generic and rudimentary understanding of the Charismatic theology of healing, because such biblical stories are referenced by Charismatics as informing their understandings of healing.

### **i. Filled with the Holy Spirit**

Charismatics place a significant emphasis on the gifts, “*charismas*,” of the Holy Spirit. For contemporary Charismatics, the Holy Spirit is understood as a person (and, though Charismatics may theoretically recognise a lack of biological gender, many Charismatics refer to the Holy Spirit in male terms), and is an immaterial part of the Trinitarian God. Among other things, the Spirit is thought to convict an individual of sin; to provide comfort, knowledge, wisdom, and guidance; and to, sometimes, be the channel for God’s bestowment of spiritual gifts by being “overcome” or “overwhelmed” with the Spirit.<sup>38</sup>

Much of contemporary Charismatic theology is linked to the biblical event of Pentecost, found in Acts 2:1-13. In contemporary circles, the day of Pentecost is commonly understood as the day where the Holy Spirit was “released;” belief in this “releasing” of the Holy Spirit is an integral part of Charismatic healing today. The biblical account describes the coming of the

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<sup>38</sup> During many of my interviews, Charismatics emphasised that, in addition to the above, the Spirit is a “down payment,” given by God the Father, as a way of promising/securing the second-coming of Jesus.

Spirit quite vividly: there “came a sound from heaven as of a rushing mighty wind” (Acts 2:2 KJV), there are “cloven tongues like as of fire” (Acts 2:3) that came and settled upon the people. The author of Acts goes on to state that the people were “filled [*pimplemi*] with the Holy Spirit and began to speak with other tongues [*glossa*] as the Spirit gave them utterance” (Acts 2:4).

The Greek terminology is revealing. The term used for “filled” [*pimplemi*] is used twenty-seven times in the New Testament, often to describe this somewhat abstract concept of being filled with the Holy Spirit—this is the predominant usage throughout the book of Acts. However, the same term is also used to convey, in a strikingly tangible sense, the “filling” up of objects or physical spaces: a house is “filled” with guests (Matt 22:10), a sponge is “filled” with vinegar (John 19:29), and so forth. This very notion of a concrete and tangible “filling” is, I believe, a crucial component to understanding contemporary Charismatic conceptions of the Holy Spirit—and, particularly, the role of the Holy Spirit in healing. Indeed, the Holy Spirit is not understood to be on comparable terms with emotions—such as joy, envy, or confusion (though these too have their biblical usage alongside the term “filled”) which can “fill” one in the abstract sense. The distinction can seem slight—for it is true that the Holy Spirit is often understood to emit and evoke such emotions—but the Holy Spirit is additionally understood to Himself tangibly fill-up human beings; though recognised by Charismatics as immaterial, the Holy Spirit is understood to possess the ability to produce material effects. He can cause an individual to fall over, to experience inexplicable joy and laughter (sometimes referred to as being “drunk in the Spirit”), or to speak “in tongues” (*glossolalia*), among other actions. More pertinent to the topic of spiritual healing, the healing powers of the Holy Spirit (if not the Holy Spirit itself) are also understood by Charismatics as being transmittable through human contact.<sup>39</sup>

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<sup>39</sup> Being “overcome” with the Spirit often manifests in things like speaking in tongues, prophesying, or being “drunk in the Spirit” in which individuals might laugh giddily, stumble around, fall to the floor, etc. Some individuals

This is precisely why the laying on of hands plays such a crucial role in healing; as was explained to me by Charismatics, when the physical body is literally indwelt by the Spirit, physical contact becomes a medium and avenue for spiritual energy.

So, too, is the human body understood by Charismatics to contain numerous places that demonic beings/forces have the potential to physically occupy. In addition to this notion being prevalent in much of Charismatic devotee literature, this was brought up during individual interviews and was emphasised again during a group focus session.<sup>40</sup> As one of my research participants explained to me, the bible cautions Christians against giving “the devil a foothold,” lest they give increasing influence to demonic forces and ultimately end up “occupied” or “tormented” by a demonic spirit.<sup>41</sup> One of my research participants, Maureen, explained, “you know where [the Bible] says ‘don’t give the Devil a foothold?’ Well the word for that is *topos*, and that’s where we get our word ‘topography.’ It’s a literal, physical place.” She went on to explain that, due to this nature of physical occupation, she had witnessed “the demonic leaving believers” on a number of occasions during spiritual healing sessions.

## ii. Inexplicable and Holistic

Charismatic Christianity additionally points to specific places in biblical literature that give accounts of miraculous healings. These healing stories are taken literally and are understood as proof that miraculous healings are indeed possible and do occur. An excerpt from the work of

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advocate for a “baptism by the Holy Spirit” in which the Holy Spirit is “imparted” from one individual to another through a combination of prayer and physical touch.

<sup>40</sup> Peter Horrobin, *Healing Through Deliverance: The Foundation and Practice of Deliverance Ministry* (Bloomington, MN: Chosen Books, 2008); Neal Lozano and John Sandford, *Unbound: A Practical Guide to Deliverance from Evil Spirits* (Bloomington, MN: Chosen Books, 2012); John Wimber and Kevin Springer, *Power Healing* (San Francisco, CA: HarperOne, 2009); Frank Hammond, *Demons and Deliverance in the Ministry of Jesus* (Missouri: Impact Christian Books, 1991).

<sup>41</sup> Most of my research participants were careful to emphasise that they did not believe that a Christian could be fully “possessed” by a demon. They could only be “oppressed,” “tormented,” or “occupied” by a demon.

biblical scholar and theologian Frederick Gaiser's demonstrates the extent to which biblical stories inform individuals' understanding of our world today. He writes,

Any study of biblical healing must begin with these simple but basic observations: The people of the Bible fell ill—good people and bad people, ordinary people and kings, young people and old. But also, the people of the Bible experienced healing—through prayer, through early forms of medicine, sometimes spontaneously, sometimes through a lengthy process. In other words, the people of the Bible were like us.<sup>42</sup>

One can note the way Gaiser draws a line of comparison between the people of the bible and the people of today. Gaiser uses this acknowledgement of a human sharedness as a stepping stone to his ultimate suggestion that miraculous healings are possible in today's world—just as they were in biblical times.

Many Charismatics most readily point to New Testament examples of healing—likely because both Jesus' and the Holy Spirit's (post-Pentecost) power to bring about healing seem more straight forward in New Testament passages)—but others nuance their explanations to include Old Testament passages which speak of Yahweh as Healer.<sup>43</sup> My research participants often emphasised that one of the recognised Hebrew names of God is “Jehovah Rapha” [the Lord who heals] (Exodus 15:26). This demonstrates that even the “God of the Old Testament” is viewed as a healer; it is not simply Jesus and/or the Holy Spirit, but the complete triune God who engages in bringing about individuals' healing.<sup>44</sup>

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<sup>42</sup> Frederick Gaiser, *Healing in the Bible: Theological Insight for Christian Ministry* (Michigan: Baker Academic, 2010), 6-7.

<sup>43</sup> Michael Brown, “Israel's Divine Healer” (Grand Rapids, MI: Zondervan, 1995).

<sup>44</sup> One of the stories that most directly suggests God the Father's involvement in healing is found in Numbers 21. In the text, the Lord sends “fiery serpents” in response to the Israelites' complaining as they wandered in the desert. Shortly after this, the Israelites' recognise their sins and plead to Moses to pray to the Lord, asking that He might cure them of their poisonous snake bites. Interestingly, rather than removing the plague of snakes, God instead commands Moses to construct a brass statue in the shape of a snake and to place it on a high pole, instructing Moses to inform the Israelites that “everyone that is bitten, if they look upon [the snake statue], they will live” (Numbers 21:8b). Gaiser notes that the biblical passage remains silent and does not offer a detailed explanation of the healing; it is ambiguous whether this brass-snake cure was thought of as a miracle, as a type of medicine, or a form of magic. What *is* clear is that the Israelites, regardless of the precise details of *how* the healing came about, agreed that God was the one responsible for the healing. In this context, questions of whether this healing has magical and/or medical

Charismatics also refer to multiple stories in the New Testament that portray Jesus (and, at times, his disciples) as performing miraculous acts of healing. Jesus heals lepers (Luke 17:11-19; Mark 1:40-45), the lame (Mark 2:1-12; John 5:5-11), the blind (Mark 8; Luke 18; John 9), those thought to be possessed by demons (Matthew 12:22; Mark 5; Luke 8:26-39), socially “unclean” women (Mark 5: 25-35; Luke 8:43-58), and even raises the dead (Mark 5:21-43).

These healings irrefutably included components that were physical in nature, but they are additionally understood by Christians to incorporate holistic healing. For example, Gaiser draws attention to the way that both mute and blind individuals were excluded from community under Old Testament laws (Lev 21:17-21) and suggests that Jesus’ healing of these physical conditions would have additionally removed the social stigma that was attached to these individuals.<sup>45</sup>

Certain online teachings available from renowned Charismatic organisations which focus on spiritual healing (Catch the Fire, Ellel Ministries, etc.) also emphasise that true healing is holistic in nature. In describing healing, they refer to biblical verses which state that individuals will be fully “transformed” (2 Cor 3: 18); there is emphasis on experiencing the “glory” of God (John 16:14), on experiencing “sanctity,” and on one’s “whole spirit and soul and body” (1 Thess 5:23).<sup>46</sup> This emphasis on holistic healing is integrally linked to the Charismatic understanding of the self as a tri-part being.

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components are placed aside; ultimately, the healing is simply attributed to God. Such belief continues to influence contemporary Charismatic healing movements, where a number of diverse methods (traditional Western medicine, secular counselling, etc) are, at times, all ultimately attributed to God: these devices are recognised to have healing properties and/or as catalysts toward good health, but God remains the Greatest Physician.

<sup>45</sup> Gaiser, *Healing in the Bible*.

<sup>46</sup> These verses were taken from Ellel Ministries and Catch the Fire’s respective websites, as well as from pamphlets and teaching material given at their public teaching sessions. Both of these organisations are known by Charismatics for their emphasis on spiritual healing; both were repeatedly referred to me throughout my interviews.

### iii. Healing by Creating and Restoring

In addition to revealing a focus on the Holy Spirit, emphasising God as the ultimate Healer, and suggesting that spiritual healing often affects the holistic tri-part self, Charismatics also emphasize that the biblical stories of healing portray the character of God—and indeed, the very manner of God’s healing. These biblical-based characteristics that are attributed to God are understood to continue in the contemporary period. This can be seen by a brief comparative literary analysis of two stories where Jesus heals a blind man—John 9 and Mark 8. These stories are frequently referenced in Charismatic circles—particularly when discussing physical healing—but their relevance is also applied to inner healing. The manner of Jesus’ healing in these biblical stories is taken by Charismatics as literal, historical depictions of precisely *how* Jesus went about two specific instances of healing, but are simultaneously understood as revelations of the general character of God. In this latter sense, these stories speak to Charismatics today about how God wants to evoke healing in their lives.

In the Johannine story, Jesus spits into the ground, mixes His saliva with the dirt on the ground, places this mud-mixture [*pelos*] on the eyes of a blind man, and instructs him to go wash his face in the Pool of Siloam.<sup>47</sup> Some biblical scholars have argued for layers of comparison between this healing and the Genesis creation story.<sup>48</sup> Namely, it has been argued that the Johannine story’s inclusion of elements of dust [*chamai*] and spittle [*ptysma*] can be linked to the creation account in Genesis where humankind is made of dust [*aphar*] and breath [*neshamah*] (Genesis 2:7.) That is to say, Jesus’ act of healing can be symbolically understood to be on

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<sup>47</sup> The healing power of saliva (especially that of first born sons) is a common belief across cultures. See Wendy Cotter, *Miracles in Greco-Roman Antiquity* (1999) regarding miracles in Greco-Roman antiquity.

<sup>48</sup> See Daniel Frayer-Griggs, “Spittle, Clay, and Creation in John 9:6 and Some Dead Sea Scrolls” (2013). Frayer-Griggs has recently resurrected this argument which was first asserted by Irenaeus. See also the work of J. Louis Martyn, *History and Theology in the Fourth Gospel* (2003) who, drawing upon form criticism, conducts a literary analysis of John 9 within the broader genre of miracle stories.

comparable terms with the act of creation: one can say that He is “creating sight” in the blind man. Or, to borrow Ioannei’s description from the “Paraphrase of the Gospel of John,” the man had an “eyeless face”<sup>49</sup> until Jesus healed him; this particular healing can be interpreted as a symbolic act of creation. For Charismatics, God is understood to heal—at least some of the time—by way of *creating* something *new*.

And yet, as can be demonstrated by a similar healing miracle story in Mark 8, God is equally understood to, at times, heal by way of *repairing* or *restoring*. Mark, too, tells a story of a blind man receiving his sight after his encounter with Jesus. Though the story lacks the Creation imagery contained in John, Mark’s use of “*apokathistemi*,” and his placement of this story in its surrounding textual context, emphasises miraculous restoration.

In this story, Jesus “spat on his eyes and laid hands on him” (Mark 8:23). Jesus laid hands on the man a second time before his eyes were “restored” [*apokathistemi*] (Mark 8:25). Immediately prior to the telling of the healing story, Mark writes of Jesus chastising his disciples; Mark quotes Jesus as saying, “Do you not yet see or understand? Do you have a hardened heart? Having eyes, do you not see? And having ears, do you not hear?” (Mark 8:17-18). Jesus’ words are clear echoes of earlier scriptural passages that describe stone-cut idols as having all the components necessary for sensory experiences (eyes, ears, a mouth, hands, etc.) but, as stone, are unable to actually make use of any of these parts.<sup>50</sup> So, too, does the blind man have “eyes that do not see.” Mark’s calculated placement of the healing miracle makes the story, I believe, saturated with imagery of restoration: Jesus takes what already exists and restores it, enabling the blind man to see. If John’s story shows God to heal through the act of creating something new, Mark’s story equally shows God to heal through the act of restoring and

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<sup>49</sup> See Ioannei’s “Nonnos of Panopolis: Paraphrase of the Gospel of St. John” translated into English by M.A. Prost.

<sup>50</sup> See Jeremiah 5:21; Isaiah 6:10; Psalm 115:5; Psalm 135:16.

repairing that which already exists. And, in contemporary Charismatic contexts, God continues to be seen as both a creator and a restorer in His bestowments of healing.

This emphasis on both the creative and restorative elements of spiritual healing, emphasised broadly in Charismatic literature through passages such as those that I have explored above, are explained with more specificity and nuance at the individual level. Although many Charismatics certainly recognise the cultural and historical context of the bible, Charismatics simultaneously read the bible as “divinely-inspired” and therefore many see, at times, certain verses in the bible as “speaking directly” to their own life situations.

When I asked some of my research participants to share verses that “speak” to them about spiritual healing, the results were varied; the verses that were shared with me ranged in topic and genre. These included proverbial sayings about being “still” and finding peaceful rest in God (Psalm 46:10; Proverbs 3:5b); excerpts from letters which emphasise that God has “given us a spirit of power, of love, and of self-discipline” (2 Timothy 1:7); Gospel accounts which speak of being “set free” by truth (John 8:32) and living an “abundant life” (John 10:10); verses which speak to physical healing (1 Peter 2:24; Psalm 103:3); and Old Testament prophecies which promise to give a new heart and a new spirit (Ezekiel 11:19), or to be filled with the Spirit of the Lord (Isaiah 61:1). These verses were explained by my research participants in terms of healing; this was accomplished by both drawing from the broad Charismatic perception of the triune God as a healer, but also by linking these verses to individuals’ own specific life situations. This will be explored more thoroughly in chapter three.

#### **iv. Applying Biblical Healing Today**

As mentioned, most Charismatics understand the biblical stories of healing as literal—meaning they are understood to have occurred in a specific moment in time at a specific place.

Nevertheless, they are ubiquitously taken as indicators of what can be accomplished in the here and now. This belief can be linked to a number of biblical statements—statements which are often directly quoted or referred to by individual Charismatics and/or taught by Charismatic organisations when explaining why they practice healing today. These include the profession that “all things are possible for those who believe” (Mark 9:23), the promise that Jesus’ followers (which Charismatics take to include followers of Christ today) “will do even greater things” (John 14) than Christ Himself, and the belief that Christians have been given “power and authority over all the demons and to heal diseases” (Luke 9:1).<sup>51</sup> These words are understood by Charismatics not as mere well-wishes or catch-sayings but as a genuine, God-given promise: Charismatics believe they *can* do such things; it was made possible through the tearing of the veil in the temple (Matt 27:51) and the subsequent release of the Holy Spirit into the world (Acts 2).

These beliefs remain foundational to contemporary Charismatic healing; it was often emphasised to me by my research participants that the power of God, manifest in human believers [which almost always meant ‘Christian’ and frequently exclusively ‘Protestant’], could achieve miraculous and otherwise unattainable displays of supernatural power—including physical forms of healing, psychological forms of healing, and even raising individuals from the dead.<sup>52</sup> These displays of God’s power—completely unbelievable to those who do not believe in a greater spiritual power, and, admittedly, still quite remarkable (and even sometimes shocking) to the Charismatics who do profess their faith in such a God—are theologically conceptualised as

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<sup>51</sup> For an example of this, see the popular video *Finger of God* (2006), which was referred to me by a number of my research participants.

<sup>52</sup> A number of examples of this are strewn throughout devotee literature as well as public lectures / podcasts available on YouTube. Some of the ones most commonly referenced to me by my research community include the books *Lynda* (2010) and *Sarah* (2009) and the public teachings of Curry Blake.

regular and normal.<sup>53</sup> A number of my research participants attested to the fact that they experienced a depth of either physical or inner healing simply by “seeking God”—they described the healing as the natural outcome. One woman, Olivia, referred to her physical healing—a rather remarkable story of a small hole in her heart (which had been monitored annually and which doctors had expected to slowly grow) closing up the very same year that she began to attend sessions on inner healing—as an outcome of endeavouring to be more Christ-like. She explained it in simple terms: “when you seek God, He refines you. All of you.”

The theological conceptualisation of miracles as “normal” can be somewhat difficult to understand—particularly when endeavouring to discuss such beliefs within a Euro-American academic framework that has been heavily influenced by the scientific-positivist emphasis on rationalism.<sup>54</sup> As it stands, I remain unsure how to effectively discuss Charismatic concepts of “miracles” and “rationality” because, at the heart of the Charismatic focus on healing, individuals strive not merely to “increase the amount of miracles,” as it were, but to actually defy, overthrow, and subsequently re-build the societal understanding of “rationality.” That is, though Charismatics recognise that some of their “healing miracles” fall outside the realm of what can be scientifically/medically explained (indeed, the notion of “God’s healing boggling the mind of the Western physician” seems to bring a particular amount of joy to Charismatics), they conceptualise these events as obeying “rational” laws which are greater than those which science or medicine have yet understood; a type of “rationality” that Charismatics explain to be accessed through “child-like faith” (Matt 18:3).

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<sup>53</sup> Even if this conceptualisation occurred only at a theoretical/conceptual level (while in actuality individuals were still awed and taken aback by the power of God), Charismatic theology professes a normalcy of the supernatural.

<sup>54</sup> The philosophical works of David Hume—especially “Of Miracles” (1748)—have deeply influenced this rational perspective. Hume writes that the miracles claimed in the Christian religion are “contrary to the rules of reasoning” and posits that his rational, well-reasoned argument “silences arrogant bigotry and superstitions and frees us from their impertinent approaches.”

Though perhaps difficult to grasp, this attribution of miracles to child-like faith is fundamental to many of the Charismatics I spoke with.<sup>55</sup> I would like to draw from fictional literature with the aim of conveying this concept. Through the mouth of one of his characters, novelist Jostein Gaardner tells a story about a man who begins to float in the air while in his kitchen.<sup>56</sup> This is first observed by the man's nearly-two-year old toddler, who is amused (but not startled) by the fact. To the toddler, this observation causes delight—it is even a bit fun to witness, because Daddy doesn't normally float. However, when the man's wife finally notices her floating husband, she is frantic, and even frightened, because she has lived long enough to know the natural laws of the world. Namely, she knows what human beings can and cannot do—and they surely cannot float!

I want to borrow from this story and suggest that Charismatic Christians strive (in regard to what is believed to be possible) to be more like the toddler than the wife. I suggest that this indeed might be what is understood by Charismatics when they emphasize the importance of “child-like faith” in the spiritual healing process: welcoming the unexpected; not placing God “in a box”; never losing a sense of wonder; responding to those (admittedly, somewhat weird) things that Daddy does with delight, rather than with fear. This analogy is, inevitably, limited but I think it is a useful starting point in beginning to understand the Charismatic emphasis on child-like faith in the spiritual healing process.<sup>57</sup>

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<sup>55</sup> As always, there is a diversity of belief that exists amongst any singular research community. Not all individuals I spoke with understood child-like faith in the same way. Many emphasised the importance of being willing to trust God “even when logic suggests otherwise,” but not all individuals purported that one's faith will lead automatically to one's healing. I found there were varying degrees with which people emphasised the role of one's faith in regard to healing.

<sup>56</sup> Jostein Gaardner, *Sophie's World* (New York: Farrar, Straus and Giroux, 2007).

<sup>57</sup> Somewhat interestingly, early anthropologists like Edward Tylor or Lucien Lévy-Bruhl emphasised the “infantile” or “naïve” belief systems of non-European people groups. In large part, this was done to paint non-Christian belief systems as “savage-like” and lacking the intellectual evolution which only “developed” religions (which, for the most part, insinuated Christianity) were believed to possess. Even when these portrayals were not done maliciously, it was generally recognised that the beliefs of the “naïve Savages” were so far away from the

Since Charismatics understand the miraculous stories of healing contained within the biblical literature to be possible in today's world, it is hardly surprising that we see direct links drawn between contemporary Charismatic spiritual healing and biblical stories of healing. These stories are used as an informative theory for the nature of God in relation to healing, while other surrounding verses are taken as promises of what Christians can accomplish today.

## **1.2 Historical Context (North America)**

As discussed above, many contemporary Charismatics point to biblical literature to provide contextual support for their beliefs in regard to spiritual healing. The question then arises whether some semblance of these Charismatic doctrinal viewpoints has existed since biblical times—and, if so, to what extent. Although a more in-depth historical study is outside the scope of this work, the historical development of the Charismatic healing movement in North America has been well-explored by a number of scholars, including Heather Curtis, Nancy Hardesty, James Opp, and James Robinson. Drawing from the works of these scholars, I focus on the recent history of Charismatic healing movements within North America. It is important to note that, at different points in time, the terms “divine healing” and “faith cure” were used to describe the Pentecostal/Charismatic focus on prayer and other spiritual pursuits as a way of furthering holistic healing that emerged in North America in the 19<sup>th</sup> century; the existing scholarship often uses the two terms interchangeably.<sup>58</sup>

### **i. Suffering, Miracles, and Faith**

Heather Curtis draws our attention to the somewhat surprising reality that many North American Protestants—that is, at least as is suggested by records which summarise several

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developed, rational beliefs of Christians. In my own analysis here, I do not intend to come across as *constructing* Christians as “child-like” but am rather noting their own explanation of themselves as such. It seems worth noting that it is a characteristic that they themselves want to claim.

<sup>58</sup> See also my comments in Chapter two (at the end of section 2.1) in regard to the use of these two terms.

churches' official doctrinal stances— in the mid-19<sup>th</sup> century *did not believe* in divine healing; in this regard, the mainstream Protestant theological position was one of cessationism (a belief which states that the supernatural gifts of the Holy Spirit have “ceased” and are no longer active in the contemporary period.)<sup>59</sup> However, the Wesleyan Holiness movement (originating with John Wesley in the late 18<sup>th</sup> century) taught that Christians could attain perfection on “this side of heaven” and, by the late 19<sup>th</sup> century, many Evangelical Christians began to embrace divine healing.<sup>60</sup> The faith cure movement, Curtis elaborates, leant itself toward an “intrinsic elasticity” regarding theological foundations and individual beliefs because it “had no formal hierarchy and no authoritative method for imposing ‘orthodoxy’ in theology or practice.”<sup>61</sup>

The divine healing movement, of course, did not emerge in a cultural vacuum; it was influenced by a number of social and cultural ideas—particularly those surrounding physical and spiritual suffering. The Charismatic emphasis on spiritual healing emerged in reaction against the culturally-normative view that pain and suffering were spiritually desirable: pain was traditionally seen as a catalyst for spiritual growth and was, by some, also thought to be of purely biological benefit—for example, the “Heroic method” (developed by physician Benjamin Rush in the beginning of the 19<sup>th</sup> century) existed on the basis that any pains of the body could be effectively treated with additional pain.<sup>62</sup> In this context, discomfort was a sign of spiritual progress, as bodily suffering was understood to be linked with (and, eventually, would lead to) spiritual blessings—this idea was grounded in the practices of early church martyrs, 14<sup>th</sup> century

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<sup>59</sup> This is quite different than a number of European countries in the 19<sup>th</sup> century, where the Catholic Church had to contend with large crowds who fervently supported claims of miracles (see Kinsley 1989 who writes about the 19<sup>th</sup> century Catholic Church's response to miraculous claims in France, among others). This theological distinction between Catholics and Protestants in regard to healing and miracles is significant.

<sup>60</sup> Heather Curtis, *Faith in the Great Physician: Suffering and Divine Healing in American Culture, 1860-1900* (Baltimore: The Johns Hopkins University Press, 2007), 7.

<sup>61</sup> *Ibid.*, 13.

<sup>62</sup> Sullivan, *The Miracle Detective*' Robert Scott, *Miracle Cures: Saints, Pilgrims, and the Healing Powers of Belief*. (California: University of California Press, 2010).

hagiographies and auto-hagiographies which emphasized sickness as “a stimulus for deeper mystical experience and interpreted invalidism as a sign of God’s favour.”<sup>63</sup> This acceptance of suffering has also been linked to other medieval mystic practices, such as experiencing Christ’s wounds on one’s own body.<sup>64</sup>

In their works on Christian healing in North America, Heather Curtis and Nancy Hardesty explain that, by the end of the 19<sup>th</sup> century, Christian movements began to publically doubt whether passively accepting (or, for some martyrs, actively seeking after) suffering was truly a “part of God’s plan” for them. As a result, the divine healing movement gained popularity. Prominent leaders of the movement such as Charles Cullis, Sarah Mix, R.K. Carter, A.J. Gordon, and A.B. Simpson emphasized that God was “a sympathizing parent who permeated nature with divinity” and they accordingly rejected the notion that bodily suffering was a means of achieving spiritual wholeness.<sup>65</sup> The earlier stages of the emerging healing movement emphasized natural methods of attaining good health (i.e. following a regimented nutritional diet, exercising regularly, etc.) as a way to both increase one’s spiritual health and to please God by choosing a physically-healthy life style.<sup>66</sup> Interestingly, we are seeing this trend re-occur with contemporary Charismatics and Evangelicals who emphasise taking on a biblically-based fast such as “the Daniel Diet”—a popular pastor and award-winning author, Rick Warren, is among many Christians who have contributed to the devotee literature which advocates for nutritional health efforts and fasting as a catalyst for spiritual growth.<sup>67</sup>

In addition to emphasising natural methods for attaining good health, proponents of

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<sup>63</sup> Curtis, *Faith in the Great Physician*; Scott, *Miracle Cures*.

<sup>64</sup> Sullivan, *The Miracle Detective*; Scott, *Miracle Cures*.

<sup>65</sup> Curtis, *Faith in the Great Physician*, 57.

<sup>66</sup> *Ibid.*, 57-66.

<sup>67</sup> See, among others, Rick Warren’s *Daniel Plan: 40 Days to a Healthier Life* (Grand Rapids, MI: Zondervan, 2013).

divine healing advocated for individuals to embrace the possibility of modern miracles. A.J. Gordon wrote strong cautions against rejecting miracles, arguing that Christians who are divorced from a belief in modern miracles are “in danger of being frightened out of their faith in the supernatural.”<sup>68</sup> Gordon understood miracles as a foundational belief of Christianity, and argued that, without such belief, the Church might topple over. He believed true religion to be “spiritual” rather than “rational” and proposed that an over-emphasis on a rational understanding of religion would “put vestments on the Lord’s providences, insisting on their being draped in the habiliments of decent cause and effect.”<sup>69</sup> It is plausible to draw connections between the ideological shift regarding pain (moving from an acceptance of suffering as a spiritual catalyst to the belief that God desired individuals to be healed) and this emphasis on the acceptance of miracles.

Along with this emphasis on miracles came an increased emphasis on personal faith. Sarah Mix advised sick individuals to “act *faith*. It makes no difference how you feel, but get right out of bed and begin to walk by faith.”<sup>70</sup> Similarly, A.B. Simpson taught that individuals should act as if their healing has already been completed by Christ; he told individuals to “begin to act as one that is healed. Treat Christ as if you trusted Him, by attempting in His name and strength what would be impossible in your own; and He will not fail you if you really trust him.”<sup>71</sup> Simpson is seen to have diligently applied this to his own family life—against the desires of his wife—when his young daughter contracted diphtheria and he refused to call a doctor, but

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<sup>68</sup> A.J. Gordon, “The Ministry of Healing,” (Camp Hill, PA: Christian, 1992), 122.

<sup>69</sup> Gordon, “The Ministry of Healing,” 122. It is worth noting that Gordon’s stance is not unique to Gordon; it had been previously argued by many Christian thinkers including Soren Kierkegaard. However, its effect on the divine healing movement is due to Gordon’s focus on it.

<sup>70</sup> quoted in Nancy Hardesty, *Faith Cure: Divine Healing in the Holiness and Pentecostal Movements* (Massachusetts: Hendrickson Publishers Inc., 2003), 98.

<sup>71</sup> quoted in Curtis, *Faith in the Great Physician*, 94.

instead relied strictly on prayer.<sup>72</sup> In the end, his daughter was restored to full health, and this event did much to buttress Simpson's own faith. Simpson also cautioned individuals against adding the clause "if it be God's will" at the end of their prayers, because he believed this fostered and demonstrated a sense of doubt.<sup>73</sup> This adamant focus on developing a strong, unwavering faith continues to be perpetuated by contemporary USA healers such as Curry Blake in Texas, whose public teachings on healing influenced many of my research participants.<sup>74</sup>

In the divine healing movement's early years, as with certain Charismatic healing practices today, individuals for whom evident signs/symptoms of healing did not immediately manifest were told that they must continue to have faith that they indeed *had already been healed despite the fact that their physical state suggested otherwise*. Different individuals suggested different explanations for this alleged lack of immediate healing: some argued for divine sovereignty ("God knows best") while others claimed that humans, not God, were to blame, suggesting that such individuals possessed an "obstinate refusal to follow Jesus entirely."<sup>75</sup>

## ii. Tension with Western Medicine

The divine healing movement experienced some significant tension with traditional Western medicine. The main point of the controversy was that proponents of divine healing asserted that if Jesus were the Physician, then no other doctors were needed. This was propagated by physicians such as A.B. Simpson who agreed to treat non-Christians with

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<sup>72</sup> Robinson, *Divine Healing*, 178.

<sup>73</sup> Hardesty, *Faith Cure*, 97.

<sup>74</sup> Blake was referred to by many of my research participants as someone who is prominent within the Charismatic healing movement. One woman told me that "his success rate [with physical healing] is huge! He even raises people from the dead! It's because he has such strong faith." Blake regularly gives sermons or public lectures at churches; many videos of his teaching can be accessed on YouTube.

<sup>75</sup> R.K. Carter, quoted in Curtis, *Faith in the Great Physician*, 89.

traditional medicine but encouraged his Christian patients to rely solely on prayer.<sup>76</sup> This reluctance to use biopharmaceuticals was standard at the beginning of the divine healing movement—but this, too, existed on a spectrum among the proponents of divine healing. Dora Dudley (mentioned by Hardesty) and Charlie Miller (mentioned by Curtis) were rather extreme in avoiding biomedicine; they both died (from what were posthumously acknowledged as treatable illnesses) after refusing to seek the advice of medical professionals. Such extreme measures were criticised by many proponents of divine healing, because it was this sort of resolve that fuelled the fire of those who dismissed divine healing as an utterly deluded fallacy.

As remains the case amongst Charismatics today, 20<sup>th</sup> century Charismatic beliefs surrounding the physical possibilities of spiritual healing existed on a spectrum; not all proponents of divine healing believed that physical healing should be sought through spiritual means alone. Divine healing leader R.K. Carter, upon re-examining his views of the biblical doctrine of healing, published a rebuttal to an earlier work of his. In the work, he refuted (on biblical grounds) his earlier claim that physical healing is a part of the atonement (that is, that it was secured through the wounds Jesus incurred during His crucifixion) and is thereby infinitely available to all. He also refuted the command to “act in faith” despite not seeing results that healing had occurred.<sup>77</sup>

### **iii. Spiritual Healing: Divine or Demonic?**

The Pentecostal movement in the early 20<sup>th</sup> century emphasised Satan’s role in sickness more than earlier Christian movements had; in this way, divine healings were seen as cosmic victories against Satan.<sup>78</sup> However, even for those who didn’t view sickness itself as being derivative of Satan, practitioners of divine healing held rather strong views about the demonic in

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<sup>76</sup> Hardesty, *Faith Cure*, 76.

<sup>77</sup> Robinson, *Divine Healing*; Curtis, *Faith in the Great Physician*.

<sup>78</sup> Curtis, *Faith in the Great Physician*, 200.

relation to sickness and healing. A.B. Simpson, along with a number of other healers and pastors, warned congregations against “false healers,” and taught that “the laying on of hands” (which, based in biblical literature, remained a fundamental practice of Charismatic healing) was *not* a neutral activity and should not be treated lightly. Just as the [positive] powers of the Holy Spirit were understood as being capable of passing from one Christian to another through the laying on of hands, so were forces of darkness understood to be passed in the same way.<sup>79</sup> Many proponents of divine healing preoccupied themselves with ensuring that people were not put under demonic possession accidentally, and measures were put in place in order to patrol the participation in different healing rituals, lest individuals pursue bodily wholeness at the expense of their spiritual health.<sup>80</sup>

In believing that many other (non-Christian) healing techniques were demonic, practitioners of divine healing sought to find ways to set themselves as distinct from the healing movements of other traditions. In the late nineteenth and early twentieth century, practices such as uncontrollable shaking and the phenomena of receiving visions were discouraged by Christians because they were thought to be too closely associated with non-Christian healing rituals. But, when some influential healers argued that even these things could be used by God if used in a legitimate Christian context, these practices became more acceptable and began to regain popularity amongst Christian practitioners.<sup>81</sup> For example, the practice of putting people into a trance (strongly resembling certain forms of mesmerism that were practiced at the same time) came to be known by Christians as putting people “under the power;” the practice itself was not abandoned, but it was re-defined so that it was deemed acceptable in Christian contexts. The divine healing movement further sought to distinguish itself from other alternative healing

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<sup>79</sup> Ibid., 127.

<sup>80</sup> Ibid., 136; 111.

<sup>81</sup> Ibid., 132.

movements by being adamant that no one should have to pay for healings. Instead, free will offerings were accepted, and individuals established “faith homes” and “faith hospitals” which were built “on faith”—that is, on the assumption that God would provide the funds.<sup>82</sup>

Both the biblical texts which speak of healing as well as 19<sup>th</sup> century divine healing/faith cure movement in North America have deeply shaped the contemporary approaches to Charismatic healing in Ottawa, Canada. Namely, many Charismatics are quick to identify specific biblical passages or scriptural verses which have shaped their views on how to go about praying for healing; many of the people I spoke with drew from various biblical passages to give context to their contemporary views. Along with the influence of these biblical passages, many of the early patterns that were established in the divine healing movement in the 19<sup>th</sup> and 20<sup>th</sup> century continue to be seen in the contemporary practices of Charismatic healing.

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<sup>82</sup> Faith homes are discussed in more detail by Curtis, *Faith in the Great Physician* and Hardesty, *Faith Cure*.

## 2: A REVIEW OF THE LITERATURE ON SPIRITUAL HEALING

This chapter is most broadly concerned with reviewing the academic literature on the phenomenon of spiritual healing—focusing primarily on the Christian tradition, and drawing from various Christian expressions of healing ranging from the first century to the present time period. This is in itself contextualized within the broader topic of the anthropological study of spiritual healing as it is expressed across diverse religious/cultural traditions.

In scholarship in the mid-20<sup>th</sup> century there was a marked shift away from the tendency, standard to psychology at that time, to explain informants' claims of "spiritual healing" in terms of mental illness.<sup>83</sup> Integral to this shift was Claude Levi-Strauss' work in which he discussed the case of a Cuna shaman aiding a woman in childbirth: Levi-Strauss argued that the shaman provided a framework of meaning (a culturally-specific myth of a heroic journey) with which the woman could symbolically connect, and through which she could make sense of her pain. Through understanding that one's pain is a part of a bigger picture, Levi-Strauss argued, individuals are able to bear with—and, indeed, conquer—their suffering.<sup>84</sup>

Levi-Strauss' structural analysis was quickly taken up by other scholars and applied as a general explanation to spiritual healing. For instance, James Dow argued that all symbolic healing is rooted in myth and has a universal structure to it. Building directly from Levi-Strauss' work, Dow proposed that the mythical structure is comprised of four basic parts: (1) that there is a cultural myth; (2) the healer can persuade the patient that the problem is one that relates to—or, rather, can be phrased in terms of—the myth; (3) the healer rephrases the emotions of the patient

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<sup>83</sup> See Mary Keller, *The Hammer and the Flute* for an overview of early psychological approaches.

<sup>84</sup> Claude Lévi-Strauss, "The Effectiveness of Symbols, 162 (1949)," in *Cultural Psychiatry and Medical Anthropology: An Introduction and Reader* (2000).

and puts them in terms of the general myth, in a particular way; (4) “the healer manipulates the transactional symbols to help the patient transact his or her own emotions.”<sup>85</sup>

One decade after Dow, Thomas Csordas criticized scholars for theorizing about the *mechanism* of healing without considering the *reason behind* or the *experience of healing*.<sup>86</sup> Csordas identified four types of spiritual/alternative healing: (1) structural (inherent correspondence between symbolic objects and disease being treated; stemming largely from the theories of Levi-Strauss), (2) clinical (the healer, like a doctor, treats patients with individual treatment and expects individual results), (3) social support (healing is reliant on a strong social support system and a sense of community), and (4) persuasive (the healer uses rhetoric devices and influence to bring about a shift in the patient's perception). Using these four hypotheses as a starting ground, Csordas conducts a phenomenological exploration of spiritual healing. That is, he focuses on the inner experience that individuals claimed to have during their moments of illness and healing. Though not the first of its kind, Csordas' phenomenological study of healing remains a significant contribution to the field; this is demonstrated by the fact that it is widely-referenced by subsequent studies of spiritual healing.<sup>87</sup> It is also particularly pertinent to my own study, as much of Csordas' anthropological work focuses on a Charismatic Catholic community in New England, USA.<sup>88</sup>

The remainder of this chapter is divided into three main sections, each with its own sub-sections. Drawing from the existing phenomenological literature on spiritual healing, I seek to (1) provide the reader with a foundational understanding of the phenomenon of spiritual healing

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<sup>85</sup> James Dow, “Universal Aspects of Symbolic Healing” in *American Anthropologist* .88 (1986), 56-59.

<sup>86</sup> Csordas. *The Sacred Self*.

<sup>87</sup> See Throop, “Articulating Experience” (2003); Watts, *Spiritual Healing*, (2011); Anderson, “Self, Suffering, and Religious Experience” (1997); Opp, *The Lord for the Body*, (2005); Luhrmann, *When God Talks Back* (2012); Cassaniti and Luhrmann, “The Cultural Kindling of Spiritual Experience” (2014), among others.

<sup>88</sup> See McGuire, *Lived Religion*; Joan Halifax, *Shamanic Voices* (1979); Halifax, *Shaman: The Wounded Healer* (1988), among others, for earlier examples of spiritual healing.

by defining some key terms; (2) summarise the methodological approaches that have been used (and, indeed, are being used) in the field of spiritual healing; (3) explore the general trends that emerge in academic discussions of spiritual healing;

## 2.1 Insider Understanding/s and Terminology

A number of terms are used by scholars in the various fields who study spiritual healing—some of which are synonymous, while others have important distinctions. Unless otherwise identified, the terms and instances below can be assumed to refer to Charismatic Christian expressions of healing within North America, as that is the field site of most of the literature on spiritual healing drawn upon in this review.

Spiritual Healing: In the Introduction, I offered the following as a broad definition of spiritual healing: *a movement toward health or wholeness that is inseparable from one's spiritual belief system*. Nuancing the term, Fraser Watts suggests that spiritual healing can be identified by the presence of at least one of the following three things: “(1) healing in which spiritual practices play a role; (2) healing in which spiritual aspects of the human person are presumed to be involved; (3) healing that is explained in terms of what are presumed to be spiritual processes.”<sup>89</sup> Watts' definition is particularly helpful in formulating a cross-cultural/interreligious definition of spiritual healing because it does not presuppose a certain type of religious system or a certain understanding of the divine, and thereby opens itself to multiple religious and cultural traditions of healing. All three instances of healing could include diverse expressions, such as the prayer healing undertaken by Christian Charismatics<sup>90</sup>, or shamanic

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<sup>89</sup>Fraser Watts (ed.), *Spiritual Healing: Scientific and Religious Perspectives* (Cambridge: Cambridge University Press, 2011).

<sup>90</sup>Meredith McGuire, “Ritual Healing in Suburban America” (New Brunswick, NJ: Rutgers University Press, 1988). See also Csordas, *The Sacred Self*; Turner, *Among the Healers*; Turner, “Our Lady of Knock”; Scott, *Miracle Cures*.

practices of healing<sup>91</sup>; and also non-religious-specific expressions of spiritual healing.<sup>92</sup>

It is important that Watts does not attempt to construct a narrow understanding of the before and after states of spiritual healing. As I shall elaborate upon in chapter three, practitioners of spiritual healing have diverse understandings of what kind of state requires healing: a state that is determined to be in need of healing might be determined from physical symptoms, emotional or psychological dilemmas, or a lack of social cohesiveness, or, as is often the case, it might be an inseparable combination of any number of the aforementioned factors. Much like the state that indicates there is a need for healing, the desired/expected end result of healing also varies greatly amongst spiritual healing practitioners. Even if the state that suggested healing was needed was a physical one (i.e. medically-diagnosable illness) the “healed” state might not show any identifiable changes in physical health.

Cure vs. Healing: John Pilch distinguishes between these two words by identifying that to “cure” is to destroy a pathogen while to “heal” is to restore meaning to an individual’s life.<sup>93</sup> “Cures” in this sense always have a medical connotation and often require a medical diagnosis before the occurrence of “healing” in order for it to be recognized as a true “cure.”

Spirit vs. Soul: Our modern English word “spirit” originates back to the Latin *spiritus*, meaning “breath” and is certainly linked to the European or Indo-European worldview. Much like a breath, the term “spirit” is used in spiritual healing to refer to something immaterial: “spirits” have individual substance but hold no concretely-tangible form.<sup>94</sup> Within the Charismatic Christian context, “spirit” is an umbrella term that might refer to any of three

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<sup>91</sup> Fadiman, *The Spirit Catches You and You Fall Down*; Kapferer, *The Feast of the Sorcerer*, among others.

<sup>92</sup> Frank and Frank, *Persuasion and Healing*; Gilbert and Gilbert, “Spiritual healing”; among others.

<sup>93</sup> John Pilch, *Healing in the New Testament: Insights from Medical and Mediterranean Anthropology* (Philadelphia, PA: Fortress, 2000).

<sup>94</sup> This definition is somewhat complicated by some of my informants’ claims of “seeing” [demonic] spirits in the tangible sense. Yet, even in these instances, the spirits were explained as *lacking form* and as coming out of, and disappearing into, the air.

distinct things. What is being referred to is either (1) the spirit of the individual directly involved in healing (primarily the supplicant or the healer); (2) a spiritual being such as an angel, a demonic spirit; or (3) the Holy Spirit.<sup>95</sup> When referring to an individual's spirit, many scholars use the term interchangeably with the word "soul," but I have found that my research participants were careful to distinguish between the two.

The soul is understood by Charismatics to be an immaterial part of the individual. Spirit and soul are understood by many Christian practitioners of spiritual healing to have two distinct roles; many Charismatic Christians differentiate between the soul and the spirit, claiming that the human body consists of three parts: body, soul, and spirit. For the Charismatic Christians with whom I conducted my research, the "soul" encapsulates an individual's mind, will, and emotions, while the "spirit" allows one to connect with the Spirit of God.

Possession vs. Oppression: Many of the Charismatics whom I spoke with distinguished between possession and tormentation/oppression. Across religious and cultural traditions, some form of possession is a common part of spiritual healing. Much like "spirit," the term "possession" denotes multiple distinct things. Janice Boddy, explains that the term "possession" has been used to describe a myriad of diverse occurrences, only some of which incorporate any discussion of things of either a "religious" or "spiritual" nature.<sup>96</sup> Boddy explains that possession has often been studied by psychologists and others in a medical profession as a form of undiagnosed mental illness, but she recognizes that many instances of possession are believed to have a spiritual component to them, and that possession is often found to occur alongside

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<sup>95</sup> See Csordas, *The Sacred Self*; and McGuire, *Lived Religion* (2008) for phenomenological descriptions of all three of these.

<sup>96</sup> Janice Boddy, "Spirit Possession Revisited: Beyond Instrumentality" in *Annual Review of Anthropology*. 23 (1994), 407-434.

spiritual healing.<sup>97</sup> Boddy defines possession broadly as a merging of matter and spirit.<sup>98</sup> She explains that possession encapsulates a spirit (which is immaterial and lacking form) entering a human being. In any given case of possession, the entrance of the spirit might be either: (1) uninvited and undesirable, (2) uninvited but desirable, or (3) invited and desirable. Equally, the spirit might be identified as having either a benevolent or malevolent nature.<sup>99</sup>

Full-fledged possession, in which a demonic spirit is understood to take control of an individual, was rarely spoken of—many Charismatics adamantly told me that “a believer [one who has invited the Holy Spirit to dwell inside them] cannot be possessed.” However, most of these same people were quick to point out that individuals could be “tormented,” “oppressed,” or even “occupied” (i.e. indwelt) by a demonic spirit. The difference between these and possession was both one of type and of depth: none of these insinuated the full-fledged control that was understood by “possession.”

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<sup>97</sup> see Crapanzano and Garrison’s *Case Studies in Spirit Possession* (1977) for an anthropological approach that suggests a similar understanding of possession. See also Erika Bourguignon, *Possession* (1976) which has become a standard reference for possession within anthropology.

<sup>98</sup> Boddy, “Spirit Possession Revisited,” 407.

<sup>99</sup> I turn to the existing literature to demonstrate these three distinctions.

(1) Uninvited and undesirable. Bruce Kapferer’s books *A Celebration of Demons* (1983) and *The Feast of the Sorcerer* (1997) describes demonic exorcism rituals that are practiced by Sinhalese Buddhists in Sri Lanka in order to rid individuals of undesirable spirits. Kapferer describes the rituals conducted by practitioners of spiritual healing and suggests that methods of exorcism can be seen in this case as a method of orienting and establishing themselves in society. (Notably, he does this without applying a reductionist lens, and in this way he contributes significantly to the phenomenological shift in the study of spiritual healing. In the Christian context, Heather Curtis explains that proponents of divine healing and/or faith cure in the U.S.A. in the 1800-1900s were very cognoscente of ensuring that individuals were not put under possession accidentally (p. 135), suggesting that uninvited and undesirable possession was a sincere fear for practitioners of divine healing.

(2) In her book *The Spirit Catches You and You Fall Down*, Anne Fadiman centres her medical-anthropological study around a single Hmong family’s experience when their youngest child, Lia, is diagnosed with epileptic seizures shortly after the family’s forced immigration to the United States. In stark contrast to the American doctors’ diagnosis of epilepsy, Lia’s parents understand her illness in the traditional Hmong way: to them, Lia’s seizures are indicative of a spirit entering (“catching”) her body, thereby causing her to shake and fall down. The spirit that entered her was uninvited and yet was indicative of some form of divinity, and was therefore (if not constantly desirable) was welcomed by Lia’s family. Lia, the second youngest child of nine, was given special attention and favours from her parents due to their perception that her seizures indicated a likelihood that she would grow up to experience shamanic giftings. Her “medical symptoms” were therefore not perceived as strictly medical but as spiritual, and subsequently required spiritual treatment.

(3) Invited and desirable. Scott, *Miracle Cures* (2010) provides examples of Catholic visionaries whose state of trance during visions can, at times, be described as a form of possession.

Deliverance Ministry: Deliverances are performed on individuals who, through any one of a number of processes, are believed to be under the influence of a demonic spirit.

Deliverances are almost always performed in “the name of Jesus” and, after the spirit has been “bound down,” it is “cast out” of the individual and commanded to not harm him or her any more.

Divine healing: Heather Curtis provides a thorough overview of divine healing as it was understood in North America in the 1800s and subsequent two centuries. Divine healing was understood to encapsulate both extraordinary, otherwise unexplainable physical healings, as well as slow but steady pursuits of good physical health through more traditional means such as diet and exercises. Curtis elaborates that divine healing “operated according to a unique hermeneutics that valued personal conviction over sensory perception, spiritual commitment over empirical evidence.”<sup>100</sup> The divine healing movement flourished at the end of the 19<sup>th</sup> century, and individual practitioners instigated several divine healing conferences and also published testimonials of healing stories in church bulletins and other similar publications.<sup>101</sup> Curtis’ research reveals that many practitioners of divine healing view it as something that they can “claim for themselves,” such as A.B. Simpson who became a recognized healer after “claiming healing” for himself.<sup>102</sup> In turn, Simpson taught that individuals did not (always) require an intermediary healer, and could effectively “claim” healing even outside of any formal healing session.

Faith cure: Although “faith cure” is essentially a synonym for “divine healing” (as used by Hardesty and Curtis, among others), James Opp observes that “faith cure” holds a particular negative connotation due to other forms of Victorian “cures” that were later revealed as scams.

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<sup>100</sup> Curtis, *Faith in the Great Physician*, 90.

<sup>101</sup> Hardesty, *Faith Cure*, 41.

<sup>102</sup> Curtis, *Faith in the Great Physician*, 170.

As society's general acceptance of cures such as the "water cure," and the "gold cure" lessened, the term "faith cure" was replaced with "faith healing" or "divine healing" in order to distance itself from the above-mentioned "cures."<sup>103</sup> Opp suggests that scholars should use the term "divine healing" in order to respect this distance, unless referring directly to an instance that was identified as "faith healing" by those involved.

Words: Charismatics often refer to receiving "words of knowledge," "words of wisdom," or "words of prophecy." A "word" signifies a message believed to come from God directly to an individual. A "word" can be relevant to the individual receiving it, to another individual (familiar or stranger), or a larger society—for example, some individuals describe receiving "words" about the city of Ottawa. A "word" can be received while awake or asleep, in a state of worship or prayer, or even when walking down the street in an unsuspecting manner. A "word" often takes the form of actual words and phrases (and is in a recognisable language, as opposed to in the spiritual language of tongues), but can sometimes take the form of a mental-picture, or general idea. This is further explored throughout chapter three, particularly in the case study of Doug.

## **2.2 Studying Spiritual Healing in the Academy: Phenomenologically-Grounded**

### **Methodological Approaches**

In contrast to the works which take a reductionist approach to instances of spiritual healing, various scholars have strived to understand the experiences claimed by practitioners of spiritual healing. As mentioned above, though this has been standard to anthropology for a number of decades, this is rather note-worthy for other social scientific disciplines. The scholars whose work I explore here often adopt the approach of "bracketing out" the question of

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<sup>103</sup> James Opp, *The Lord for the Body: Religion, Medicine and Protestant Faith Healing in Canada, 1880-1930*. (Montreal: McGill-Queen's University Press, 2005), 12.

validity—an approach often attributed to Edmund Husserl—in order to explore the phenomenon of healing.

An excerpt from Candy Brown’s introduction to her book *Testing Prayer*—notable for being among the first reputable scientific studies of prayer healing<sup>104</sup>—encapsulates this approach quite well. She states,

I approach the subject of theology, defined as the study of religious ideas, from the nonsectarian, academic perspective of religious studies. I do not assume the existence or nonexistence of a deity or other suprahuman forces. What I argue is that people’s religious beliefs often have real-world effects that can be studied empirically. The well-known Thomas Theorem in sociology posits that if people “define situations as real, they are real in their consequences.” The *perceptions* of religious practitioners—whether or not they align well with scientific *measurements* of phenomena—matter to individual and group beliefs and behaviours, and sometimes these effects are quite enduring.<sup>105</sup>

Similarly, Heather Curtis admits that, when people hear about her research and asks if she believes in spiritual healing, she replies by saying that the questions of spiritual healing can reveal things about our society and the way we think at large—and she then claims that she is open to the possibility that prayer healing “really works”.<sup>106</sup> Other scholars who demonstrate this same type of approach to spiritual healing are Frank and Frank, who state that too much scepticism will blind the observer from truly seeing the phenomenon at large<sup>107</sup>, and Bruce Kinsey, who states his goal is “not about explaining away but rather exploring what else is going on [in spiritual healing]”.<sup>108</sup> This sort of approach is what distinguishes these types of phenomenological studies apart from reductionist approaches to spiritual healing. This phenomenological approach acts as a foundation that undergirds the diverse methodological approaches that are summarised below—these approaches include biblical exegesis, historical/archival work, interviews, participant observation, and participation.

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<sup>104</sup> The book’s reputability with the scientific realm of study was established by passing through an intricate process at Harvard Medical School regarding the validity and reputability of Brown’s empirical data.

<sup>105</sup> Candy Brown, *Testing Prayer: Science and Healing*, (Cambridge, Mass: Harvard University, 2012), 7.

<sup>106</sup> Curtis, *Faith in the Great Physician*, 22-23.

<sup>107</sup> Frank and Frank, *Persuasion and Healing*, 88.

<sup>108</sup> Kinsey, “The Psychodynamics of Spiritual Healing,” 111.

## i. Biblical Exegesis

Frederick Gaiser's book *Healing in the Bible* provides a theological-conceptual study of spiritual healing as documented in the New Testament and Hebrew Bible in order to discuss the biblical foundation for current Christian spiritual healing practices. Gaiser approaches his study both theologically (evident by his hermeneutics and by his suggestions about how healing ought to function today) and as a biblical scholar (evident by his exegetical work on specific biblical passages). Gaiser explores how spiritual healing was understood by individuals in biblical times, and endeavours to apply this understanding to practitioners of spiritual healing today. He claims, "healing is not the guaranteed right of certain people of faith; it is God's surprising gift to all people everywhere. That is the broader context in which we must understand biblical healing."<sup>109</sup> Gaiser's use of the term "*biblical healing*" is somewhat unclear, since he seems to use it simultaneously to refer to the healing events that are recorded in the Christian bible, but also to refer to a "true" or "correct" form of contemporary Christian healing—that is, healing that he understands to be biblically-sound. In this way, Gaiser aligns himself with many Christian practitioners of healing who desire to differentiate between "true" and "false" methods of healing.<sup>110</sup>

Similarly, John Pilch looks at accounts of healing within the New Testament—but this time through the viewpoint of medical anthropology.<sup>111</sup> Pilch treats the healing accounts in the biblical books of Matthew, Mark, Luke and Acts, and John as written testimonies of healing and explores the role that faith is perceived to play in healing. His own background and employment predisposed him to focus on the medical aspect of biblical healings, and he conducts very useful

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<sup>109</sup> Gaiser. *Healing in the Bible*, 7.

<sup>110</sup> This same tendency amongst practitioners is noted by scholars such as Curtis, *Faith in the Great Physician*; Csordas, *The Sacred Self*; Luhmann, *When God Talks Back*; Hardesty, *Faith Cure*; McGuire, "Ritual Healing in Suburban America"; McGuire, *Lived Religion*; among others.

<sup>111</sup> Pilch, *Healing in the New Testament*.

analyses of biblical healing descriptions. His work clarifies the distinction between “healing” and “cure” and also suggests certain reasons for the differences in the biblical authors’ portrayal of parallel events—for example, he suggests that John is more focused on portraying the character of Jesus while Luke is more interested in documenting healing in a way befitting a doctor. Pilch’s ability to apply a medical-anthropological lens to biblical texts makes his work particularly significant to the field of spiritual healing.

Additionally, Justin Meggitt conducts an analysis of biblical texts as a foundation for his discussion of spiritual healing.<sup>112</sup> Among other topics, Meggitt uses the biblical narratives (and also draws from other historical narratives which describe the emperor Vespasian’s healings in Alexandria such as Tacitus’ *The Histories*; Suetonius’ *Vespasian*, and Cassius Dio’s *Roman Histories*) to question whether or not the healings described therein necessitate a supernatural and mystical origin, or whether there might be a psychosomatic explanation for them. Meggitt focuses on the biblical texts and suggests that they contain evidence that individuals who sought healing from Jesus always approached with *knowledge* about his reputation (i.e. as a healer), his therapeutic efficacy, the *form* of his healing and his reliance on Abrahamic scriptural traditions, and the expectations that people would come with.<sup>113</sup> Though Meggitt draws primarily from the four gospel accounts, he also stakes much of his argument in “Q” (a hypothetical source thought to predate the four gospels and subsequently inform their content).

Alongside these above-mentioned works, there exists a plethora of devotee literature that falls under the category of biblical analysis. Francis MacNutt, for example, focuses on the gospel stories which include casting out demons alongside physical healings; he uses this in professing that healing and exorcism are parallel ministries and that, just as God did not desire for anyone to

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<sup>112</sup> John Meggitt, “The historical Jesus and healing: Jesus’ miracles in psychological context” in *Spiritual Healing: Scientific and Religious Perspectives*. ed. Fraser Watts (Cambridge: Cambridge University Press, 2011).

<sup>113</sup> *Ibid.*, 31-42.

battle against demonic possession, nor does He desire for anyone to battle with physical illness.<sup>114</sup> He also connects healing with salvation, claiming that “healing is simply the practical application of the basic Christian message.”<sup>115</sup> These works constitute an immense contribution to the biblical exegetical study of spiritual healing—and, due largely to contemporary Christianity’s ongoing focus on biblical texts as revelations of how healing “ought” to be conducted today (i.e. Gaiser 2011), they are a great help in developing a phenomenological understanding of spiritual healing. However, these works are here not being summarized in detail, since they are rarely cited in the academic study of spiritual healing.

## ii. Historical/Archival Work

Heather Curtis opens her book *Faith in the Great Physician: Suffering and Divine healing in American Culture, 1860-1900* with the story of Jennie Smith (circa end of the 19<sup>th</sup> century) who embraced divine healing and believed that God wanted people to be fully well. Curtis’ book is filled with similar vignettes (it is not uncommon for each chapter to start with another vignette, and also for them to be scattered throughout the chapters) that effectively convey to the reader a sense of the experiences of the practitioners of divine healing. Curtis’ self-proclaimed goal is to do a “retrospective ethnography” of divine healing.<sup>116</sup>

Curtis’ data is compiled from a variety of sources: she draws from personal letters (ones that were written back and forth between healers), diary entries, church bulletins, church-published devotional material that promoted healing, and general publications of influential divine healers such as Sarah Mix, A.B. Simpson, Charles Cullis, R.K. Carter, and A.J. Gordon. Not unlike standard ethnographic studies, Curtis’ act of delving into the world of divine healing in the 1800s allows her to gain an understanding of not only the acts, rituals, and belief systems

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<sup>114</sup> Francis MacNutt, *Healing* (USA: Ave Maria Press, 1974) 81.

<sup>115</sup> *Ibid.*, 50.

<sup>116</sup> Curtis, *Faith in the Great Physician*, 20.

involved in divine healing but also to gain a sense of the emic vocabulary used to describe these things.

She also explores many hagiographies and auto-hagiographies from the 14<sup>th</sup> century in order to contextualise the views of suffering that had been inherited by the subjects of her research. These hagiographies demonstrate a trend for individuals to promote suffering as “a stimulus for deeper mystical experience” and to interpret invalidism as a sign of God’s unique favour.<sup>117</sup> Curtis effectively argues that these hagiographies played a significant role in shaping the Church’s doctrine regarding suffering and healing; it was this very understanding that suffering was a blessing that made many individuals cautious to intentionally seek healing.

In her book *Faith Cure: Divine healing in the Holiness and Pentecostal Movements*, Nancy Hardesty tracks the development of the holiness and Pentecostal movements. Her approach is purely historical, and she draws from many primary sources (journal entries, letters from healers to supplicants, etc.). Hardesty focuses on the social influences that contextualized the divine healing movement. She summarises the historical development of the Wesleyan Holiness movement (1700s) and also synthesizes the published literature on divine healing that emerge in the 1800s from conferences and conventions. Her attention to the published literature gathered from conferences and conventions is a significant contribution to the literature, as it enables scholars to have a more thorough understanding of the rate at which the divine healing movement developed in the 1800s.

James Robinson’s trilogy on divine healing is a significant contribution to the historical study of the Charismatic healing movement within North America.<sup>118</sup> The first volume, *Divine*

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<sup>117</sup> Ibid., 37.

<sup>118</sup> James Robinson, *Divine Healing: The Formative Years* (Eugene, OR: Pickwick Publications, 2011); James Robinson, *Divine Healing: The Holiness-Pentecostal Tradition Years* (Eugene, OR: Pickwick Publications, 2013); James Robinson, *Divine Healing: The Years of Expansion* (Eugene, OR: Pickwick Publications, 2014).

*healing: The Formative Years*, summarises how divine healing developed in the early-mid 1800s, and explores the foundations it had in the transatlantic world. He locates the movement's roots in Europe (especially in Britain) and also examines the early Methodist contribution. Because he identifies the European roots as having an ongoing effect on the emerging tradition in North America, his research focuses not only on conferences and conventions held in North America, but also on those held in Europe—such as the international conferences held in north London. He draws from convention and conference brochures as well as other historical documents in order to grasp and synthesize the prevailing theological view at the emergence of divine healing—namely that miracles were a sign of God's way of attesting to the authority of Christ. His second volume, *Divine healing: The Holiness-Pentecostal Transition Years, 1890-1906*, elaborated on the way that the divine healing movement grew and strengthened, due largely to the movement's emphasis on miracles (which were a stark contrast to the church's official cessationist stance on miracles just one century prior.) His third volume, *Divine healing: The Years of Expansion, 1906-1930*, explores the way that the divine healing movement expanded throughout North America—like other scholars (i.e. Opp 2005) Robinson attributes much of the expansion to women's social networks. Robinson's research provides a depth and breadth that has not been matched by any other scholar studying the divine healing movement in North America.

Other scholars who approach spiritual healing from the standpoint of history include Robert Scott, who focuses on various Catholic healing shrines throughout Western Europe.<sup>119</sup> Scott's archival work at the famous Lourdes shrine illumines the way that many Catholic pilgrims have felt particularly attached to certain saints depending on their illness. Similarly,

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<sup>119</sup> Scott, *Miracle Cures*.

Ruth Harris<sup>120</sup>, Paula Holmes-Rodman<sup>121</sup>, and Robert Orsi<sup>122</sup> explore Catholic pilgrims' devotion to shrines in their spiritual healing journey. This is in sharp contrast to the Charismatic Catholics who have been studied in North America who generally placed little-to-no emphasis on either saints or the Virgin Mary.<sup>123</sup> Additionally, Amanda Porterfield's book *Healing in the History of Christianity* provides a good summary of Christian expressions (predominantly Western Europe and North America) of spiritual healing.<sup>124</sup> Lastly, James Opp writes the first historical study focused on spiritual healing within a Canadian context.<sup>125</sup> Opp explores the way the divine healing movement migrated from the United States to Canada during the rise of Pentecostalism. In contradiction to the works of earlier historians (i.e. George B Cutton and Keith Thomas) who only accepted claims of spiritual healing in regard to psychological (rather than physical) problems, his study includes claims of physical healing as well. Opp's work draws from written testimonials about healing—he points out that the majority of these testimonials are from females, and he suggests that this might contribute to the scholarly focus on the gendered dynamic of spiritual healing.

### iii. Interviews and Participant Observation

Anthropologists are expected to provide not only their analysis of an experience, but must also provide a full account that includes practitioners' interpretations of their own practices. This is notably easier to do when working within a contemporary context, and many scholars of contemporary spiritual healing have endeavored to include their informants' voices directly in

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<sup>120</sup> Ruth Harris, *Lourdes: Body and Spirit in the Secular Age* (London: Penguin Press, 1999) .

<sup>121</sup> Paula Holmes-Rodman, "They Told What Happened on the Road: Narrative and the Construction of Experimental Knowledge on the Pilgrimage to Chimayo, New Mexico," (Urbana: University of Illinois Press, 2004).

<sup>122</sup> Orsi, *Between Heaven and Earth*.

<sup>123</sup> Csordas, *The Sacred Self*.

<sup>124</sup> Amanda Porterfield, *Healing in the History of Christianity* (Oxford: Oxford University Press, 2005).

<sup>125</sup> James Opp, *The Lord for the Body: Religion, Medicine and Protestant Faith Healing in Canada, 1880-1930* (Montreal: McGill-Queen's University Press, 2005).

their works by providing lengthy quotations within proper context.

For example, in Thomas Csordas' study of spiritual healing in a Charismatic Catholic community, his data is gathered by way of interviews; it is notable that none of his data is from participant observation.<sup>126</sup> Csordas goes to great lengths to argue that interviews are a legitimate form of documenting experience, and he rejects the arguments of scholars who claim otherwise. He states, "Language is not only a form of observable behavior, but a medium of intersubjectivity, so that it is fair to say that language gives us authentic access to experience."<sup>127</sup> In forming this argument he draws from Heidegger, who claims that language not only represents but also "discloses." Csordas compiles his data in order to form representational profiles for both healers and supplicants within Charismatic Catholic circles. In this, he draws data from 87 experienced healers in New England in the late 1980s, and from 587 participants in five separate Catholic Charismatic healing services from a 1987 survey. He includes the details that were asked in the surveys and specifies the questions he used during his interviews. Csordas often applies a variant of textual analysis to his interview transcripts, such as when he compares three of his interviews which all described a physical healing of leg lengthening.<sup>128</sup> Csordas analyses the interviews with the skill and grace of a literary critic, and additionally applies a large degree of self-reflexivity by analyzing his own contribution to the interview "text."

Edith Turner's work on spiritual healing is informed largely from her fieldwork stays in Zambia and her anthropological research at the Knock Healing Shrine in Ireland.<sup>129</sup> Turner

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<sup>126</sup> Csordas does not explain the reason for this, but there are a variety of emic explanations which might account for this: namely, it is fundamental to most Charismatic healing (both in Catholic and Protestant contexts) that anyone who is present during a healing session must be spiritually "clean" lest they affect the healing process for the supplicant. I experienced similar things throughout my own research.

<sup>127</sup> Csordas, *The Sacred Self*, xii.

<sup>128</sup> Csordas, *The Sacred Self*, 30; 59-64.

<sup>129</sup> Edith Turner, "A Visible Spirit Form in Zambia" in *Being Changed by Cross-Cultural Encounters: The Anthropology of Extraordinary Experience*, eds. David Earl Young and Jean-Guy Goulet (Toronto: University of

recounts that a certain degree of acceptance of the insider claims of spiritual healing are necessary in order for informants' to feel comfortable enough to explain their experiences. She states, "the language of Western modernist theory is not useful for reaching the heart of a Marian pilgrimage, nor the mood of the people, nor how they heard the call to go to Knock Shrine, nor for explaining any of the healings."<sup>130</sup> Meredith McGuire also provides several case studies of spiritual healing which she contextualizes within her theory-based discussion which advocates for the study of lived religion.<sup>131</sup> Similarly, Tanya Luhrmann draws from interviews and participation observation in vineyard evangelical churches in order to gain an insider understanding of the spiritual healing (and also other evangelical expressions of faith).<sup>132</sup>

#### **iv. Participation**

Jean Guy Goulet and David Young's edited volume contains some brief accounts of spiritual healing.<sup>133</sup> These are primarily accounts of what it is like to be a Western anthropologist in the midst of a cross-cultural encounter, rather than an exploration of the phenomenon itself. Included in this work is Edith Turner's confession of seeing a visible spirit form exit a woman during her fieldwork in Zambia—the spirit was identified and then coaxed out through shamanic healing rituals.<sup>134</sup> In contrast to the reductionist scholarship on spirit possession and other spirit activity that re-explains "spirit" activities as social oppression or psychological illness, Turner's analysis of the spiritual healing concludes: "the most parsimonious explanation would be that

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Toronto Press, 1994), 71-98; Edith Turner, "Our Lady of Knock: Reflections of a Believing Anthropologist," in *New Hibernia Review* 15 no. 2. (2011), 6.

<sup>130</sup> Turner, "Our Lady of Knock," 6.

<sup>131</sup> McGuire, *Ritual Healing in Suburban America*.

<sup>132</sup> Luhrmann, *When God Talks Back*; Luhrmann et al., *The Absorption Hypothesis*.

<sup>133</sup> David Earl Young, and Jean-Guy Goulet. *Being Changed by Cross-Cultural Encounters: The Anthropology of Extraordinary Experience*. (Toronto: University of Toronto Press, 1994).

<sup>134</sup> Turner, "A Visible Spirit Form in Zambia."

spirits actually exist.”<sup>135</sup>

In this same volume, Marie-Francoise Guédon describes her participation while conducting extended fieldwork among the Northern Dene. Guédon recounts being approached by a grandmother who was grieving over the body of her close-to-death granddaughter, praying “in a loud voice to Jesus, asking him to send back her grandchild.”<sup>136</sup> Guédon was asked to participate in a healing ritual for the girl. She recounts taking hold of the grandmother’s hand and using what Guédon refers to as her “own mental processes” for over an hour, until the sick girl finally was healed. Guédon does not offer a reductionist explanation for the experience; she rather asserts “I could not describe what had happened.”<sup>137</sup>

Additionally, this volume references an account by anthropologist Jacob Loewen who was working alongside a Christian missionary, David, in Panama. David and Loewen were—rather ironically— excluded from the community’s healing rituals due to what the community described as the missionaries’ “lack of faith.” The community interpreted the biblical passages on healing (provided to by the missionaries) to specify that authentic faith was required for healing results. But because the missionaries favoured traditionally “Western” medical views of healing over the concept of faith-based prayer healing, the community intentionally excluded them from the community’s prayer time. Loewen recalls the leading men of the church apologetically pulling him aside and saying “I am sorry, but [the healing] doesn’t work when you and David are in the circle. You and David don’t really believe.”<sup>138</sup>

Such accounts are notable within the literature on spiritual healing because they are

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<sup>135</sup> Ibid., 87.

<sup>136</sup> Marie-Francoise Guédon, “Dene Ways and the Ethnographer’s Culture.” In *Being Changed by Cross-Cultural Encounters: The Anthropology of Extraordinary Experience*, eds. David Earl Young and Jean-Guy Goulet (Toronto: University of Toronto Press, 1994), 56.

<sup>137</sup> Ibid.

<sup>138</sup> Jacob Loewen, “Problems for Export: Part 1” (in *Milligan Missiogram* 1(4): 4-11. 1974).

written by Western-trained anthropologists who, rather than offering an alternate explanation for the healing (i.e. one that contradicts the emic understanding), explore their own experience of, and involvement with, their research participants' practices of spiritual healing. These accounts often share the phenomenological "bracketing out" of questions of factual validity or rational-empirical explanations; rather, the very absence of a reductionist explanation is what makes such works particularly interesting—and, I think, exceptionally notable—within the study of spiritual healing. While this type of scholarly work is essentially limited to those anthropologists who are able to participate in and/or observe at length the spiritual healing processes of their informants, each of these diverse methodological approaches summarized above have helped in forming a phenomenological understanding of spiritual healing.<sup>139</sup>

### **2.3 Common Trends of Analysis of Spiritual Healing**

The following section explores some of the general trends that have emerged in the analytical study of spiritual healing. In contrast to phenomenological efforts, which seek to understand insider experiences of spiritual healing, these analytical trends focus on aspects that, I have found, are rarely discussed by insiders. Although it is worth acknowledging that certain reductionist-analytical studies sometimes dismiss the very claims of insiders or portray their ideas as naïve/deluded, and end up relegating research participants to the realm of "other," some of these very analytical studies are extremely helpful in understanding some of the broader sociological influences and impacts of spiritual healing. Accordingly, I summarise some of the general trends below.<sup>140</sup>

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<sup>139</sup> It is worth being reminded of, as discussed above, certain practitioners of spiritual healing do not allow an outsider to be present for a variety of spiritual reasons.

<sup>140</sup> See Orsi, *Between Heaven and Earth*, for further discussion of the way in which reductionist-analytical studies can render informants' claims as "dangerously deluded."

### **i. Social Function**

In their discussion of what they call “religiomagical healing in nonindustrialised societies,” Frank and Frank assert that it is a cross-cultural occurrence to attribute illness and/or cure to “the paranormal or supernatural.”<sup>141</sup> However, in contrast to this emic focus, scholars are often infinitely more interested in analysing that which can be attributed to the human beings involved, and seek to know how these contributions impact the society at large. This section synthesizes some of the most prominent scholarship that considers the social function of spiritual healing.

A common aspect of spiritual healing considered in the academic literature is the “initiatory illness” of the healer.<sup>142</sup> Rarely do spiritual healers become healers without experiencing some level of suffering that, amongst many practitioners of spiritual healing, is thought to uniquely enable them to be a healer. Many scholars have identified that it is common for a healer to first go through the process of being healed before they can adopt the role of healer. Joan Halifax, Frank and Frank, Thomas Csordas, James Dow, among others, identify this as a cross-cultural trend. However, this belief takes different forms depending on the religious context. For example, Anne Fadiman’s study of traditional Hmong healing suggests that the initiatory illness of a shaman is experienced as seizures: the seizures are seen as a forewarning of what is to come—and what is to come often involves an increase of seizures identified with shamanic practices.<sup>143</sup> In this scenario, the “illness” itself is in fact a necessary component of the ability to heal. In a slightly different vein, Charismatic Christians perceive the healer’s former “illness” to be a necessary precursory step in becoming “whole” or “restored” enough to begin to help others in this same way. Csordas describes the Charismatic Catholic transition from

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<sup>141</sup> Frank and Frank, *Persuasion and Healing*, 88.

<sup>142</sup> see Csordas, *The Sacred Self* for a summary. I also discuss this in Chapter three, when discussing the case study of Soraya.

<sup>143</sup> Fadiman, *The Spirit Catches You and You Fall Down*.

supplicant to healer as natural way of continuing the spiritual healing system; supplicants can “graduate” to the role of healer and can in turn heal more supplicants, some of which will in turn become healers. Csordas notes that his research participants understood certain individuals to be more gifted than others at healing, but that determination and perseverance was in itself a way of becoming an effective healer. He explains, “one does not only pray for others because one is gifted; one can receive the gift because one prays for others.”<sup>144</sup> In his subsequent work, Csordas details the processes of becoming a healer within Charismatic circles and describes the way that certain individuals are identified as having the gift of healing.<sup>145</sup> Tanya Luhrmann also provides examples of cases where individuals intentionally “increase” or “focus on” their prayer practice in order to deepen the healing effect they might have. Luhrmann also describes individuals who focus exclusively on one variant of healing—i.e. on inner healing rather than on physical healing—in order to develop a specific gift of healing.<sup>146</sup>

Scholars also explore the way that spiritual healing contributes to the cohesiveness of a group—sometimes to the point of practitioners making an exclusive commitment to this type of practice. For example, Christianity in particular has a reputation for making a strong distinction between ‘true’ and ‘counterfeit’ healing.<sup>147</sup> Historians have pointed out that this is not by any means a recent phenomenon, but that even the early years of the divine healing movement specified that certain non-Christian types of alternative healing might cause spiritual, and even physical, harm to the supplicant if the “counterfeit healing” is in fact demonic in nature.<sup>148</sup>

Scholars suggest that such doctrinal views of spiritual healing effectively served to promote Christian-specific healing techniques. The group’s beliefs are also strengthened by the fact that

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<sup>144</sup> Csordas, *The Sacred Self*, 29.

<sup>145</sup> Csordas, *Body, Meaning, and Healing*.

<sup>146</sup> Luhrmann, *When God Talks Back*, 124.

<sup>147</sup> McGuire, *Lived Religion*, 44.

<sup>148</sup> Curtis, *Faith in the Great Physician*, 126.

spiritual healing practices often suggest solutions that have spiritual implications. For example, in a contemporary case study, Emma Anderson summarises the way that healers suggested to a supplicant, Lisa, that Lisa's view of her "earthly father" ought to be replaced with an idea of the "Heavenly father." Anderson argues that this shift in viewpoint, identified to Lisa as a crucial part in her healing process, resulted in a deepened commitment to the spiritual group's ideology and worldview about God.<sup>149</sup>

Additionally, many scholars focus on the way that spiritual healing promotes positive mental health within a group of practitioners. Significantly, this scholarly analysis aligns with many insider views on spiritual healing: for example, Francis MacNutt claims that individual healing ought to result in "the healing of broken relationships, the healing of a broken society, and a healing of a world tormented by institutional injustice and the threat of war."<sup>150</sup> Candy Brown argues something remarkably similar: individual healing practices create "an effervescence or augmentation of morally suffused emotional energy."<sup>151</sup> She explains that the practice of spiritual healing seems to add to individuals' motivation to express "greater love for God and other people. As motivational energy empowers benevolent actions, the effects snowball."<sup>152</sup> She is not alone in this stance. Other scholars who also claim that the practice of spiritual healing has a positive effect on society due to an identifiable increase of love for others include Frank and Frank, Dow, Gilbert and Gilbert, Csordas, Luhrmann, and McGuire.

## ii. Gender

Scholars have long-identified the reality that women are generally more prevalent within spiritual practices than men and that the social conditioning of gender makes it so that women

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<sup>149</sup> Emma Anderson, "Self, Suffering, and Religious Experience: Lisa's Story," Paper presented at the AAR, 1997.

<sup>150</sup> MacNutt, *Healing*, 25.

<sup>151</sup> Brown, *Testing Prayer*, 285.

<sup>152</sup> *Ibid.*

seem specifically prone to experience more “religious experiences” than men.<sup>153</sup> Although several pages could be written on the review of gendered studies of spiritual healing, I will only briefly summarise this trend by mentioning a few key scholars. Based on the prevalence of women in religion, it is not surprising that many scholars of spiritual healing and/or possession focus a substantial portion of their analyses on the gendered dynamics of healing. For example, Heather Curtis frequently returns to a feminist paradigm; she is very interested in the way that divine healing movement influenced the lives of women—such as changing the way that suffering was conceived of within the Christian community, etc.

In her study of the Knock Healing Shrine, Edith Turner provides an interesting feminist analysis of spiritual healing.<sup>154</sup> Rather than focusing on the individuals who seek out and/or participate in spiritual healing (as many other scholars have been prone to do) Turner focuses on the representation of the healing power. She argues that the Knock pilgrimage shrine was initially centered on the statue of Our Lady. Based on her ethnographic observations at the shrine, Turner concludes that the focus has since shifted from Our Lady to the statue of Christ as the Lamb of God. She uses this observation as a foundational point for her analysis of women within spiritual healing, and suggests that Church, patriarchal culture, and Western rationalist scholarship has attempted to eradicate the shrine’s original emphasis on “female healing power.”<sup>155</sup> The topic of gender is also explored in James Robinson’s second volume of *Divine Healing*, where he devotes an entire chapter to the ways that females contributed to the rise and spread of the divine healing movement, and in James Opp’s *The Lord for the Body*.

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<sup>153</sup> see Valla and Prince, “Religious Experiences as Self-Healing Mechanisms” (1989); Bourguignon, *Possession* (1976), among others.

<sup>154</sup> Turner, “Our Lady of Knock.”

<sup>155</sup> In my opinion, Turner’s argument requires more nuanced evidence. Her argument is built upon the fact that the Lamb of God statue was added recently and endorsed by the (what Turner emphasizes to be “patriarchal”) Church. However, Turner’s own interviews (which correspond to my own ethnographic work conducted at the same shrine) suggest that participants are still greatly concerned with the Our Lady statue, moreso than with the statue of Christ.

Thomas Csordas adds rather interesting data to the discussion of the gendered dynamics of spiritual healing.<sup>156</sup> Typical to other studies, Csordas found that the majority of individuals involved in spiritual healing (both as healers and as supplicants) were female—77% of Csordas’ interviewees were women. However, a closer analysis of Csordas’ data demonstrates that, although there were more women than men among his research participants, women and men seem to respond equally to prayer ministry—there is no sense that prayer healing was more efficacious for females than for males.<sup>157</sup> Amongst his research participants, women and men (as percentages of the total number of respective women and men involved) experienced a practically-equal amount of “restings in the spirit” and other healing-specific experiences. This is a particularly interesting contribution to the field, since most scholars who study the gendered dynamic on healing focus only on the fact that women are more prevalent within the practice; Csordas notes the way that similar percentages of men and women (of those who practice healing) seem to experience comparable effects.

### iii. Imagination

Another recurring trend in the study of spiritual healing is for scholars to focus on the role that the imagination plays. Csordas notes the way in which Geertz has “described the study of religiously-motivated changes and its persuasive force as ‘the social history of the imagination’”<sup>158</sup> Geertz’ use of the word “imagination” is revealing, and has initiated many scholars of religious experience to focus on what precisely is involved in imaginative processes. Interestingly, in discussions where imagination is applied specifically to mystical-spiritual experiences, Csordas traces this focus back to Erika Bourguignon’s pioneering works in which

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<sup>156</sup> Csordas, *The Sacred Self*.

<sup>157</sup> *Ibid.*, 32

<sup>158</sup> Clifford Geertz, *Islam Observed: Religious Development in Morocco and Indonesia* (Chicago: University of Chicago Press, 1968) quoted in Csordas, *The Sacred Self*, 74.

she termed “ethnopsychiatry.”<sup>159</sup> Although Bourguignon’s own approach differs from many of the scholars who will be subsequently explored, her initiatory contribution to the field must be recognized. Bourguignon saw her study of people’s beliefs about possession not as a study of possession but as a way to learn more about the people who believed in it—she saw a disbelief in legitimate possession as “healthy skepticism.”<sup>160</sup> The scholars who I explore follow Bourguignon’s example of attempting to understand the phenomenon at hand, but do not go quite so far as to suggest that disbelief is healthy.

It does not require much exposure to spiritual healing before recognizing that imagination plays a role in the healing process. As Luhrmann clarifies, this is not to say that healing is imaginary (i.e. fictional and made up) but that it can be, at times, vividly experienced in an individual’s own mind by way of mental images and other things (whether these be waking visions, dreams, prophetic senses, audible words, perhaps even music) that are not experienced simultaneously by those around them.<sup>161</sup> Similarly, Csordas defines his use of imagination to relate to the root of the word imagination, which is to experience *images*.<sup>162</sup> In this sense, imagination is a mode of orienting oneself in the world and of experiencing the world through images; this understanding of the word “imagination” is vital; scholars explore the role that this sort of imagination plays in spiritual healing.

Csordas recounts how many Charismatic Catholics used “the Shoe Test” in their healing sessions.<sup>163</sup> The Shoe Test was perceived to be an exercise in using one’s imaginative faculties: one would be asked to think of a shoe—any shoe—and describe that shoe with as much detail as possible. The greater amount of detail one could identify (and, subsequently, describe), the

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<sup>159</sup> Erika Bourguignon, *The Effectiveness of Religious Healing Movements : A Review of Recent Literature* (1976).

<sup>160</sup> Erika Bouguignon, *Possession* (San Francisco: Chandler and Sharp, 1976), 14.

<sup>161</sup> Luhrmann, *When God Talks Back*.

<sup>162</sup> Csordas, *The Sacred Self*, 74.

<sup>163</sup> *Ibid.*, 76.

greater likelihood one had of being able to visualize and identify mental-images that might prove to be helpful in his or her own healing process. Csordas notes that the very inability to imagine a shoe upon request was viewed as an indicator that the individual's imagination was in need of healing. Imagination was thus "culturally defined as an inherent human capacity that, if inoperative, can be healed by divine intervention."<sup>164</sup> However, it is not only something that can be healed, but (as many practitioners of spiritual healing readily point out to the scholars who study them) imagination can also be used as a means through which to attain healing. This has been further documented by Heather Curtis, Nancy Hardesty, Thomas Csordas, Meredith McGuire, and Tanya Luhrmann, among others.

Certain scholars have delved deeper into their consideration of the role of imagination and have suggested that it is a skill that can be learned, improved upon, and (perchance) ultimately mastered. Tanya Luhrmann, approaching her anthropological work with her own background in psychology, suggests there is a likelihood that certain individuals have a more innate ability to use their imagination in a way that contributes to spiritual healing.<sup>165</sup> This idea is also propagated by Dossey who synthesizes several empirical studies that suggest that prayer is a skill that can be learned and improved upon—but, like most skills, some individuals will be innately more gifted at prayer than others.<sup>166</sup> Although most "imagination" experiences during spiritual healing can be defined as a basic trance state—suggesting there to be a degree subconscious element at work—further degrees of unconsciousness have also been focused on. In the psychological and neurological approaches to spiritual healing, other scholars such as Larry Dossey and Barbara Tedlock have concentrated on the imaginative faculties that are at

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<sup>164</sup> Ibid., 78.

<sup>165</sup> Luhrmann, *When God Talks Back*.

<sup>166</sup> Larry Dossey, *Prayer is Good Medicine: How to Reap the Healing Benefits of Prayer* (San Francisco, HarperOne:1997), 79.

work during dreams.<sup>167</sup>

As is typical to anthropology and sociology, Csordas emphasizes the way that imagination is culturally-constituted and is reliant on the religious background of the individual. This, he suggests, is why Catholics rather than Protestants receive imagery involving the Virgin, etc. Csordas identifies two prominent forms of imagery that occur in spiritual healing: revelatory and therapeutic images. His data is drawn from Charismatic Catholicism but, much like Watt's definition of spiritual healing, his claims remain broad enough to be applied to other religious/cultural experiences. Revelatory images are often shown to the healer rather than to the supplicant (though it is perceived to be particularly important when a matching revelatory image is given both to the healer and the suppliant). They are often spontaneous, and serve to show that divine power (generally understood to be the Holy Spirit) is active, or reveal content of what needs to be healed.

Therapeutic imagery often occurs in the mind of the supplicant, whereas revelatory imagery is more common in the mind of the healer—though both types of images can occur in either the supplicant or the healer. Therapeutic imagery might occur spontaneously, but it seems that it is more often than not the result of intentionally seeking such an image. Within Charismatic Christianity, the healer encourages the supplicant to be “open” to divine inspiration, and might even ask him/her to use their imagination to re-enter a certain scenario where trauma was encountered (see *Lynda* and *Sarah*, among others, as well as the case studies from my own research, which I explore in chapter 3). Csordas provides a brief overview of the literature focused on imagery used in healing, and concludes that anthropologists focus mostly on

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<sup>167</sup> Barbara Tedlock, *Dreaming: Anthropological and Psychological Perspectives* (Cambridge: Cambridge University, 1987).

revelatory images while psychologists focus on therapeutic ones.<sup>168</sup> Due in part to the cultural interest in on psychoanalysis, the latter type of imagery has a much greater amount of literature than the former.

The above discussion has been focused on the use of imagination (that is, the experience of images) in spiritual healing. But there is also a trend among scholars of spiritual healing to discuss (what are presumed to be) the “imagined results” of healing in any given instance. This approach need not entail a direct dismissal of healing experiences as if they hold no substance in the world outside the individual’s imagination. Rather, this approach explores the way that an individual can be convinced of his/her individual healing despite there being no rational explanation for the healing.

Drawing from the work of Kidel<sup>169</sup>, Bruce Kinsey discusses the longstanding view, originating from the discipline of psychology, that many non-medical healings (that is, anything classified as a “healing” that does not use standard western medicinal approaches) are better defined as a concealing or a closing of certain traumatic events.<sup>170</sup> This suggests that the “healing” occurs by way of either partially re-defining or fully denying the “illness”/ “trauma.” Kidel plays on the word “recovery” in stating that every act of recovery is simultaneously an act of re-covering.<sup>171</sup> Although this approach is most common within the psychological study of healing, Csordas provides good evidence to suggest that it has become an increasingly common approach for scholars of religious studies to look at “healing” as if it were a result of the patient transforming the meaning of the illness.<sup>172</sup> The claim that patients of spiritual healing are “transforming the meaning of illness” is purported by Curtis who claims that the divine healing

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<sup>168</sup> Csordas, *The Sacred Self*, 75.

<sup>169</sup> Kidel, M. and S. Rowe-Leete (eds.) *The meaning of illness*. (London: Routledge, 1988).

<sup>170</sup> Kinsey, “The Psychodynamics of Spiritual Healing.”

<sup>171</sup> qtd. in Kinsey, “The Psychodynamics of Spiritual Healing,” 94.

<sup>172</sup> Csordas, *The Sacred Self*, 70.

practices in the 1900s relied on individuals' mental faculties: she explains that prominent healers like A.B. Simpson and Charles Cullis professed that healing had successfully occurred, regardless of whether or not patients' symptoms disappeared. These scholars suggest that the imagination is used in redefining healing.

A second dominant view that focuses on the patient's imaginative processes links it with placebo theory. Justin Meggitt draws from multiple medical studies to summarise the way that placebos can effect not simply a patient's perception of a symptom, but can also alter their actual bodily processes.<sup>173</sup> Outside of medical studies, placebos have often been stereotypically understood to affect psychological problems—a way of succeeding in the “mind over matter” game when there is no “real” illness to be combatted. However, empirical medical studies of placebo efficacy has demonstrated that placebo effects are physical—for instance placebo knee surgeries<sup>174</sup> and even placebo heart surgeries<sup>175</sup> can be almost as effective as conducting the actual medical surgeries. Beginning in 1996 and still currently active, the Spontaneous Remission Bibliography Project has compiled over 3,500 case studies from the medical literature which describe patients spontaneously experiencing “the disappearance, complete or incomplete, of a disease or cancer without medical treatment or treatment that is considered inadequate to produce the resulting disappearance of disease symptoms or tumor.”<sup>176</sup> Meggitt claims “the placebo clearly tells us something remarkable and puzzling about the capacity for human beings

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<sup>173</sup> Meggitt, “The historical Jesus and healing,” 32.

<sup>174</sup> J.B. Moseley, et al. “Arthroscopic treatment of osteoarthritis of the knee: A prospective, randomized, placebo controlled trial,” in *The American Journal of Sports Medicine* (1996).

<sup>175</sup> Moerman, D. *Meaning, Medicine and the 'Placebo Effect.'* (Cambridge: Cambridge University Press, 2002).

<sup>176</sup> “Spontaneous Remission Bibliography Project,” *Institute of Noetic Sciences: Spontaneous Remission Bibliography Project*, accessed July 11, 2014, <http://noetic.org/research/project/online-spontaneous-remission-bibliography-project>.

to activate [...] a rich and complex repertoire of healing processes by which they may be able to ‘heal’ themselves.”<sup>177</sup>

#### iv. Body

Merleau-Ponty rejected the empiricist position that objects are a stimulus reliant on intellect/interpretation.<sup>178</sup> Rather, he claimed that all objects contain an infinite number of possible interpretations, and so they rely on a subject (more specifically, an individual’s body) before they can be interpreted/experienced. This suggests that perception ends in objects but begins in the body. The body can thus be perceived as a crucial starting point within the phenomenological study of spiritual healing. Drawing from this, Csordas suggests that the body is an “existential ground of culture and self rather than simply [a] biological substrate.”<sup>179</sup> The individual body, as explored in the Introduction, is the grounds on which spiritual healing is experienced. It is therefore not surprising that many scholars who approach spiritual healing in a phenomenological manner focus on the aspects that are experienced in the corporeal body—even when physical healing is not the primary goal of a healing attempt. But it is important to further note that this focus on the corporeal body is also reflective of the way that practitioners of spiritual healing explain their experiences: much emphasis is placed on bodily experiences.

Some of the most common bodily processes that have been noted by scholars include: the laying on of hands, speaking in tongues (*glossolalia*), trances, body tremors, body shakes, or loss of bodily control (i.e. falling over to the ground—often identified by Charismatic Christians as “baptism in the spirit”), and dancing, among others. Curtis identifies that practices such as body shaking and visions were initially discouraged by practitioners of divine healing because they were too associated with other (non-Christian) healing rituals, but then some influential healers

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<sup>177</sup> Meggitt, “The historical Jesus and healing,” 36.

<sup>178</sup> Merleau-Ponty, *The Phenomenology of Perception*.

<sup>179</sup> Csordas. *Body, Meaning, and Healing*, 4.

argued that even these things could be used by God if used in a legitimate Christian sense, and so they began to gain more acceptance/ popularity.<sup>180</sup>

Csordas also focuses on these bodily reactions to healing. Specifically, he discusses the way that Charismatics understand “baptism in the spirit” and the laying on of hands to promote varieties of healing (i.e. psychological, emotional, physical, and spiritual).<sup>181</sup> Csordas relates these phenomena to his theoretical discussion of the “sacred self,” and suggests that the Charismatic view of human beings (comprising of mind, body, and spirit) relates directly to the Charismatic view of God (comprising of Father, Son, and Spirit). Csordas posits that Charismatics view their corporeal bodies (reliant on mind and spirit) as being capable of accessing the whole of the divine.

Luhrmann’s participant observation in Vineyard and Evangelical churches demonstrate that emotions are experienced not simply within one’s mind but with the whole of one’s body: it was not uncommon for individuals to experience very bodily reactions during worship services, such as massive sobbing periods. This did not confuse nor disrupt others from their own worship sessions because it was unanimously understood that such reactions are in fact a good part of worship: they were believed to heal the spirit. One common way for individuals to react to someone who might be experiencing such a crying session would be to “lay hands” on them. Words were rarely exchanged; rather the emphasis was placed on bodily contact, and the individual receiving the laying on of hands often continued (if not increased) their depth of sobs. Luhrmann assesses that such practices were “meant to remind you that you are loved completely by a great and mighty God and that the world, imperfect as it is, is good.”<sup>182</sup>

Malcolm MacLachlan explores the way physiology and psychology become interlinked

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<sup>180</sup> Curtis, *Faith in the Great Physician*, 132.

<sup>181</sup> Csordas, *The Sacred Self*, 21-22.

<sup>182</sup> Luhrmann, *When God Talks Back*, 113.

in healing processes.<sup>183</sup> His focus is not exclusively on alternative/spiritual healing, but his discussion on the interconnectedness between body and mind/spirit are an interesting contribution to the discussion of spiritual healing. He identifies that western medicine often attempts to objectify disease and illness and to speak of it as if it is separate from the individual's "true" body—he provides the example doctors speak of chemotherapy being used to fight *cancer* when in reality its processes attack the entire body of the patient.<sup>184</sup> He also discusses the way that individuals who suffer from chronic pain speak of their pain as if it were separate from them—there is their "normal self" and then there is their "self" that is driven by pain. He argues that "pain is almost experienced as an authoritarian figure that compels them to act against their better judgment."<sup>185</sup> I believe MacLachlan's helpful analyses of pain can be applied to discussions of spiritual healing. Specifically, I see significant resonance between MacLachlan's informants' tendency to isolate and objectify their physical pain and the way that practitioners often go about spiritual healing processes—for example, amongst both Csordas' Charismatic Catholics and McGuire's Charismatic Protestant research participants, evil spirits are isolated and identified with specific names ("Lust," "Trauma," "Bitterness" etc.) and are blamed for their corresponding sins. In the same way that creating a fictional isolation between cancerous tumours and an individual's body allows a doctor to proceed with certain treatments without the patient feeling holistically "under attack," so too can attributing actions/behaviours to an outward source allow a spiritual healer to proceed without making the supplicant feel "under attack."<sup>186</sup>

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<sup>183</sup> Malcolm MacLachlan, *Embodiment: Clinical, Critical, and Cultural Perspectives on Health and Illness*, (Maidenhead, UK: Open University Press, 2004).

<sup>184</sup> *Ibid.*, 27.

<sup>185</sup> *Ibid.*, 31.

<sup>186</sup> As already alluded to, the study of pain cannot be separated from its theological and political background. In the medieval Christian sense of the term, pain was "beneficial" as it increased spiritual progress. The cultural context of pain is directly related to how healing is defined, and to our treatment of the body.

Additionally, many scholars focus on the way that practitioners within specific religious contexts view the body as source/vehicle/channel for divine power.<sup>187</sup> This healing power is understood by insiders to be something that transcends the practitioners, but, importantly, is experienced in the corporeal body. It is in this light that James Opp describes spiritual healing as “a series of performances, a way of understanding religion acting through the body.”<sup>188</sup>

## v. Scientific Study

To be sure, there is a significant amount of scholarship that has discarded the notion that spiritual beliefs/practices can be studied through a scientific lens. These range from those who think the spiritual beliefs are themselves purportedly absurd—such as David Hume’s early rejection of miracles which was a mainstream view in the 19<sup>th</sup> century, or, more recently, Christopher Hitchens’ declaration that good science disproves spiritual beliefs<sup>189</sup>—to those who, in the midst of their acceptance of spiritual beliefs, believe that spiritual experiences necessitate a different methodological approach because they are fundamentally different than science. The latter position has been proposed by individuals such as Soren Kierkegaard and William James. And yet, in spite of the number of wide-ranging arguments which are in favour of *not* approaching spiritual phenomena through a scientific lens, certain scholars have advocated for an increase of scientific methodology in relation to the study of spiritual healing in particular.

Despite there being a few works on the topic (see Benor 2005 for a thorough summary), Fraser Watts claims that the scientific study of spiritual healing has been “completely neglected.” Watts’ justification for this claim is that the few works that do exist neither delve deeply enough into the experience of healing (thereby losing credibility with the theological parties involved) or

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<sup>187</sup> This is explored by Kinsey (2011), Luhmann (2012), Curtis (2007), MacNutt (1977), Watts (2011), Anderson (1997), Csordas (1994 & 2002), McGuire (1988 & 2011), among others.

<sup>188</sup> Opp, *The Lord for the Body*, 13; See also Mary Keller’s *The Hammer and the Flute* for an interesting discussion of the “performative” aspects of spirit possession.

<sup>189</sup> See Hume, *Of Miracles* and Hitchens, *God is Not Great*.

they have not been accepted as credible within the scientific communities. Watts acknowledges that the scientific study of spiritual healing is intrinsically limited, but he believes that these limitations are not permanent and that, as scientific methods have developed and broadened, things like spiritual healing can be studied scientifically. Watts emphasizes that his desire is to see the expansion of the scientific method of inquiry—indeed, he wants it to expand to a point where mystical experiences such as healing can be scientifically-studied.

Current rational-empirical ways of understanding the world do not allow for the sort of miracles claimed by individual practitioners of spiritual healing to be scientifically “proven”: there is no “scientific” explanation for the instantaneous dissolution of matter (one instead calls to mind Lavoiser’s conservation of mass law which states that matter cannot be created or destroyed), nor can scientific understandings of metal compounds and/or the human body explain how a metal rod (installed medically for the purpose of re-orienting and stabilizing the spinal cord) can break into small pieces and exit the body without leaving an identifying mark in the flesh—both of these instances are claims I have come across in my own fieldwork on spiritual healing, and they hardly seem compatible with what we understood as “science.” One therefore might be tempted to draw the conclusion that to study spiritual healing with a scientific method must be to either dismiss practitioners’ claims as naïve/deluded or to take a complete step away from the study and to assert that such things simply cannot be studied scientifically.

Interestingly, Watts does not advocate for either of these reactions. Rather, after explaining that science has continuously expanded, altered, and broadened its framework of inquiry, he states his desire to see science continue to broaden its framework and its tools in order to expand to a point where it can study spiritual healing. He asserts that theology and science are complementary to each other because they answer different questions, but he desires

for science to reach a point where it is “scientifically acceptable” to study occurrences such as healings that may not readily have any scientific explanations.<sup>190</sup> Significantly, Watts does not offer any “next steps” of how to journey toward a place where the scientific study of healing can be developed further. Fortunately, some medically-trained scientists have been involved in this process. For instance Stanislav Groff, one of the founders of the field of transpersonal psychology, has studied the healing power of nonordinary states of consciousness and Carl Simonton and his colleagues have focused on self-awareness techniques as a form of treatment for cancer patients.<sup>191</sup> Additionally, psychologist Lawrence LeShan did pioneer work on the scientific study of healing through meditative prayer, but was interested in describing and defining the context of the occurrence of healing, not its theological underpinnings.<sup>192</sup>

Some thirty years after LeShan, Candy Gunther Brown’s 2010 study of the efficacy of prayer attracted a significant amount of media interest, some of which was particularly negative and asserted that the topics of her study (prayer, among other things) were not things that could be legitimately explored with rational-empirical methods. Brown addresses this in the introductory chapter of her 2012 publication and argues that the alleged “divide” between things of science and things of religion is always thin, and that there is frequently significant overlap between the two. She suggests that both science and religion are “ways of constructing what is ‘real’ in the world rather than offering transparent windows onto reality.”<sup>193</sup> Looking to the neuroscientific studies that have been conducted on the meditative practices of Buddhist monks as an example, she argues that there are ways to respect the beliefs and values of both sides while

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<sup>190</sup> Watts, *Spiritual Healing*, 11.

<sup>191</sup> Stanislav Groff, *Spiritual Emergency: When Personal Transformation Becomes a Crisis* (Los Angeles, CA: Tarcher, 1989); Carl Simonton et al, *Getting Well Again* (Ohio, USA: Bantam Books, 1992).

<sup>192</sup> Lawrence LeShan, *Alternate Realities: The Search for the Full Human Being* (1976); Lawrence LeShan, *You Can Fight For Your Life: Emotional Factors in the Treatment of Cancer* (1980); Lawrence LeShan, *Holistic Health: How to Understand and Use the Revolution in Medicine* (1984).

<sup>193</sup> Brown, *Testing Prayer*, 3.

exploring the possible overlap between the two.<sup>194</sup> Brown argues that academics can and should study prayer healing in a scientific way, and she proposes a four-step model of how this can be accomplished. This proposition is important because it continues an active effort to establish a scientific study of spiritual healing. Her suggestions are: (1) to collect before and after medical records; (2) to conduct surveys in order to hear people's experiences and what they perceive to happen; (3) to conduct clinical trials; (4) to follow up interviews in order to determine the amount of (/if there remain any) lasting effects of the initial healing.

Brown is not over-zealous or naïve in her push for the scientific study of spiritual healing. She recognises that, like any methodological approach, the empirical-rational method has its intrinsic limitations and she admits there will be certain questions that will likely remain unanswerable by scientific inquiry. However, her motivation behind her push for the scientific method is rather intriguing. Contrary to what one might assume, Brown does not seem primarily interested in scientific inquiry in order to determine the factual validity or efficacy of spiritual healing—although this is something she takes into consideration.<sup>195</sup> Rather, perhaps building from Watts' assertion that the two approaches can complement each other, Brown argues that there is a reciprocal benefit (between theologians/practitioners and scientists) that can arise from the scientific study of healing: she claims, “just as theological understandings can help scientists to steer clear of methodological pitfalls in the study of prayer, empirical studies can help theologians avoid erroneous reasoning.”<sup>196</sup>

Brown is not alone in advocating for more empirical studies of prayer healing. Indeed,

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<sup>194</sup> Studies of the meditative practices of Buddhist monks increased after the Dalai Lama gave a speech at the Society for Neuroscience's 2005 annual meeting in Washington D.C., in which he advocated for Tibetan Buddhist monks to participate in such research. Perhaps one of the most renowned neuroscientists in this field is Richard Davidson (Waisman Center). See also the work of Zoran Josipovic who has been conducting neurological studies on Tibetan Buddhist monks since 2008.

<sup>195</sup> In *Testing Prayer*, Brown claims that if prayer healing is either objectively beneficial or detrimental then science ought to know in order to maximise healing efforts (p. 278).

<sup>196</sup> Brown, *Testing Prayer*, 12.

Larry Dossey (a medical physician) advocates for the scientific study of prayer healing. Dossey specifies that the main limit of the scientific method is that, although it can document the claims of spiritual healing, it can never explain how prayer works. Dossey argues that, often, spiritual healing practitioners are hesitant to involve themselves in a “scientific” or “medical” study because they feel as if someone is out to point out the allegedly ignorant aspects of their faith system. However, there are scientists whose goal is quite different than this: Dossey quotes one researcher (working in a scientific lab on the study of prayer) who claimed, “We are not setting a trap to catch God in, we are opening a window to watch God work.”<sup>197</sup> This sort of approach is certainly the case for some practitioners of spiritual healing—one need only to glimpse through some of the best-selling devotee literature on Christian Charismatic healing to note the emphasis that is placed on medical validations of healing claims. Books like *Sarah*<sup>198</sup> and *Lynda*<sup>199</sup>, both of which are individual testimonials of prayer healing, are filled with doctors’ notes and medical examinations in order to establish the reality of the illness and the success of the healing. *Lynda* goes so far as to devote a substantial page count to testimonials given by doctors and other medical practitioners who witnessed Lynda’s on-the-spot physical healing at a healing conference. Charles Emmon and Jeff Sobal also add to the larger context of empirical studies of the paranormal by studying 1500+ adults who identify as Protestant Christians who experience some aspects of the paranormal—i.e. prophesy, spiritual healing, etc.<sup>200</sup>

Dossey claims that—although there is no “conclusive” evidence—there has indeed been a sufficient amount of “scientific evidence” to suggest that there are in fact several beneficial results of using prayer to promote healing, and he calls upon doctors to make use of this

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<sup>197</sup> Dossey, *Prayer is Good Medicine*, 15.

<sup>198</sup> Sarah Shaw, *Sarah* (England: Sovereign World Publishers, 2009).

<sup>199</sup> Lynda Scott, *Lynda: from accident and trauma to healing and wholeness* (England: Sovereign World Ltd, 2010).

<sup>200</sup> Charles Emmons and J Sobal, “Paranormal Beliefs: Testing the Marginality Hypothesis” in *Sociological Focus*, 1981.

treatment the same way they would make use of other treatment methods. Not unlike the doctors in the 1850s who were also proponents of divine healing,<sup>201</sup> Dossey admits he frequently uses prayer as a method of treatment. However, unlike the doctors of the earlier divine healing movement, Dossey encourages physicians to continue to use traditionally “western” medicine techniques alongside their use of prayer.<sup>202</sup> This suggestion is also given by Francis MacNutt, who (from the theological side of things) encourages practitioners of spiritual healing to continue to use standard western medicine. MacNutt believes that medicine should not be set in opposition to prayer.<sup>203</sup>

## Conclusion

In this chapter, I have attempted to provide a basic phenomenological understanding of the study of spiritual healing by defining key terminologies, identifying significant scholars within this field and categorising them by their methodological approach, and synthesizing some of the general trends explored within the academic study of spiritual healing. I have concentrated primarily on the scholars who adopt a phenomenological approach to the topic of spiritual healing, whose focus is primarily on the experience of spiritual healing itself, and who use psychological analyses and commentaries on social functionalism and other theories as a secondary component of their studies.

These studies of spiritual healing are not conducted in a vacuum; rather, they exist alongside a plethora of related scholarship that questions topics like philosophical theology and

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<sup>201</sup> Curtis, *Faith in the Great Physician*; Hardesty, *Faith Cure*.

<sup>202</sup> See Hardesty, *Faith Cure*; Curtis, *Faith in the Great Physician*; and Opp, *The Lord for the Body*, among others. Opp explains that it was common for doctors (at least those who were proponents of divine healing) to use normative medicinal approaches for non-Christian patients but to encourage their Christian patients to rely solely on prayer. This arises from the understanding that a significant reason behind the efficacy of divine healing is individual faith.

<sup>203</sup> MacNutt, *Healing*, 24.

creation of a “discursive space”<sup>204</sup> as well as the theological “turn” within phenomenology.<sup>205</sup>

Such studies can serve as a foundation from which to understand Charismatic healing in the contemporary period. The next chapter turns to several case studies in order to glimpse at the contemporary practices within Charismatic Protestantism.

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<sup>204</sup> Keller, *The Hammer and the Flute*.

<sup>205</sup> James Cox, *An Introduction to the Phenomenology of Religion* (New York: Bloomsbury Academic, 2010).

### **3: PORTRAITS OF CHARISMATIC HEALING**

In this chapter, I draw from participant observation and in-depth interviews to present five focused case studies of Charismatic healing of practitioners who reside in Ottawa, Canada. These cases are notably distinct from each other, and in this way they are representative of the diverse approaches within Charismatic Protestant healing. Additionally, although I focus on the stories of five specific individuals, certain depths of explanations/descriptions were only made available to me through my interaction with my larger research group. As a result of this, the experiences and opinions of the larger Charismatic community (that is, more than the individual whose particular story is being shared) permeate these focused case studies, and explanations from community members are peppered throughout the cases.

#### **3.1 Introducing the People**

Originally, I anticipated speaking with a certain number of “healers” and a certain number of “supplicants.” This is how I had seen the few ethnographic studies of Charismatic Communities previously organised (the work of Csordas, among others) and it became for me the taken-for-granted way in which I would approach my research. However, shortly after beginning my interviews, I realised that the binary labels of “healer” and “supplicant” could not be applied to the particular Charismatic Protestant community I was working with. There were no individuals I spoke with who were singularly identified as “healers;” all had their own (ongoing!) stories which would have in turn additionally classified them as a “supplicant.” Those with whom I spoke expressed the belief that all individuals are in need of ongoing healing—even the very individuals who are in the midst of aiding others in their own journeys of healing.

For my research participants, “healer” and “supplicant” were not static dichotomies; rather, many continuously transitioned back and forth between giving and receiving healing. Additionally—and I think this lapse of academic terminology is important to recognise here—even when “healing” others, none of my research participants used the term “healer” to describe themselves. Instead, terms like “prayer counsellor,” “minister,” “Lead,” “sister/brother [in Christ],” or, most simply, “friend” were preferred. The actual title of “healer” was always attributed back to the triune God; human beings were merely a channel or a vehicle for the healing power of God—whether this be attributed to the Father, the Son, or the Holy Spirit at any particular time.

The people whose stories are drawn upon here are neither “healers” nor “supplicants,” but are individuals who sometimes offer healing, who sometimes receive healing, and who sometimes partake in both simultaneously. In the times where I do refer to individuals as either a “healer” or as a “supplicant” (and I do this, with the main intention of establishing some sense of coherency), I am not doing this to indicate their title/role so much as their activity in that particular moment of their story. The combination of our English language and our career-oriented culture is somewhat limiting in this way, as we have a tendency to describe/define people by nouns rather than verbs. Accordingly, I sometimes write that so and so was a “supplicant,” or so and so was a “healer,” rather than to say that s/he was receiving healing or giving healing. However, the reader should note that this is a gimmick (and, I think, a limit) of written ethnography—and it is not reflective of the Charismatic worldview to assign labels/titles to individuals as if such a static dichotomy exists. As mentioned above, this chapter draws from a wide number of my research participants’ experiences; I only formally introduce those by name whose individual stories are focused on at-length.

**i. Cynthia**

Cynthia describes her involvement with spiritual healing as being “on a journey with Jesus Christ.” In this regard, she strives to take the truths that she has learned about the nature of healing and to share with other individuals who are seeking or who have questions. She quickly admits that her own understanding of some of the details of these truths is continuously being refined and developed. She looks back on her mid-20s as the point where this journey began to take form: a point where her she was struggling to come to terms with a recent miscarriage and “a broken marriage” (she was separated from her husband at this time) and could not understand why things “were not working out” in her life. Through a series of events, she was introduced to the teachings of Protestant Christianity and shortly after “entered into a personal relationship with Christ” and was “met by Jesus” in the midst of her pain. She understands this event as the beginning of a series of events wherein she “learned the truth of God’s heart” and endeavoured to apply these to her personal life. This was the beginning of receiving healing. She began eagerly reading the bible in an effort to come to a better understanding of “the heart of the God of the Bible” so to be “re-parented” by God [...]. This initial phase of her healing went on for nearly three decades before Cynthia “began to ask God to speak to [her] heart and deal with [her] heart issues.” In this, “heart issues” refers to a deep, underlying type of pain and/or discontentment that had not been addressed by Cynthia’s “surface-level” efforts of healing. In targeting these “heart issues” she experienced both an initially greater level of emotional pain (i.e. from the healing process), followed by a feeling of utmost vulnerability, and, ultimately, a deeper sense of restoration. In this process, she attended a group healing retreat followed by individual healing sessions at which the “root causes” of her emotional and spiritual pain were addressed. This included a combination of inner healing and deliverance ministry. She soon

began taking what she was learning and endeavouring to share it with others. After some time passed, she joined a spiritual healing ministry's team as a prayer counsellor so as to minister to others who were seeking healing.

Presently, Cynthia is no longer affiliated with a ministry team, but instead ministers to individuals outside the structure of an organisation. As is the *modus operandi* of all of my research participants, these “services” are offered voluntarily by the healers and are free of charge.<sup>206</sup> Although much of her healing ministry happens spontaneously and outside of a planned healing session (binding down demons through text messages, Facebook chat, etc.) she also regularly engages in organised healing sessions. She will regularly conduct anywhere from two to four of these formal sessions per week—each is three hours from start to finish—at which she will bring a second prayer counsellor with her. She will pray for peoples' healing at any time in any place, and sometimes does so without explicitly telling the person she is doing so. Specifically in regard to what she calls “the spiritual realm,” she will often “bind down” and/or “forbid spirits from operating” in an individual, or in their general vicinity. She describes herself not as a healer, but as an instrument in the hands of God. In order to make herself an “effective” instrument, she speaks of the need to be as pure as possible when conducting a healing session; though she recognises she is imperfect and cannot “leave [her] imperfection at the door” while ministering to another, she precedes each session with personal time in prayer to confess and repent of her sins and shortcomings. In the case studies to come, she is the one who leads the private healing session for the first two individuals.

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<sup>206</sup> Some of the larger healing organisations make known the cost of a group healing retreat (food, accommodations, etc.) and invite participants to make a donation. Other individuals, whose healing ministry occupies the time of what would otherwise be a full-time paid job, also accept donations (either monetary or in-kind) from the people they minister healing to, but payment is never expected.

**ii. Maureen**

Maureen grew up critically questioning her exposure to Christianity. As a young child, she informed her mother that she no longer desired to attend [Catholic] church, because she had questioned the teachings of the Priest and his answers didn't make sense to her. And yet, as she grew older, she recognised she still had a rampant desire to learn spiritual teachings. As an avid reader, Maureen read through a number of religious texts and commentaries on religious beliefs and practices. She also experimented with a number of different religious practices from diverse traditions. In her mid-twenties, she "became a [Protestant Christian] believer" and endeavoured to fervently apply the teachings of the church she began attending.

Since then, over the past four decades, she has veered from a number of the specific teachings that she originally tried to embrace (for example, Maureen does not agree with her church's complementarian standpoint in regard to gender roles, but rather advocates for a completely egalitarian view.) Maureen can readily explain her doctrinal positions with the finesse and detail of a studied theologian, and describes her current knowledge as having stemmed from her understanding of "God's Truth."

In Maureen's case, her journey with spiritual healing did not begin with her intentionally seeking to be emotionally, spiritually, or physically healed. Rather, Maureen describes these diverse types of healing to have occurred naturally as a result of her seeking a deeper knowledge of Truth. As she sought to have a deeper understanding of the bible (which Maureen views as one of the foremost tools in understanding God's Truth), she naturally experienced different types of healing. One such type of healing was coming into an awareness that the physical and emotional abuse she experienced from her husband (which, for a long time, she dealt with in order to not undergo a divorce, which would likely have been frowned upon by her church) was,

in fact, outside of “what God wanted for [her].” She also began to realise that she had experienced degrees of “spiritual abuse” from individuals within the church. These realisations are attributed to a shift in perspective of what the bible teaches about different “roles” that God has ordained for different individuals. In realising that her marriage was “not God-honouring” and that she had been mistreated by individuals in her church, Maureen was able to adjust her actions (she divorced her husband, and altered the terms of her involvement at church) which lead to a depth of emotional healing.

Maureen recognises that these decisions were rationally-informed from her increased reading and critical thinking of what the bible teaches. But, in addition to this, she describes a sort of mystical component to the process: she says, “as I continued to soak myself in these liberating wonderful truths [found in biblical commentaries and in direct scriptures], the healing just started happening without me knowing it. [...] My spirit was becoming very strong, and I was not as fearful anymore.” And so, although Maureen had pursued no formal exposure to teachings on spiritual healing until a few years ago (~2012), even in the midst of severe physical illness (Maureen was diagnosed with breast cancer around this same time) she felt that she had the sufficient strength to bear through the disease—no matter the diagnosis or treatment. She attributes this to having her spirit strengthened by God.

When her friend, Cynthia (introduced above), began to attend teaching sessions on spiritual healing, Maureen began to read a number of books in order to help formulate her own thoughts on the topic. Maureen has attended lecture series with Cynthia, and has received a personal ministry healing session conducted by Cynthia—though their views on the details of the healing process do differ (I return to this below). Although Maureen has never been involved with a particular organisation or ministry as a “healer,” she frequently prays for the healing of

others. She understands individual faith to be a crucial component in healing, and readily admits that her own faith continues to be shadowed by doubts—such as whether a healing will be successful—and fears—such as what her family or close friends might think of her beliefs. Maureen describes faith as being “like a muscle” and asserts that individuals can “get better at praying in faith, without [having] any doubts.” Maureen endeavours to apply this in her own life by way of “practicing it” and “not being afraid to look like an idiot” by praying for other people’s healings despite seeing limited or no immediate results.

In her own life and in the lives of others, Maureen has experienced a fair share of disappointment when healing is prayed for and no immediate results are seen, but Maureen maintains that “you have to fight the disappointment, you shake it off. And it doesn’t stop you from believing [what you have come to understand as Truth.] You say, ‘Lord, You said that by Your stripes I am healed. Lord, You said that Your body at the whipping post was bruised and broken for my healing...’ you know. *Physical* healing, you know? [You pray,] ‘Lord, You promised...’ and ‘I believe it, I believe it, I believe it...’ And you just keep plowing ahead.”

### **iii. Marilyn**

For a number of years, Marilyn attended a Pentecostal church where she was actively involved as a youth-leader. This background provided her with an initial exposure to inner healing, deliverance ministry, speaking in tongues, and other things typically associated with Charismatic healing. This background also led her to the belief that “without a doubt people receive spiritual healing,” but she had not experienced any significant degree of healing (or at least, not what she would at that time refer to as healing) until she began inner healing sessions in January 2014.

In August 2014 Marilyn was invited by Cynthia and Kim to attend a group meeting that

both women had individually “felt led” to organise. Cynthia and Kim “received names from the Lord of people who He wanted to be there”—there were eight participants in total—and Marilyn was among these names. The invitation was optional but, upon receiving it, Marilyn knew that she absolutely wanted to attend. The meeting was divided into several segments, including scriptural teachings [about healing], individual reflection, therapeutic artwork, a shared meal, and prayer exchange—a time where individuals each prayed for another individual. This prayer time was a key portion of the group session, and it included deliverance ministry (on an “as required” basis).

The woman who prayed for Marilyn was an individual whom Marilyn had never met before. At the end of their prayer time, the woman asked Marilyn if she had “any tummy issues...any digestive problems?” Marilyn, poignantly reminded of the fact that she was scheduled to have a colonoscopy one month later in response to some digestive problems, was struck by this question and asked the woman how she knew that. “The Lord just told me,” was the woman’s reply. Shortly after, the entire group prayed for Marilyn and her forthcoming colonoscopy. When she had her colonoscopy, her results came out 100% fine; Marilyn views this as a healing and attributes it to the prayer experienced that day.

Afterwards, Marilyn continued to attend organised public teachings on Charismatic healing and meet with women who were “more experienced” with healing ministry than she. She learned from them, received counsel and ministry from them, and applied their teachings to her life. For Marilyn, this has focused mostly at the level of inner healing, targeting undesirable behavioural patterns, such as obsessive compulsive habits and personal anxieties, which Marilyn understands to result from “taking her mind off of Christ,” and to ultimately indicate a lack of trust in God. Ultimately, Marilyn understands these efforts of healing to contribute to coming

into a closer and more intimate relationship with Jesus Christ.

#### **iv. Doug**

Doug is the proud father of four kids and seven grandchildren, upon whom he showers heaps and bounds of love—and this is extremely evident to those who know him. This defining characteristic is particularly relevant, since Doug explains that his own journey to healing began with the recognition that he had never experienced a sense of love or pride from his own dad.

Just over twenty years ago, Doug was in his living room with his three kids crowded upon his lap and wrapped up in his arms, as he read them a bible story. Part way through the story, it dawned on him that this was something he had never personally experienced as a child. He began to cry, realising that he had experienced a form of loss as child by never feeling the love of his dad. Doug had grown up with what he calls “a Victorian British background where you suck up your emotions and all that,” and did not know what to do with “this feeling of water coming down [his] eyes.” Later that evening, Doug attended a “small group<sup>207</sup>” during which a man offered to lead the group in musical worship. The man began to sing what Doug described to me as “a really annoying song—and fairly poorly sung, at that!” but as Doug listened to the words of the song he began to cry once again: “*Will You hold me in Your arms / As I rest on Your knee, won't You tell me my favorite story / I was an orphan, You adopted me.*” Doug was bewildered at the onset of emotions that these two back-to-back experiences brought about in him and, following further personal reflection and several discussions with his wife, he realised that he had intentionally constructed an emotional barrier between him and his father so to not risk feeling any ongoing rejection. For Doug, this realisation was heart-breaking.

Shortly after, Doug attended a church service that ended with an open invitation to

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<sup>207</sup> A term generally used to describe a small, in-home bible study; often synonymous in Christian circles with “life group.”

approach different members of the pastoral staff if anyone had anything they wished to discuss.

Doug describes the day vividly:

I found myself walking up to this man with white hair and I said ‘I’ve messed up my life.’ I just walked up to him. Which is weird because I’m usually the last one to ever think about doing something like that. But I went up and I said ‘I’ve just messed up in my life.’ And he asked my name and he said, ‘Doug, we all mess up. And that’s okay. But, Doug, would you mind if, when I see you, I embrace you the way a father would embrace his son, and, in doing so, impart the [heavenly] Father’s love to you?’ I don’t know how he knew [to mention the love of a father], but that was exactly what I needed to hear. The next thing I knew I was hugging this man and my nose was dripping on his blue shirt, I was weeping, and I’m thinking, ‘what hit me!’ I can’t tell you a thing of what he prayed about. I can’t tell you ANYTHING aside from that, for the first time in my life, I knew what it was like to be embraced and loved by a father. That blew my mind. Which, coincidentally, is pretty much the ministry that I do now.

Now, over twenty years (and, Doug would add, a lot of additional healing-revelations) later, Doug meets with male addicts through a Christian organisation aimed at providing counselling and practical support to individuals who are recovering from addictions. He also meets with men who approach him outside of this context. His motive is both grandiose and simple: to show people that they are loved. Doug believes that, in order to do this, it is often necessary to look at the specific moments of the past where people have experienced emotional or psychological hurt; these instances are often discussed and then prayed through—Doug also invites the person to expressly forgive any individual who has caused the hurt. He shies away from the practice of physical healing as well as deliverance ministry, explaining that he has “had limited success with that.” He does not use any written materials or follow a rigid structure in his ministry; rather, he professes that “every person has a different story and so I don’t know what the ministry that he needs is.”

It is perhaps Doug’s unique character that has earned him the trust of dozens, if not hundreds, of men over the years. He mixes a rather unconventional theology (Doug sheepishly confessed that one of the events which most propelled forward his relationship with God was the

time he “angrily told God to fuck off”) with a kind, sweet disposition—something that Doug jokingly referred to as his “nice-old-man-ness.” In addition to the time Doug spends doing individual ministry at churches and street shelters, Doug and his wife regularly invite men—both those who have recovered from addictions, those who are recovering, and those who continue to use—over to their home for meals and good conversations. Doug has embraced the men he ministers to, and proclaims he has become good friends with many of them. Doug admits, “I am not the man I was twenty-some years ago. Sometimes it’s like I look at the proverbial mirror and I go ‘whoa! Who’s that? Doug???? Doing *what*?!?!? Whoa!’ I mean it. I wasn’t this way before. But that’s okay, because I think I like *this* version of myself better.”

And, though these character traits may provide a plausible explanation of Doug’s ability to connect with and gain the trust of those he ministers to, Doug attributes his very ability to minister to God’s provision. Doug asserts that he has seen “God in the midst of it all” and explains he has often received “words of knowledge” and “words of wisdom” from God; these are further explored in the pages to come.

#### **v. Soraya**

Soraya is forty-four years old and has moved sixty-four times, spanning not only several cities, but different countries and continents. The experiences of her own healing which she related to me are focused mainly on inner-healing and deliverance ministry and span a number of years. Currently, as someone trained in registered massage therapy, she offers “healing massages” to individuals—some of whom are recommended to her via word of mouth, and others who the Lord “places on her heart” to offer this free ministry to. (I was one such individual—others include some of the individuals whose stories are explored here, individuals in Soraya’s church community, cashiers met randomly at fast food restaurants, and, in one

particularly remarkable story, a physically-disabled homeless man.) These massages strongly resemble physical massage therapy, but, in obedience to a “word” that Soraya “heard from the Lord,” she never places her hands on an individual before praying for them. As she gives the massage, she continues to pray silently for the person, and describes her hands as moving by the guidance of the Holy Spirit. During this process, Soraya frequently receives revelation from God about the individual’s life—such as a struggle with depression or other illness. When this happens, Soraya’s hands move on the individual’s body to his or her unique “spiritual doors” which have been revealed to her by God. Moving her hands over these “doors” allows the “darkness” to leave the individual; Soraya then invites the Holy Spirit to “wash through” the individual so to spiritually cleanse and purify him or her. I have spoken with a number of individuals (all females) who have received a healing massage from Soraya; all described the process as feeling extraordinarily relaxed; some spoke of experiencing specific spiritual healing as a result of it.

#### **vi. Rachel**

Rachel<sup>208</sup> is the youngest individual I interviewed; she is finishing her post-secondary education and lives with other students who are also in their early-mid-twenties. She and her roommates regularly engage in unstructured and semi-structured forms of inner healing, such as “soaking”—a time of listening to worship music with the explicit purpose of letting one’s soul and/or spirit “soak” in the presence of the Holy Spirit. Rachel also practice physical healing and deliverance ministry through prayer.

Growing up in a household where Charismatic forms of Christianity were actively practiced (her mom and step-father often held “soaking” nights at their home, and Rachel’s step-father has been receiving prayer for physical healing for a number of years), Rachel is not new to

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<sup>208</sup> Pseudonym used.

Charismatic healing. However, Rachel's own involvement with Charismatic Christianity took form during her third year of her bachelor's degree, when she became actively involved with a Christian student group on her university campus, and began to regularly attend a local church. Quickly, Rachel became highly involved in both of these facilities by participating in and leading musical worship sessions.

Shortly after beginning this depth of involvement, Rachel participated in a 6-month unpaid internship with the International House of Prayer (IHOP) in which she spent the majority of her days engaged in individual prayer. Now, having returned to school in a ministry program, she regularly leads musical worship services and/or prays for individuals. Although Rachel does this within the context of institutional churches and/or Christian organisations, she also does this outside in the public sphere—either by herself or with a group of similar-minded friends. Rachel has often gone on “prayer walks” where she walks randomly throughout a city, praying silently for the people whose paths she crosses. At times, she sees people whom she “feels led” to go up to and offer to pray for them. These prayers might range from requests of physical healing to simply “asking God to bless them with His love.”

Rachel laughed as she described these practices to me, admitting that they can seem “a bit weird.” She continued, “but I guess God can be pretty weird sometimes, too.” From this, she went on to describe her involvement with inner healing and deliverance ministry. Rachel first had these types of healing performed on her, and (upon becoming convinced of their efficaciousness) she later began “to minister to others in the same way.” Much like the intrinsic lack of structure that guides her prayer walks, Rachel does not follow any regimented practice with her inner healing and/or deliverance ministry. Rather, upon “feeling led” to offer to share the principles of the ministry with someone else (or, possible, offer to walk the person through

the steps with prayer), she will do so. This might occur at her church, in her school's library, in one of the many coffee shops that Rachel frequents, or on the sidewalk.

Rachel describes a certain sensory experience that sometimes prompts her to “do a deliverance.” Different than feeling the “leading of the Holy Spirit,” Rachel attests that she can sometimes feel “a certain darkness” emanating from a person, or, at times, from an inanimate object—particularly specific rooms or even entire houses in which demonic spirits are thought to have been (unknowingly) invited in. It is under such circumstances that deliverances are performed.

### **3.2 Processes of Treatment: 5 Case Studies**

The “process of treatment” within Charismatic healing varies significantly from person to person. In keeping with what Hardesty noted in her historical study of divine healing in the 19<sup>th</sup> century, contemporary practices of Charismatic healing lack a formalised structure. I have strived to reflect this diversity with the following case studies.

I first refer at length to four cases which each address a different type, or process, of healing. Although they have their differences (in both the technique of healing, and the end result) they share the similarity of each being a private healing session rather than a group healing *en masse*, as is often the case at healing conferences or teaching sessions about healing. There are two reasons why I have chosen to focus on individual sessions rather than group healings. Firstly, and most importantly, although many of my research participants also took part in mass healing conferences, their own emphasis was often on the individual sessions they underwent (which, by the very nature of an individual session, allow for more privacy and intimacy—both of which are particularly welcome in spiritual healing experiences.) Secondly, I

have noted a tendency for the group healings to focus primarily on physical healing—with some emphasis on deliverance ministry when deemed necessary, and little-to-no emphasis on inner healing. There is, of course, a practical reason behind this: the type of healing sought through “inner healing” often mandates slow and steady engagement with the individual’s entire life history; this is obviously difficult to accomplish *en masse* in a one-hour period. Through exploring healing experiences which occurred in the individual sessions (which focus primarily on inner healing but also often inevitably interweave elements of physical healing and deliverance ministry) I believe we are able to come to a better understanding of the Charismatic emphasis on “holistic healing”—that is, simultaneous healing of the tri-part self: the body, the soul, and the spirit.

I then turn to one case study (that of Rachel) which describes a group healing session. Group sessions, as mentioned above, tend to target physical healing; Rachel’s case is in keeping with this trend and, notwithstanding some degree of inevitable diversity, is fairly representative of group healing sessions within Charismatic Protestant communities. Additionally, Rachel’s reflections on her own story provide fascinating insight into Charismatic understandings of faith, disbelief, and the longevity of healing. Her somewhat skeptical questioning of her own experiences raises interesting questions on the Charismatic community’s beliefs in regard to personal doubt.

#### **i. “Walking in the Freedom:” The Cutting of Generational Bonds and Soul Ties**

The first case is drawn from participant observation of a private healing session which took place in the home of the supplicant, Maureen. Three individuals (plus myself) were present at the healing session, all of whom I individually spoke with at length preceding/following the session. Some of the explanations for the rituals which took place during the healing session are

drawn from subsequent interviews, though many of the descriptive details were noted during the session itself—as a result, the description that follows is an intermingling of the session itself with subsequent interviews. I draw fluidly from my participant observation and interviews, and seek to amalgamate the data into a cohesive narrative that simultaneously provides the reader with both a sense of the ritual performance (i.e. the actions of the healing session) as well as certain nuanced explanations surrounding the belief system behind the ritual (i.e. what was later explained to me in interviews.) Any mental processes, emotional reactions, or hesitations during the healing session that I have attributed to any of the three women in this narrative were explicitly told to me during an interview—direct quotations are indicated with quotation marks. Likewise, the explanations that I weave into the narrative (which I was not privy to at the time of observing the healing session) were later explained to me by one or more of the women.

As was the case with many of my research participants who told of their experiences with inner healing and deliverance ministry, two individuals (Cynthia and Kim) were ministering to one supplicant (Maureen).<sup>209</sup> Cynthia's role was understood to be the "Lead" and Kim's role was understood as the "Second"—meaning Cynthia was leading the discussion and prayer time with Maureen, and was directing the topics of inquiry (though, any subsequent directions were heavily influenced by Maureen's responses to each of Cynthia's questions) whereas Kim was practically silent for the duration of the session. In this form of healing ministry, the role of the Second is to pray silently and continuously for the entire time, communicating with the Lead (through either verbal words or written words) if something specific is "impressed upon

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<sup>209</sup> However, as I drew attention to earlier, these roles are not exclusive—that is, individuals are not understood as being permanently bound to either the role of healer or supplicant; though healers are sometimes understood as needing to have first passed through some initial healing phase of their own, they are not understood as being fully "healed" but are rather understood to impart healing to others as they continue to receive healing in their own areas of life.

them.”<sup>210</sup> Speaking of Kim’s contribution, Cynthia later explained that she is “interceding prayerfully, by observation and by praying and being led by the Holy Spirit...and, you know, I actually have no idea what [specifically] she is praying about, but we communicate kind of cognitively.” Within Charismatic circles, it is often said of a “Second” that s/he possesses a particularly strong gift of spiritual discernment, as s/he is expected to hear frequent—if not continuous—revelation from God during the healing session. These revelations are interchangeably referred to as “words,” “words of knowledge,” or “words of wisdom.” In a later stage of my research, when I asked of one Second what she did with this knowledge after a healing session had finished, she told me that “it’s all forgotten; God just takes it away.” In this way, both the human-ness and spiritual-ness of the individuals is drawn attention to: during the session, the healers are understood as accessing and channelling God-given wisdom and knowledge which they can effectively apply during the healing session for the betterment of the supplicant. Yet, after the session, the healers’ prophetic knowledge is “all forgotten.”

*After tea had been brewed and poured, and a lull occurred in the conversation between the three friends, Cynthia and Kim asked Maureen to stay in the living room as they prepared for the session in a room down the hall. Maureen stared blankly in return. “Because you’re going to pray and stuff? Just you two?” she paused, “And I’ll wait here?” Maureen let her words linger in the air, somewhat passively questioning why she was being excluded from the prayer time. As Cynthia and Kim exited the room I sat still, quietly, in the chair that had been assigned to me—slightly off to the side of where the other three were positioned.<sup>211</sup> After a few moments, Cynthia informed me that I could come to observe her and Kim as they prepared. They clasped each other’s hands and began to pray out loud.<sup>212</sup>*

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<sup>210</sup> Any notes that are made during this session were destroyed after it had finished.

<sup>211</sup> Originally, I was not going to be allowed to witness this session due to the fear that my presence might disrupt the session. It was only after Maureen (who—rightly so—thought that this would be particularly helpful for my research) appealed to Cynthia that I was finally allowed to join in. I sat to the side of the room and, apart from a few jokes that Maureen cast in my direction, I did not interact with the three women during the session.

<sup>212</sup> This prayer is a preparation prayer for the healing session. And, although the supplicant is, at times, the focus of the prayer—praying that she be spiritually ready to receive any revelation that comes from the Holy Spirit, and that she be obedient to any God-given directions/requests regarding her healing process—it is important to note that the healers are additionally praying for *themselves* and for the *environment* in which they will minister healing.

Cynthia later explained, “I prepare myself [by asking] God to show me if there’s anything that might be inhibiting my ability to hear him. But I come before him, I’m totally prepared to move at the impulse of his lead. [...] I’m asking the Lord, ‘Lord is there something you want to show me right now?’ or I’m making myself available to hear the Holy Spirit; I’m asking my OWN soul to be at rest so that I am really not interfering in the sense of bringing in

*K: Lord I pray today that you would not let anything I say Lord be anything but your words (don't even let me speak Lord unless it's of you) and also Lord can you stop me from coughing today? And just hold it all off through this whole time, not to cough at all, and I pray that everybody in our families would be resting and, uh, that there would be no emergencies...not that I'd know about them anyways because I've turned my phone down...but Lord that you would keep them all safe and that we would have that sense of—calmness in our own soul—that, everything is taken care of. Thank you Jesus.*

*C: Lord this is your daughter and (...) and she loves you. And we know you love her. And, Father so right now we are coming before you, and we are emptying ourselves —*

*K: mmmmm*

*C: -of self. Now Lord, in the name of the Lord Jesus Christ I bind down all kingdoms of death and hell, Jezebel, and the anti-Christ, forbidding them to operate. Lord we ask that you give us the blood cover of Christ over us—*

*K: mmmhmm*

*C: —we pray Father that you would fight the, the battles in the spiritual realms, placing your warrior angels at the doors—*

*K: yesss.*

*C: —Father we're asking your Holy Spirit to come through and, making this ground holy ---*

*K: mmmhmm*

*C: —cleansing all these places—*

*K: —yes, Lord Jesus—*

*C: —and simply washing through with your Spirit, washing through, Lord, and preparing the ground.*

*K: mmmhmmm*

*C: —and, and, then Father, we're asking You to seal it with the blood cover of Christ----*

*K: mmmmm*

*C: —and place your hedge of protection around this place Lord—*

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my perspective that could be a little bit contaminated with some of the things that might come out of my brokenness. I am making myself accessible to Him so that His truth can come through me [...]"

*K: (whispers) —mmmmm her cough too,*

*C: —and as Kim has prayed, we pray, we pray, we pray that you would deal with any of the distractions that could come our way. Ah, Lord, we empty ourselves of our own human wisdom—*

*K: mmmhmmm*

*C: —and we, pray in confidence, knowing that, we ask for your wisdom, and that you would freely give and that you hold nothing back. And we pray with faith lord. We do not doubt. You're not double minded, we know that you will show up and we ask Lord that you would do, um, whatever is your will—*

*K: yes Lord*

*C: —we want to be totally, totally sensitive to your holy spirit and his leading—*

*K: mmhmm*

*C: —that you will lead us forth in unity*

*K: mmmhmm.*

*C: —um that Kim and I would have that resonating unity, sensing your spirit's leading and that it would be confirmed, uh, even in Maureen's spirit.*

*K: mmmhm*

*C: —Lord, we do pray, Father, that you would give us wisdom as to the approach that you want us to take, in this time ---*

*K: mmmhm*

*C: —and we praise you, we praise you. And we give all the glory and honour to you.*

*K: mmmhm*

*C: —In Jesus' name—*

*K: —and Lord I know that she wants to be healed of this cough of five years lord. And Lord whatever you're going to do, we praise you, Lord. But right now, even I pray that that cough would not be able to cause havoc at all and, and interrupt ministry in any way, Lord...[we pray] that it would be subdued in a way that would not be able to cause havoc, but Lord even if you could heal her and do a mighty work in that way Lord, oh Father that'd be so...amazing. Lord we just give that to you.*

*C: mmmmm.*

*K: The cross of Christ between us, Lord, and oh Father, we are just so, so thankful. So thankful Lord for what you're doing in our lives. And all of the women's lives.*

*C: Lord we ask for your spirit of discernment so that we can understand where the stronghold lies. And in the name of the Lord Jesus Christ we bind the strongman<sup>213</sup> --*

*K: Yes Lord*

*C: --and we thank you for the authority that you have given your people, Lord—*

*K: mmmhmm*

*C: And I pray, I pray that you would search my spirit— and if there be anything that I need yet to confess and repent of—*

*K: —yes Lord—*

*C: —so that we may operate—*

*K: —yes Lord—*

*C: —and minister in the authority of Christ—*

*K: —mmhmm—*

*C: —and that, the enemy would not be able to mock me, Lord God.*

*K: Yesss*

*C: —We praise you and we thank you in Jesus' name. Amen*

*K: Amen*

*C: Anything else?*

*K: Nope.*

*C: Okay.*

*K: Okay.*

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<sup>213</sup> Although this was not explicitly discussed in any of my interviews, as I understood it from the public teaching sessions I attended, the “strongman” is understood by Charismatics as a sort of alpha-demon which is deeply rooted in an individual. Once the “strongman” is “bound,” individuals are no longer under its influence. This is of great importance in proceeding with inner healing and deliverance ministry in particular.

In this prayer, the two women draw from biblical symbols like the “blood of Christ” and “the cross of Christ”. The use of these symbols acts as “an expression of [their] hearts” because “the blood of Christ covers sin and protects.” Likewise, the imagery of the cross recollects the belief that every single individual is sinful and is therefore in need of the atonement paid by Christ through His death on the cross.<sup>214</sup> Cynthia asks God to “put the cross between us” as a way of reminding herself that she should be “more humble” and not have “a judgmental spirit.” Rather, she reminds herself of the cross so to accept that she, too, has “walked out of step with the truth of God” and that it is only “by the grace of God” that she can receive and minister healing.

The women pray “in agreement” with each other (either through repeating near-identical prayer requests, by tacking on an affirming “yes” throughout another’s prayer, or simply through saying “amen” at the end. Praying “in agreement” is thought to be a crucial part of successful prayers, since certain biblical teachings emphasise the power of communal prayer over individual prayer. The women also pray “in Jesus’ name” as a way of not only increasing the prayer’s efficacy, but ensuring that they are *not* asking for something through a “false spirit”—that is, a “demonic” or “deceiving” spirit. One woman (Erica<sup>215</sup>) explained to me that, in order to ensure she is praying in *Jesus’ name* she sometimes prays with great attention to detail,

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<sup>214</sup> Cynthia, like many of the individuals I interviewed, understands Christ’s crucifixion to be a historical event which crucially influences Charismatics’ ability to seek healing. Understanding the Crucifixion and Resurrection within the doctrinal framework of atonement has been a long-standing theological standpoint of the evangelical church (references here). In other words, it is the death of a perfect Being which atoned for the sins of humanity. Additionally, many Charismatics understand the Crucifixion to be a pinnacle moment in regard to healing. Cynthia explained to me that the blood of Christ (“spilt for the forgiveness of sins,” as quoted by the leading Pastor during many Protestant Communion services) is what “purchased” or “paid for” the “debt” [i.e. of death, see Romans 3:23] of sin, thus allowing an individual to be reconciled to God. This language of monetary transaction has been standard across a number of evangelical Protestant communities I have encountered. But, in addition to this, many proponents of Charismatic healing emphasise that the literal breaking of Christ’s body is what has enabled physical healing in the contemporary period.

<sup>215</sup> Pseudonym used.

specifying that she is praying “in the name of Jesus the Christ, of Nazareth, who came from Galilee, and lived and died and rose again, and is the son of God Most High.” In her interviews with Charismatic Protestants, Meredith McGuire noted a similar emphasis on the importance of praying “in Jesus’ name.”<sup>216</sup>

Following the pre-session prayer quoted above, the session formally began by Maureen saying the Lordship Prayer.<sup>217</sup> Even though Maureen had already said it earlier that day, Cynthia requested that she re-say it in the presence of the group—the reason being that this gave Cynthia and Kim the authority (if it became necessary) to inform any demonic spirits that they had themselves witnessed Maureen’s declaration of Jesus’ reign over her whole being. (In the end, this was not necessary during Maureen’s session, but the precautions of “bearing witness” were taken so to not risk encountering any belligerent spirits.

Approximately the first forty-five minutes of the session were spent in an informal teaching time, which was referred to as “reinforcing the principles behind healing and deliverance, walking in the freedom.” During this time, Cynthia asked Maureen to explain what she already knew about topics such as the holistic self, demonic strongholds, deliverance ministry, soul ties, etc. As Maureen explained her existing knowledge (based primarily on thoroughly reading through several texts on inner healing and deliverance ministry and spending some time in individual prayer in attempt to apply the principles she had read about), Cynthia would fill in and/or elaborate with specific details.

Even though teaching continued throughout the session in the form of explanations of specific prayers and rituals, this was primarily limited to the first forty-five minutes. Although

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<sup>216</sup> Meredith McGuire, *Pentecostal Catholics: Power, Charisma, and Order in a Religious Movement* (Philadelphia: Temple University Press, 1982), 9.

<sup>217</sup> The Lordship Prayer is a prayer developed and used by Ellel Ministries. It is a detailed, step-by-step prayer through which an individual declares that God has “Lordship” over all components of that individual, including his/her mind, body, soul, and spirit. A copy of the prayer can be found in Appendix A.

Maureen had already prayed on her own in the weeks and months leading up to this session, asking God to “cut” the “ungodly soul ties,” Cynthia requested that she re-do these prayers so that Cynthia and Kim could “bear witness” to this act. Cutting soul ties involves identifying (usually through introspection of the supplicant—sometimes with the guidance of one or both healers—which is understood to be guided by the Holy Spirit) any person place or thing to which Maureen’s soul had experienced an ungodly “tie” and/or any kind of tie (godly or ungodly) with someone who is now deceased.

Cynthia and Kim emphasised to Maureen that, at least with respect to individuals who are still living, only the *ungodly* soul ties had to be “cut”; all the *godly* ones could be kept—since *godly* (or “good”) ties were natural and, indeed, desirable. Any relationship between two people is viewed to have multiple “soul ties” which are forged through (what might be most readily compared to) any kind of “bonding” act. As a result of this, two individuals might have numerous “ties” between their two souls; some which were formed in a godly fashion and some which are viewed as ungodly. Ungodly soul ties might be formed through anything from non-marital sexual relations to occult involvement—and a number of things in between. Even an overly-strong sense of nationalism (because Christians view their citizenship to be in heaven rather than on earth) results in the soul tie between oneself and one’s nation being prayed against. In the case of Maureen, she was guided by Cynthia to ask Jesus to “cut” the soul ties that had been formed with her home country (Ireland) and also with her deceased grandmother; Maureen was also “led” [by the Holy Spirit] to cut the ungodly soul ties with a friend of hers who had been “heavily involved” with religious practices that fell outside of Protestant Christianity.

Closely linked to the belief of soul ties is the belief in generational-bonds, which equally need to be specifically identified and broken. Due to biblical teachings on generational bonds (Exodus 20:5; 34:7; Numbers 14:18; Deuteronomy 5:9), many practitioners of Charismatic healing profess that an individual's ancestors' involvement with other-than-Christian spiritual rituals or, even if it was without the knowledge of the ancestor, s/he were cursed by another) can be "passed down" for up to ten generations. Physical illnesses, sometimes understood to stem from curses or some form of demonic involvement, are also addressed. Individuals who pursue inner healing and deliverance ministry are thus encouraged to trace their family lineage as far back as they can, and ask God to break any such generational bonds.

Because Maureen had had an ancestor involved with Freemasonry, Cynthia performed a specific ritual in which she physically acted out a "reversal" of any spiritual influences that Freemasonry might have had on Maureen. The specific prayer was taken from a Christian instructional book which taught about Freemasonry, the negative effects it can have on the individuals who adhere to its practices, and how to renounce and reverse these effects. The words below were acted out by Cynthia as she spoke them:

I symbolically remove the blindfold from your eyes, representing deceit. And I decree that it is burned in God's holy fire. I symbolically remove the veil of mourning, and decree that it is burned in God's holy fire. I pray that God will give you eyes of faith that will see truth and that he will give you a spirit of joy. I symbolically cut and remove the rope from your neck AND the mark that it left... and I decree that that rope be burned in God's holy fire. I renounce the false masonic pact of matrimony and I remove the ring of this false wedding from the fourth finger of your right hand, and I decree that it is burned with fire. I symbolically remove the chains and the bondage of free masonry from your body and I cast it into be burned with God's holy fire. I symbolically remove all masonic clothing and armour, especially the masonic apron, and I cast these into God's holy fire. I symbolically remove the ankle bracelets, the chains, and the shackles, and cast these to be burned in God's holy fire. I remove the swords that cover your head, and I cast these to be burned in God's holy fire.

At this point, Cynthia requested Maureen to "lay down in a coffin" (which was, in actuality, simply the couch in Maureen's living room) so that she could "call her out" so to reverse any curses associated with death. The "coffin" was used not to symbolise any sort of

death, but to renounce and “reverse” the particular Freemasonry vows understood to be associated with death; Cynthia explained to me that Freemasonry inductees are sometimes made to lay down in a coffin during their oath.<sup>218</sup> Maureen obliged, first laying down, and then standing up as Cynthia spoke out “come forth, Maureen!”

In many ways, this calls to mind the works of Levi-Strauss and Dow which emphasise that symbolic healing’s efficaciousness is in the way through which the healer is able to cause an “ontological shift” in the mind of the patient, inviting him or her to participate in a cultural-specific myth. In turn, this is understood to allow the supplicant to view their pain/illness in a new manner and, eventually, conquer it. However, in this particular case, the supplicant (Maureen) and healer (Cynthia) did not actually seem to share in the same myth. While Cynthia performed the ritual in a serious manner, Maureen laughed as she stood up from “the coffin,” and winked at me as these ritual enactments ended. Later, she explained to me that she did not mind participating in / acting out these types of rituals; she may believe that their precise details are somewhat unnecessary in order for her own healing to be efficacious, but they did not explicitly contradict the Truth that she had come to understand.

The healing session concluded with deliverance ministry, during which Maureen was asked to keep her eyes open and to look directly at Cynthia as Cynthia “bound down” and “called out” specific demonic spirits which she believed might have entered Maureen through Maureen’s own individual past experiences and/or things that had been passed down to her via a “generational curse”. Cynthia required Maureen to look at her because, as Cynthia later explained to me, “eyes are the windows to the soul, and so if something was in her soul or

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<sup>218</sup> I am not familiar with any Freemason accounts of their rituals or inductee’s activities and so cannot speak to the accuracy depicted here by the Charismatic community. However, I believe that what is more interesting from an anthropological perspective is the way that these Freemason practices are understood, and responded to / reacted against, by the Charismatic community.

leaving it, I would see it in the eyes—maybe just a flash in the eyes, or something like that.”

Understood as occupying a physical place within an individual’s body, demons are also said to leave through a number of bodily functions such as belching, flatulence, or projectile vomiting. (Referring to these extraordinary exiting techniques, Maureen later, jokingly, apologised to me for not allowing me to observe “any vomiting, or writhing on the floor, or anything wild like that.”)

The view of demonic spirits within my research community is notably similar to that of Csordas’ research community, and so I refer to his explanation here: an evil spirit is “an intelligent nonmaterial being that is irredeemably evil, is under the domination of Satan, and whose proper abode is Hell. Evil Spirits interact with humans by harassing, oppressing, or possessing them.”<sup>219</sup> Some Charismatics refuse to do deliverance ministry on someone whom they have not personally heard make a statement of [Christian] faith, due to the belief that, in “delivering” the individual of a particular demonic spirit, they might make an “opening” in that individual for an even worse spirit to enter.<sup>220</sup> One woman, Anna<sup>221</sup>, explained to me that you need to have “deliverance from all ungodly soul ties that are attached to us, lest we leave open a door.” Following deliverance ministry, individuals ask the Holy Spirit (and/or Jesus) to “fill” the place that has been emptied. Anna described that, following the completion of deliverance ministry, she experienced “a deep sense of peace from the Holy Spirit.”

The “binding down” and “casting out” of demonic spirits is not limited to personal ministry sessions and does not have to occur from an outside individual. Rather, individuals who are involved in healing ministry profess that they often experience “demonic attack,” especially as they go deeper into their ministry for others. Demonic attack is understood as Satan (directly

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<sup>219</sup> Csordas, *Body Meaning, and Healing*, 65.

<sup>220</sup> This also contributed to Cynthia’s initial hesitance to allow me to observe Maureen’s deliverance.

<sup>221</sup> Pseudonym used.

or indirectly) trying to intimidate an individual's beliefs and/or explicitly inhibit their actions—particularly when involved in pursuing healing for other individuals. Outside of Maureen's personal healing session (described above), she had experienced certain encounters with the demonic. One instance in particular occurred when Maureen was sleeping and was awakened by the sensation of something walking at the foot of her bed. Maureen compared the feeling as if a cat was walking on top of the covers, but there was no animal in the house. Maureen describes waking up, slowly rolling over, and opening her eyes to see “a dark shape, the way a human would look if covered in a black shroud, and there were no facial features other than red eyes. Red glowy Halloween-type eyes, you know?” She continued describing it,

And, there was a real sense of evil coming from it, but it had no body structure, except you could tell it was a head...the way it would look if you put a sheet over somebody—and, well, I turned over and I looked at it and, instantly, you know what I said? ‘Oh, for Heaven's sake, in the name of Jesus get out of here.’ And then I rolled right back over and went back to sleep. Because my first gut reaction was like—‘oh for crying out loud, are you kidding me?’—that's the kind of attitude I had, I just said it and went back to sleep.

The following morning, Maureen thought through the incident a bit more at-length and began to pray to God, asking for wisdom about how and why “the demonic” was at the foot of her bed. She came to an understanding that, although she remained unclear about ‘how’ or ‘why’ the demonic was able to linger at her bedside, her faith had been buttressed by the incident; Maureen explains that, as she prayed about it more, she felt the Lord impress upon her that she did “have enough faith, right at [her] fingertips” and that the faith shown in her simple prayer was effective, and good. Now, when Maureen prays for herself or for other people's healing, she uses those same words “for heaven's sake, in Jesus' name.” She explains,

It's not like they're magic words. They're for me to know, to bring me back to that experience where I know that the demonic does not scare me. Because I have complete and utter faith in the power of Jesus and his name. And even half asleep, being awakened in the middle of the night, I know...because I know...because I know—that Christ is all-powerful and He gave me that, you know, that understanding of what had happened. It wasn't to give me confidence, but to put an assurance in my heart and mind. [...] Awful stuff is happening all the time, but you don't have to be afraid of it. And I'm not. There is a lot of evil stuff in our world, and it's tragic and it

breaks my heart—some stuff is pure evil. And I hate it but I don't have *fear* of it now, you know?

**ii. “Happy are those who forget, happier yet are those who remember and have deep insight:”<sup>222</sup> Reflecting on the Past so to Ratify the Present**

One common ritual aspect of Charismatic healing is to reflect upon past incidents of trauma; an individual's traumatic experiences are thought to have a direct, ongoing effect on the individual in the present, not only through affecting their emotional state but through potentially “opening them up to the demonic.” During this ritual process, particularly painful memories (some of which may surface from a repressed state) are reflected upon, and those which are linked to an ongoing experience of pain are often intentionally re-conceptualised through a process of “inviting the Holy Spirit” to give further revelation about the experience. The painful moments are not forgotten, but they are remembered and, in their remembering, deep insights are given which can bring about healing.

This second case was told to me by Marilyn (the supplicant); I quote directly from one of my interviews with her. In this private healing session, she was ministered to by Cynthia and Kim, the same two women who ministered to Maureen in the above-mentioned case. Marilyn's session happened nearly one year after Maureen's, and a careful reader may observe some distinct differences in the way the healing session unravelled. As Cynthia later explained to me, Maureen was one of the first individuals she ministered to and, as a result of this, Cynthia was “launching out, understanding the principles behind [healing] but was still insecure” and so chose to administer healing in an identical way to how she had herself experienced healing. But, the more familiar she became with “walking individuals through the healing that God wanted to give them,” the more she veered from these initial practices while still “using the same

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<sup>222</sup> A Javanese proverb, collected during fieldwork and cited by Clifford Geertz.

principles.” A reader who is moderately familiar with Charismatic healing will note that Cynthia still draws from a fairly rigid structure, leading the healing process through words of knowledge that are understood to be prompted by the Holy Spirit.

*“I was meeting with Cynthia and Kim over the space of January through until...June, I guess...and we went over a whole pile of different things. I just made a little list here: we went through generational healing—healing of all the generational bonds—we went through unclean spirits, as Cynthia would call them. And there...there were a number of them (laughs briefly). And that was really, that was definitely what was very freeing, healing, extremely healing! And, when we went through [the generational bonds and the unclean spirits] we were able to see where certain things—emotions, fears, anxieties—had come from. And one of those things was claustrophobia. I mean, I view elevators as some of them to be “friendly” and some to be not (laughs) —a stupid phrase. But, you know, I used to hardly go into them at all, but I do now [after having been healed of claustrophobia]. I had never been particularly fond of them, or any other closed spaces. And I didn’t really know why. But when we did some further checking in and trying to figure out where this [fear] is coming from, well, we found what seems to definitely be where it came from.*

*[Cynthia, Kim, and I] were trying to figure out so many different things. So we went back to my childhood, trying to figure out ‘were you ever in a small space?’ And...and actually, if I’m not mistaken, and I’m pretty sure I’m not on this... Cynthia got a revelation from the Lord...which caused her to ask me some questions. And they bathe everything in prayer before you even walk through the door. So they had been praying for direction to help them understand what I was telling them.....so it’s amazing. What I was telling them, they were then given [by God] the questions to ask me. And so what happened is that Cynthia started asking me the*

questions [that she had been prompted by God to ask] like “where were you—what was it like—tell me about, whatever, when you were a child” you know. And so I said, ‘well there was this and there was that...and then we used to go to the cottage....’

You see, when I was a child I grew up in an alcoholic home. I wouldn’t have thought so at the time but now I certainly realise that it was [an alcoholic home.] Neither of my parents were abusive. My dad served overseas and when he came back from the Second World War he was a different person, from what I understand. So when you kind of understand [his own background, you can understand why he was the way he was.] He had some very big problems. As did my mom.

We used to go to a cottage on Mississippi Lake and when we went we would stop on Preston street at the Preston hotel...my aunt, my uncle, my dad, myself, and I was fairly young...goodness.... probably seven or eight—maybe a little less or a little older, I’m not sure. Anyway, we would go there and it would be in the summer—obviously, going to a cottage. So they would go [into the hotel to drink], but they would just leave me in the car. Sometimes they would be in there just a couple of hours or so, depending. It would depend, but it was never a very short time.

And then... and then... as I’m explaining it to [Cynthia and Kim in the healing session] I’m remembering it all. I’m remembering fear. And anxiety. And it was very hot [in the car]. Very hot. So what I would do [as a child], because I was so scared, is I would roll up the windows. And, ya, I would roll up the windows. Of course it was very, very warm. And I was very scared. I was afraid someone would come take me away or drive off with me or just a terrible feeling. Very, very frightened. And this happened for a few summers. Repeatedly.

*But the heat, the intensity in there, would have made me feel mostly like suffocating in that small area. That small section of the car. I certainly remember sitting in the car and crying. Wishing with all my heart that they would come back. That they would just come back. And not leave me alone. In a car...where there were drunken old men coming and going. And it was at that.....it made me realise...Now, I can't honestly say that I felt like I couldn't breathe at that moment [in the healing session]. I can't say that. But I could feel those emotions so strongly. 'Why did they leave me? Did they know about me? Do they not care? Just drinking so much'....and yet my father loved me very much. It wasn't his fault. It was what he had been through. And he just didn't know how to deal with it. He just didn't know how to deal....but it was very hard. And...so...when [Cynthia, Kim and I] got talking about it [in the healing session] ....I really felt...very.....sad.....fearful...as I felt those same days.*

*And as Cynthia and Kim pointed out to me, which I never thought of before that day, I just wouldn't be here: kids die in that kind of heat—they just don't live! They die! Or they are very ill. [But in my case, there] was nothing, just the fear. And it was then that we realised where the claustrophobia had come from. And we also realised, as Cynthia pointed out, and Kim, that, at those days those times—and I had many different times, when there was no way I should have managed on my own—at those times Jesus himself, God himself was breathing into my lungs. It's the only reason I'm alive today. Because the heat, the intensity—I mean, today, children die in hot cars. You know? In those temperatures, with the windows all rolled up....with no air coming in. I just couldn't have. I couldn't have lived.*

*And Cynthia said to me, 'do you think maybe you felt like you were smothering' and I thought 'ya that was it. I felt like I was smothering.' And not being able to breathe right. And probably... now even as I am sitting here now with you... re-experiencing the fear. It brought me*

*back. I could remember so strongly those feelings of being there. And then Cynthia said, “you know, you couldn’t possibly have survived if God wasn’t there breathing air into your lungs.” And I had an incredible sense of “wow you’d do that for me God? You did that! You did that. YOU did that. You kept me alive. You love me because I’m your daughter. So what on earth would you have me to?” And so realising that, that even back then, Jesus was right there with me, God was right there with me.*

*So [through that], we discovered the root cause of why I was feeling claustrophobic—but then that Jesus is with me! God is always there no matter when where or what. Whatever space I might be in, He kept me alive. He definitely kept me alive. And so we prayed about that. And I was most definitely healed of [claustrophobia] that day. The fear [of small spaces]. I can get into an elevator now, I’m in them all the time...and I am not concerned about if I’m going to be able to breathe or anything like that because we dealt with that that day. And that was clearly a healing, no question. No question.*

*And so....Cynthia was given a revelation, for sure. No question. Which enabled me then to go back and think about it. And remember, as I’m talking to them, the experience, the feelings, the emotions. Feel and, experience just as I have right now...feel and experience that intensity...and then we were able to ask for healing for that. And healing, of small spaces, healing ...of claustrophobia. Healing for me to be set free. And that’s---so it’s a combination of things...I would say.*

*... But to know that Jesus was actually breathing life into my body? That’s quite an incredible thought. That just amazes me. It’s quite incredible actually. So that’s just one of the things that stand out in my mind. He just never stops. He never stops the healing process, I don’t think. It’s ongoing. I believe that. It’s ongoing.”*

Marilyn identifies that, during this session, Cynthia experienced a “revelation” which then prompted her own reflection on her childhood experiences. “Revelations,” “prophecy,” or “words of knowledge” (all linguistic cousins to describe, with (what I have heard called) “Christianese” a God-given depth/type/specificity of knowledge that has a direct bearing on another’s life.) Marilyn emphasises the degree to which she “re-experiences” the painful feelings that, as a young girl, she experienced while in the car. In the midst of re-experiencing all of this, she gives (or, perhaps—since it is Cynthia who first suggests that Jesus was breathing air into Marilyn’s lungs—it might be more accurate to say that she is given) a new perspective to it.

### **iii. Wyrd Words of Wisdom: Seeing the Unseen through Dreams and Waking Visions**

As mentioned above, Doug experiences prophetic words of knowledge and wisdom as a regular part of his prayer life. Throughout our interview, Doug repeatedly referred to these experiences as “weird.” It was only later, upon transcribing and subsequently reviewing our interview transcript, that I noted the extent to which Doug emphasised this description: he used the word “weird” over thirty times within a single hour, almost exclusively in reference to experiencing what he calls a “word of wisdom” or “word of knowledge.” I find this particular choice of description to be intriguingly ironic, since the root of our modern usage of the word “weird” is the Anglo-Saxon word “*wyrd*,” which simultaneously connotes concepts of “divine fate” and “personal destiny.” To be sure, when he described his experiences as “weird,” Doug was (I only assume!) *not* calling to mind the various mythologies within Germanic literature which evoke the “*Wyrd*.” And yet, what Doug was describing as “weird” bears striking resemblance to the “*wyrd*” described in Germanic myths—an irrepressible, inexplicable experience that is attributed to an other-than-human force.

Doug’s “weird” experiences, in which, through the use of mental images, he receives a

“word” from God while either asleep or awake, have increased in frequency and depth over the years. Below, Doug shares two of these stories. The first, which was the first such experience that Doug ever had, occurred through a dream and the second, a more recent experience, occurred while awake. In the narratives, I have quoted verbatim, and have left in the portions that address me as the researcher; I think these serve as poignant reminders that these narratives were being crafted and shaped for my hearing.

1) *So, [while I was the owner and manager of a bookstore] I would meet with a lot of sales reps and other types of guys, and I always tried to get to know them a bit. And there was this one sales rep who my wife and I had over for dinner and we really got to know him pretty well, but then he moved down to the States. And I lost track of him. And every once in awhile I would think ‘I wonder how he’s doing’, but we had totally lost touch. But one night...I woke up in the middle of the night from a very, very, very clear dream. As clearly as I can see you, I saw that sales rep in this dream. And in the dream he was playing squash with a blonde haired woman, playing in a recreation centre which I can still picture to this day. And they were playing in this one specific city—one that I recognised. And him and this blonde woman were playing in that city—playing squash. And he was about to have an affair with her—it wasn’t his wife. And I thought... ‘that’s so weird.’ Now, the last I knew of him, he lived in the states. How weird. So I kind of went back to sleep and when I woke up in the morning that dream just hit me as soon as I woke up and I thought ‘why would I remember this’---I mean, I don’t normally remember all the dreams that I dream—so I thought ‘why would I remember that dream so vividly...’ Every detail was clear— I could tell you the colour of the room, the fluorescent lighting...it was just as real as this room here. So I thought, ‘okay, that’s weird.’ But I’m confident now—or at least growing in confidence [that some things should be paid attention to] ...so I looked through all of my stuff*

*and found his cell phone number. I called him up and it turns out he is actually in Canada. And I called him by name and I said, "Look, first of all I want to start off by telling you that I hope you still love me. (laughs) because I want to share something with you that's really weird. I had a dream last night." And he said "whoa whoa whoa I need to pull over to the side of the road. I'm driving right now but something you just said just got to me so I think I need to pull over." And I said to him "this"—and I told him—"is what I dreamt last night. I went back to sleep, and I woke up this morning and the Lord brought it all back to mind." And there was this pause, this long, long pause. And then he said, "It's exactly true. They actually live with us, they're rebuilding their house and they've come to live with us. We play squash together. And we're just about ready to have a full affair."*

*Now, Nadya, how could I have possibly known any of that. Like, it's just impossible for me. All the details? The squash? The very same city? The blonde hair? So then he said, "why do you think God did that?" and I said, "I think he did it for two reasons. One, to show you, 'you think you will get away with something? Like God is not going to see?' Come on buddy. God wants to protect your life so that you're not going to mess it up. And the second reason is for me to see that God can do way more than I think He can do." Because that is a gifting that subsequently I have seen numerous times now. But that was my first time, when I realised, I could not have possibly known any of that—like, in the natural.*

**2)** *I was at a meeting with three other people, and the one guy said "let me show you around," so he and I left the other two and we went to have this meeting, walking through a building, and all of a sudden...--Wait, you know how you can see in the peripheral? Like you can't quite see what is there but you can kind of see that it is there, you know? Okay. Well what I*

*am to say is a bit weird and it might make you wonder but...well, I don't know what to tell you. It happened.*

*Okay. So when I am talking with this man, face to face, in my peripheral – in this EMPTY ROOM—I could see two men engaging in oral sex. And. Like. That is not....—I've never done that...but I could see it happening. In my peripheral. And I thought, 'well this is weird. Why do I see that?'*

*So I am still carrying on the conversation with the guy but I could see... it...in my peripheral. And the whole time I never took my eyes off of the guy I was talking to, but I kept thinking 'what on EARTH am I seeing?!?' It was a WEIRD feeling! And I thought, 'that's just weird. Where did that come from?! Like, is there something in my past?—am I—do I want to have oral sex with a guy?!?!?' I was just trying to think through where this might have come from. It was just really weird for me. Anyway, we left and went on and that was kind of forgotten about. But, why did that happen? Well, I went on a walk and I pondered it, thinking 'what WAS that?' I didn't know.*

*Sometime later on I went on a weekend church retreat with a bunch of men, and this same guy was there. And I thought 'you know what, I'm going to address that.' (laughs). ...And, Nadya, over the years I have found out that, if people know you love them, you can say anything if you say it honestly in a loving fashion. And if you have their care in mind—not my judgment but their care, you can say anything.*

*So I said to this guy, "can we go for a walk?" And he was like "ya!" Because our last time together had been good and we both seemed to actually enjoy each other's company. So we went and I said "look, we have half an hour before the next session starts so let's cut all the small talk stuff. I have a question, a really direct question, and if you're uncomfortable tell me*

*and I won't ask the rest of it, but I want to ask this—" And I phrased it exactly this way: "Tell me about your sexuality."*

*Now, I don't know about women, but guys don't normally go for walks and say 'tell me about your sexuality' –it's kind of like you could have this instant, fists up, 'what, get me out of here!' But hey, chalk it up—I'm an old, nice man, whatever. So he answered me. And I was intrigued by his response. His reply was exactly this: "well, don't all men struggle with homosexuality?" Now, my question never once inferred about homosexuality. So I said to him, "well, no, not all men, no." and there was this kind of awkward thing of processing maybe he was thinking like 'why did I say that' and I was like 'what am I supposed to do with this?' and so we were quiet.*

*And we walked a bit more and then I said "well, how do you struggle with that?" and he got a bit defensive and went "whoa whoa whoa! I just want to tell you that every time a thought comes up I push it down!" And I said, "okay this might be uncomfortable for you, but ... what thoughts. What specifically is it." And he was embarrassed and awkward but I said to him, "look, you can't tell me anything I haven't heard before. I meet with guys who have been abused, some who sell their bodies for sex, you can tell me anything and it won't throw me." And he said, "well, its oral sex. It bombards me." And it was quiet and so we walked a little bit more, and I asked him "why do you think that happens to you? Like, why oral sex. Why not another kind of sex?" And he said, "well, when I was eight years old my brother and his friend would force me to perform oral sex on them. And because I was young and weaker they mocked me and taunted me. Nobody protected me. And I can't remember how long it went on for, but it wasn't a one-time event."*

*And, now, Nadya, I'm a bit surprised because I obviously remember seeing that in my*

*periphery the first time he and I met—which I didn't tell him about—and so we walked a little bit longer. And then he said, "I told my youth leader and he invited me away on a retreat with some other guys. But when we got up on the retreat it was only him and me. And we were in a cottage and we drank and watched porn and masturbated together. And I had been drinking a lot and fell asleep and I woke up to him having sex with me."*

*Now, all I saw was that peripheral vision in a building when we had a meeting. But now all of a sudden I have this opportunity to talk with him and allow him to finally share this with someone he, evidently, trusted. I was the first one he told. We had an opportunity to pray together, we talked about forgiveness, and healing. We asked God to enter in and to heal those wounds...and I've met with him once or twice since then. And I am honoured to.*

*But the whole thing is fascinating to me, Nadya. Because when I think about it, I think, 'How could I have known that? How could I have known that? And why would God care so much about these specifics of this guy? Why to me?' I have no idea. So it comes back to this confidence of knowing that God just loves. He just loves.*

#### **iv. Bereavement, Suicidal Struggles, Drug Abuse, Domestic Abuse, Mahikari, Voodoo Magic, and Healing Massage Therapy: The Long Journey of Being Given a 'New Heart'**

Soraya has experienced various types of healings during a number of stages in her life. These healings occurred primarily when she allowed the Lord to "bring [her] back" to the moments in her life where she had experienced emotional, physical, and spiritual pain, and reveal to her that "He was personally there with [her]" throughout each of these moments. Her earliest such memory was when, as a nine year old child living in the Dominican Republic, the unexpected death of her father led to the subsequent social loss of her step-sisters and other family members on her father's side. For years afterward, Soraya was brought to psychiatrists

and doctors to receive treatment, but their efforts were in vain, as Soraya remained in a deep depression. One night, as she was crying, alone, in her bedroom, she suddenly felt a hand on her head and heard a voice ask her “why are you crying?” Soraya replied that she could not bear the pain of her father not being with her, to which she heard the reply “I will always be with you, wherever you go, I never left you, and I will always be here.”<sup>223</sup> This lifted Soraya’s spirits for some time, but other events soon spiralled her again into a depression. Her struggle with depression worsened when, years later, as a nineteen year old, she caught her boyfriend cheating on her with her best friend—the very two individuals whom she had grown to trust the most since the loss of her father. Soraya struggled with suicide and required care due to her suicidal tendencies.

With her own mother unwilling to continue to care for her, but in need of monitoring due to her depression, Soraya was passed around to the care of her uncle, her cousin, and ultimately her cousin’s friend in Holland. She landed a modeling career, during which she began experimenting with ecstasy, LSD, speed, and cocaine. She began dating again, fell in love with a man and became pregnant. But when the boy was born the boy’s father left her, and so she moved back to her hometown to try to start a new life for herself. Although many things seemed to be working well for her, one weekend her house burned down in a fire, leaving her and her son with nothing. She began working another job, met a new boyfriend, had a second son, but soon ended up as a single mother of two. She moved to Spain, and ended up marrying a man whom she later found out to be an alcoholic. He became physically abusive and would lock Soraya and her children up in the house for days at a time until one day Soraya gathered the courage to leave. Her husband reacted violently, smashing the car windshield, and when a

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<sup>223</sup> Soraya explained to me that she originally assumed this to be the voice of her father but, as she prayed about this memory leading up to my interview with her, she felt she was told by God that this moment was the voice of God.

neighbour came to usher the children away and call the police, the husband began beating Soraya and threatening her with a knife. The police descended upon the scene and arrested her husband for domestic violence and attempted murder. When her husband was released he was given a restraining order, but Soraya and her children retained the fear that he might come near

Meanwhile, Soraya was introduced to a spiritual practice called Mahikari—a healing practice from Japan which is colloquially referred to as “receiving the lights.” Soraya began by “receiving the light” from a number of people, and soon attended courses which instructed individuals on how to access “the light” of their own accord. “Receiving the lights” could mean a number of things; a person properly trained in Mahikari could use “the lights” to instantaneously heal physical wounds, increase the speed of plant growth, instill a sense of peace in a chaotic mind, bring down a child’s fever, etc. “The lights” were a non-material energy thought to be transferred from the individual’s hands to whatever recipient. After intensive training, she advanced in the Mahikari ranks and was given the status of a healer to whom others would come to in order to “receive the lights” from her. She was given ritual objects for this purpose, with the explicit instructions that she must keep them on her person at all times, not allow them to come into contact with any water, nor could they be touched by any individual other than her. Due to the fear of breaking one of these rules, Soraya began to socially isolate herself from other people, until one day (after being confronted by a close friend about the detriments it was causing her and her family) she decided to abandon the practice completely. From here, Soraya turned to Buddhist meditation as a way of feeling peaceful and, ultimately, seeking God.<sup>224</sup>

When this, too, did not provide for her the depth of peace that she desired, Soraya moved herself and her sons to the Dominican Republic where her mother and step-father were then

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<sup>224</sup> Soraya describes her efforts in Mahikari, Buddhism, and other spiritual practices as “a way of looking for God but in all the wrong places.”

living. There, she started her own small-business, which flourished, and soon entered into a relationship with the son of her housemaid. Eventually, she began to lose motivation. She decided to move to a different part of the Dominican Republic and, while packing up her belongings, discovered “all kinds of strange things in [her] house: crosses with feathers and blood stains, things under [her] clothes, hidden, all kinds of weird things in the freezer, even little pots that had frozen [her] name and [the housemaid’s son’s] name in it.” She suspected they had been placed by her housemaid, but did not think much of it. When she moved cities, she was invited to attend a church and, agreeing, ended up being “prayed over” by the woman who invited her. The woman told the message of the gospel to Soraya, who broke down and wept for three or four hours and stated that she wanted “to know and to receive this God.” Soraya returned to her home feeling like a new person, and a few days later she heard a voice tell her ‘I want you to go on ten days of fasting.’ Soraya did not know what fasting was, and so she went to the church to ask her new pastor about it. Soraya ended up going on a ten-day fast with only water. Around the sixth or seventh day of her fast, Soraya began to experience sharp pain in her legs, and arms, and wrists, as if “someone was punching [her] with a knife.” Soraya related these specific locations of the pains back to particular rituals she had undergone in earlier parts of her life.<sup>225</sup>

Four weeks after the fast, she woke up at 3am to a voice saying “Soraya! Wake up!” She woke up, startled, and the voice continued, instructing her to go into the different boxes in her house and throw out the items that she had gathered during her many previous spiritual quests. She filled two large black garbage bags with that she had been instructed to set aside. At this

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<sup>225</sup> Specifically, when Soraya was dating the man who later became the father of her first child, she and him went to Suriname (his home country) and met with a man who offered to do a ritual that would bind them together forever. Being in love, they agreed to undertake it. Among other things, it involved slicing their skin at the wrists and at particular points of their legs, and mixing their blood together at these same places. Soraya explains that it was at these parts of her body that she experienced this “sharp, cutting pain.”

point in time, she began thinking about the man she was dating (the son of her housemaid in the last city she lived in) and she felt her head begin to spin round and round. She began to vomit violently and then, at 6am, she vomited something which she described as “black and kind of sticky,” and which made a screaming sound as it came out of her. As soon as this came out of her, Soraya felt notably different. She looked at the black thing curiously, took it out of the toilet bowl and placed it in a plastic bag. She brought it to her pastor who told her that someone must have “done voodoo” on her. Following this, Soraya ended her relationship with her then-boyfriend, to the happiness of her two sons.

After some time had passed, Soraya again heard a voice—a voice that she had since come to understand as the voice of God. The voice told her to write down everything from her past that she could remember. Soraya wrote for four days straight and in this process remembered several close-to-death experiences from drug overdoses and forms of violence; she remembered the emotional fatigue and sense of “heaviness” that she had experienced while dating the man whose mother (she later concluded) had “done voodoo on her”; she recalled a number of specific experiences with such vivid detail that she filled pages and pages with her memories. When she finished re-reading what she wrote, the voice (the same that had instructed her to “write”) then told her to read what she had written to her children. After some hesitation, she did this, and for the first time she revealed to her children the extent of her experimentation with drugs etc., and the family shared in the painful memories of the abuse and/or neglect they had experienced at the hands of the men Soraya had dated. It is a moment Soraya says she will never forget: “we cried and hugged and spoke and hugged and cried and—all was forgiven. All was restored.” Shortly after, Soraya attended a retreat during which she experienced a moment where she felt that her heart was being ripped from her; she lost her breath and experienced an emptiness that she had

not felt before. “It was like—I could not breathe—I could *not* breathe; I could not breathe, not even one breath.” Moments later she felt “The Lord coming over to [her] and embracing [her]” and felt that God had given her a new heart.

Apart from this sensation of feeling the love of God in such tangible ways, Soraya’s struggles were not instantly eased. She had practically run out of money and, without a proper salary, was finding it difficult to take care of her two boys. Soraya describes those times with a certain sense of fondness: “we had nothing [in our house], not even chairs or couches to sit on, but we would sit on the floor together and talk, and read. We would play some simple games.” One day, while sitting on the floor with her children, Soraya received a phone call from a woman she had never met before.

*“Hello?”*

*“Hello? ...Who is this?”*

*“This is Valerie<sup>226</sup>. Is this Soraya?”*

*“Yes...it is. But, I’m sorry, I don’t know who you are.”*

*Valerie went on to tell Soraya that, although they had not met, she had “felt led” to contact her. She had inquired at the local church and gotten Soraya’s number from a pastor who worked there. After explaining this, Valerie asked a question that Soraya had been dreading.*

*“Soraya, I am wondering...can I come to your house?”*

A sense of shame came over Soraya’s face even as she explained this to me, years later, “you see,” she told me, “I had nothing. I had NOTHING. Come to my house?!?! I can’t even offer her a chair to sit on. I can offer her a cup of water, or maybe some tea, but that is it! She wants to come to my house!?!?!?”

*“Soraya, please. Let me come to your house. Please. I want to come, please.”*

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<sup>226</sup> Pseudonym used.

*Valerie came over to Soraya's house shortly after. They introduced themselves, exchanged pleasantries, and then Valerie entered and began to look around. She made the short walk from the living room to the kitchen, and to the bedroom that the family shared. Soraya cringed throughout it all.*

*"Yes. Yes," Valerie paused. "The Lord has told me to give to you. I don't know why, but He has told me, and I am obeying." Valerie proceeded to hand over enough cash to last Soraya and her family for four months. She also promised that, the next day, a truck would come and deliver furniture to the house.*

Reflecting on the experience, Soraya exclaimed, "Everything was restored. Everything. That is how God restored not just my heart, but my whole life.

From there, Soraya heard God instruct her to return to the city where she had earlier lived. Soraya disregarded this at first, believing that God had *just* restored her life here that He couldn't possibly want her to pack up and move again. But, after much prayer and deliberation, she agreed. She sold her furniture and other household items, donated the money to charity, and moved with her boys into a small hostel—a hostel which was frequented by local prostitutes, and where many of the women stayed. While living at the hostel, Soraya "felt led" to befriend the women who stayed there. She spent most of her time talking with the women, sharing her own story with them, and teaching them what she had come to know about "the goodness of the Lord."

As time went on, Soraya and her children moved into a small apartment. One day in her apartment, while hosting a small group of people over, Soraya met a friend of one of her friends. As she met the man, she heard God say "this is your husband."<sup>227</sup> Soraya hesitated to accept this

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<sup>227</sup> As Soraya came to know in the coming months, the man had heard at the same time a voice which announced to him "this is your wife."

declaration, as she felt convinced that she had “been wrong” about so many of her relationships in the past and was content to remain single. She described, “I was so confused and I prayed, ‘God you really have to let me know it’s from you, I don’t want to make any mistakes, I don’t want to...’and at that point that I was praying, out of a closet fell a diary fell open on the ground and fell open to a page from six years ago where I was asking God, ‘can you please bring me a man of God’ so I thought ‘Ahhhhh okay!’ (*laughs*) Okay!” Although, legally speaking, their marriage proved to be far more difficult than either of them had anticipated (Soraya had great difficulty in obtaining divorce papers from her former marriage, for one thing) the two are now happily married and living in Ottawa, Canada.

Her husband supports Soraya in her ministry of healing massage, and the two often pray for healing together for others. At first, Soraya and her husband made a massage-room at home for Soraya to run a small business as a registered massage therapist, but the two later agreed that the Lord was calling Soraya to offer healing-massages as a ministry.<sup>228</sup> Soraya explains the process of switching from registered massage therapy to healing massage:

The Lord told me that, before I put my hands on anyone, I should pray. And so I do that. And from there out I just let Him—it’s very strange, the minute I put my hands on and I pray, I just enter into the world of that person...in the way that I see the body as a temple...of the Lord...and...I, every room He talks with me constantly, go in that room, stay there longer, are you feeling there, the cold that I am showing you or the warmth that I’m showing you. And He’s just explaining to me constantly what is happening in every moment. And what is happening in the life of that person. A lot of times when I am praying He is telling me what is happening and then I pray over that person, through the Holy Spirit, and then, a lot of times He is ministering to the person himself too, when the person is laying down there. And sometimes, mostly other times too, when I am finished giving the massage then He has a lot of times a message that I need to give to the person, or a word, or something that He wants the person to know...but the really thing that He shows me that are...like...abnormal...like, you feel really, that you have not felt this by other people, it is really [something you would not normally be comfortable hearing about someone or telling back to them.] And, at that point it is the Holy Spirit taking over me. When I pray in the beginning, I pray that it is not my hands anymore but that it is the Holy Spirit...and He gives me understanding, like afterwards what is happening and what He is doing.

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<sup>228</sup> As is the case with all the women I spoke with who offer healing ministry, no financial payment is expected, though donations (monetary or other) are accepted.

Although the details of Soraya's story are unique—and, certainly, I think, quite remarkable and rather moving—her story is somewhat characteristic of other accounts within the anthropological literature; as mentioned in chapter two in my discussion of “the initiatory illness,” it is not uncommon to learn that an individual has encountered deep personal pain before being gifted with a power to heal. Although, certainly, some religious/cultural traditions emphasise that a gift of healing is passed down in the genetic sense, anthropology as a discipline has collected many accounts which describe a progression not unlike Soraya's: we might say that an individual's pain can be seen as both a forerunner and a catalyst to their ability to heal. There are many explanations for this pattern: they range from the theological, to the psychological, to the neurological, etc.<sup>229</sup> I find each of these explanations to be fascinating, and believe each to provide a depth of analysis that is useful in coming to an understanding of the way that individual suffering influences that same individual's ability/willingness to reach out to others.

#### **v. “I Once Was Blind [...] and then I saw, but now I'm blind again:” Physical Healing and the Power of [Dis]belief**

Six years ago, Rachel walked into a tent-meeting at a summer camp, greeted by the sounds of the worship band and the singing of the ‘church congregation.’<sup>230</sup> It wasn't really a ‘church’ in the traditional sense, for it had no building, and no established year-round

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<sup>229</sup> See Henri Nouwen's *The Wounded Healer: Ministry in Contemporary Society* (1979) for an excellent summary of this theological position.

<sup>230</sup> Inspired by the stylistic writing of Karen McCarthy Brown (1991), some of these contextual details have been fictionalised by me in order to provide the reader with as rich a description as possible. These fictionalised details were added with the expressed consent of Rachel, who told me her story, but (because it happened six years ago) could not remember all the precise details. Rachel recalls the general details of the congregation before being specifically prayed for. She also recalls falling over, conducting her “flag test”, and her reactionary emotions concerning the man who prayed for her; she attributes her loss of vision to feeling offended by the man. The other details, which I add in order to contextualise Rachel's non-fictional experience, were drawn from my participant observation at a number of other similar healing services. This final rendition was shown to Rachel, who agreed that the atmosphere (that I created so to situate her story) seemed representative of many healing services she has attended.

congregation—it only “met” during the summer time, comprised of whichever families or individuals happened to attend the camp that particular summer. Each night there was a meeting held in the tent. The meeting began and concluded with musical worship, and a “speaker” (akin to a pastor, but who did not necessarily hold this title) would give a sermon of sorts—which covered a variety of topics and, each one might last anywhere from twenty minutes to over an hour.

On this particular night, the speaker finished his sermon and transitioned into an unscheduled time of prayer for healing. He began with a general prayer: “Lord, thank You for the love that You have for each and every individual here in this room right now. Bless these brothers and sisters, God, bless them. And Father we THANK YOU for the power of the Cross, Lord, and we know that you want us to receive Your healing today. Holy Spirit, come. Fill this place. Breathe into our lungs; breathe fresh, new air into us. Shower us with your grace and mercies. Fill this place, Holy Spirit.” As he prayed out loud, he began to receive “words of knowledge” for specific individuals in the congregation. Slowly, they stood up in their seats, responding to any detail the speaker listed which resonated with their own experiences, and walked to the front altar to receive prayer for healing. The details varied in specificity and type: one woman stood up for healing when the man told the crowd that “someone in the audience who had oatmeal for breakfast needs healing for her back.” A number of individuals stood up of their own accord without any prompting from the man, knowing they each had something they could request prayer for. The line at the front was getting longer; people slowly filtered through it, first reaching the front to receive their prayer, and then returning to their seats. By this point, the worship band had again joined the stage and recommenced playing songs—they hadn’t prepared for this “extra time” of musical worship, but they chose songs that everyone knew and

could sing along to even without the lyrics being projected onto the screen. The people who were not making their way to the front altar were singing along with the band, some sitting in their chairs while others stood up, eyes closed and hands raised with total abandon. The songs made declarations of relying on God in the midst of suffering, of the greatness of God's love, and of the power of Jesus.

Some individuals turned to those beside them and laid hands on each other in prayer while others mumbled softly in tongues. One woman who looked to be in her early thirties went quietly to the back of the church and started dancing, spinning around and leaping in the air in time to the music—she attracted the attention of several children, whose parents allowed them to join her at the back. The kids made use of several long, colourful ribbons (which were kept in a box at the back for this purpose) and twirled them in the air as they tried to mimic the graceful movements of the woman. Meanwhile, the speaker continued, praying individually (into his microphone) for each person who had approached. Congregants murmured “amen” in agreement with the speaker's prayers. Accompanying the speaker was a small group of individuals commonly referred to by Charismatics as “catchers.”

Any able-bodied adult can be a “catcher,” though the positions tend to be sporadically filled by individuals who participate regularly in the church's services, or who have some kind of leadership affiliation. The catcher's role is simple: be ready to catch those who fall down. It is not uncommon for a number of individuals to physically fall down upon being prayed for. Charismatics attribute this to a surging of the Holy Spirit, and explain that individuals simply are “overwhelmed” or “overcome” by the Spirit to such a degree that they lose their footing. For some, it is just a split-second experience and they will return to their feet after being momentarily supported by the catchers. For others, it is more long-term experience. After being

“caught,” some individuals are slowly brought down to the ground by the catchers, and are then covered up (by one of the “clothers”) with a piece of material stored for this purpose; they are left in this position until they revive themselves and return to whatever worship posture they desire—whether this be standing and singing along with others, or sitting back in their chair. Other individuals are “caught” but then begin to laugh noisily, shake, or even dance. This is often referred to as being “drunk in the Spirit.” (On occasion, I have seen individuals hand over their car keys to a friend and arrange for an alternative ride home, convinced that their “drunkenness” has prohibited them from driving safely). One woman, Anna, explained this to me by emphasizing that “when [a group of people] are totally connected to the Holy Spirit, it’s just a thing that happens. [The ones who are praying for healing] just know who to call up, and they are given the words, and others will be struck, and others will minister. It’s just all with the Holy Spirit.”

At first, Rachel sat still, watching as a number of people came up to the man and received prayer from him. But then, when the man announced that anyone who needed healing in their eyes should come forward to receive prayer, Rachel stood up and walked toward him. There were around twenty-five individuals who also went up for healing at this point. Rachel has not suffered any particular injuries to her eyes, but requires glasses for her otherwise blurry vision. In a rather nonchalant way, she thought about how much she hated wearing glasses and how nice it would be to not need them. “Why not give the prayer a try,” she reasoned.

The man began to pray, quickly, going from one individual to another. As Rachel stood in line, she began to “check” her eyesight; she wanted to have something to compare it to for after the man prayed for her. She looked into the distance and stared at a flag that hung on one of the walls of the church. In keeping with her regular vision abilities, the flag was blurry and she

could not make out its specific pattern. When the man got to her, he prayed something similar to that which he had been praying for the others: that God would heal Rachel's eyes and give her a full restoration of vision. His hands were on her forehead as he prayed this, and when he finished, Rachel fell over into the arms of the ever-vigilant catchers.

When Rachel opened her eyes, the first thing she saw was the flag that hung on the wall. She looked at it and, shocked, noted that she saw it absolutely clearly; she could make out all of its designs and patterns. Rachel looked around the room and felt as if she saw things with a visual clarity and detail that she had never before experienced without her glasses. Mere seconds later, Rachel was struck by another thought: why had she fallen? Had the man pushed her over at the end of his prayer? Had he done so as a guise, perhaps trying to make it appear as if those he prayed for were overcome by the Spirit and that he was responsible for surging people with this divine power? Was any of this 'real' or was it all a pretext? Immediately, Rachel began to question the validity of this healing service and whether God was "really at work through this man." She began to feel "offended at the man in [her] heart."

As quickly as the indignation had flooded her heart and mind, so, too did her vision become blurry. Rachel looked again at the flag and it had returned to its blurry mass of colours that it had been to her sight before the man prayed for her.

Reflecting on the experience these six years later, Rachel freely shares, "I'm not really sure what happened that day. I do know I saw those flags [blurry and then clear.] I don't know whether that man pushed me or whether I fell [from the Holy Spirit.] I don't know what happened with my eyesight. I don't think that God would have been punishing me for my lack of faith and then taking away my vision. [...] Maybe it's so that I could learn a lesson about how

God works. But, I was SO QUICK to doubt. Maybe it [the reason that my vision became blurry again] is just that I lacked the faith.”

#### **4: USHERING IN THE KINGDOM OF GOD: CONSIDERING CHARISMATIC HEALING MORE BROADLY**

Though these five case studies presented above are ripe with differences, they also share some striking similarities which help elucidate (among other things) the way that Charismatics conceptualise and respond to illness and healing. Ultimately, these stories help show us the way in which Charismatics conceptualise and describe their understanding of God.

##### **4.1 “Who is God?” and “Whose God?”**

Firstly, these stories are formed and told within the over-arching subtext that there is a God who actively desires to heal individuals. This is not simply a transcendent God in the sky (perhaps sitting on a cloud, and reading the highlights of the daily news from a scroll?) but a God who is immanent and intimately interested in even the seemingly mundane affairs of individuals. This God of contemporary Charismatics is not a God whose wrath is feared or whose judgment is so severe that individuals strive to seek after pain in hopes of reducing their future spiritual penances.<sup>231</sup> Rather, this is a God whose love is bigger than His judgment and who wants to console and to comfort, more than He wants to condemn.

Charismatics experience a “personal relationship” with this God and not only bring their requests of elaborate healing to Him, but they talk to Him when they are sad, frustrated, or uncertain—some even ask His advice on where to buy winter boots! Contemporary Charismatics are not only convinced of their future spiritual salvation, but are certain in their conviction that God is active and eager to participate in ways to improve their lives in the here and now of this

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<sup>231</sup> In Chapter One of “Faith in the Great Physician: Suffering and Divine Healing in American Culture, 1860-1900”, Heather Curtis explores how mid-19<sup>th</sup> century protestants conceptualised suffering within a Christian theological lens that was formed in the Medieval era in which acts of martyrdom were practiced. She emphasises that discomfort was viewed as a sign of progress, and a “stimulus for deeper mystical experience” or “a sign of God’s favour” (p. 37).

world. This God is aching for individuals to come and commune with Him through prayer or worship, has already forgiven them of their wrongdoings before they even request forgiveness, and has a particular, unique plan for each individual which He is constantly striving to help them work toward; the all-powerful God is interested in the minute and the mundane. God *must*, Charismatics argue, want what is best for individuals. In many ways, this reflects a late 19<sup>th</sup> century view in which proponents of divine healing emphasised that God was “a sympathizing parent who permeated nature with divinity,” and who championed the notion that God desired to eradicate all forms of individual suffering.<sup>232</sup>

It is the persistence of this—this seemingly-absurdly intimate understanding of God—combined with the long-standing view within the Christian tradition that God is omnipotent and can do the impossible, which gives Charismatics the hope in asking for the full spectrum of healings. Charismatics pray just as fervently for God to take away a cough as they do for the eradication of cancer; they pray with equal earnestness for God to give them a good night’s rest as they do for Jesus to deliver them from the grip of the demonic. Many Charismatics situate this belief within biblical scriptures—referencing passages like John 10:10 which stipulate that God wants to give individuals “life to the full.” This continual effort to ground these doctrinal beliefs in scripture seems important, and I believe it could possibly be viewed as an integral link that connects contemporary Charismatics to the Evangelical and Fundamentalist traditions from which they have emerged. The Charismatic and Pentecostal movements at large, as Luhrmann has previously identified, is a merging of two radically different streams of belief: it is the result of combining an emphasis on experientialism and the relational aspect of faith with the long-lasting Evangelical Protestant conviction of biblical scriptures as being “literal and inerrant

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<sup>232</sup> Curtis, *Faith in the Great Physician*, 57.

revelation of God.”<sup>233</sup> It is therefore a rather significant detail that Charismatics point to biblical passages to explain their focus on a relational God—and, as I suggested in chapter one, it is rather pertinent to contemporary Charismatic practices of healing to consider both the biblical context as well as the recent historical context of healing. Accordingly, Charismatics explain that this God of the Bible—who, they emphasise, is determined to give individuals “life to the full”—wants to talk to us when we are lonely, to give us advice of where to find good bargains, and to help us forgive those around us—so surely, Charismatics conclude, He must also want to heal our physical, emotional, and spiritual wounds.

Although certain early features of this contemporary emphasis on God as a friend and a buddy can be located within earlier studies of divine healing, there seem to be some significant differences in regard to how individuals conceptualised illness as well as how they reacted after praying for healing. The early years of the divine healing movement, as summarised by historians Heather Curtis, Nancy Hardesty, James Opp, and James Robinson and explored in chapter one of this thesis, focused largely on physical healings.<sup>234</sup> At the onset of the divine healing movement in the late 19<sup>th</sup> century, physical ailments were certainly targeted through dietary and fitness practices (which were themselves explained by proponents of divine healing in spiritual terms), but physical ailments—and, subsequently, their treatments—were also regarded as being connected to spirituality. As a result of this correlation, individual faith and prayer were readily prescribed as preventative and treatment methods. The fact that the divine healing movement was birthed alongside the emergence of modern medicine forged a link between spiritual healing and modern medical treatments of physical ailments and disease, as

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<sup>233</sup> Luhrmann, *When God Talks Back*, 307-311.

<sup>234</sup> There were a few exceptions to this, and they are noted and explored by Heather Curtis. Some of these include the individuals Jennie Smith and Lucy Osborn, both of whom experienced a physical healing but then chose to focus their own ministry on salvation and conversion, rather than physical healing. See Curtis, *Faith in the Great Physician*, chapter seven in particular.

medical doctors frequently incorporated spiritual practices into their treatment methods. This merging of spirituality with modern medicine might have been done, in part, out of a desire to emphasise the omnipotence of God in a time where Western medical practices were, though revolutionary, still limited in the depth and breadth of their treatments. As Curtis draws our attention to, “where remedies and doctors disappointed, faith in God’s healing power produced prompt, discernible results. Pain ceased at a precise moment. Bodies that lay prostrated suddenly arose [...]”<sup>235</sup>

In contrast to this 19<sup>th</sup> and 20<sup>th</sup> century emphasis, physical healing does not remain in the spotlight or receive the same emphasis among contemporary Charismatic stories of healing. As alluded to throughout this thesis, many of my research participants emphasise holistic healing— healing of the body, soul, and spirit—and they look to physical healing as one of many forms of healing. As a result, physical ailments or diseases are not responded to with any more fervour than other forms of ailments. Whereas proponents of the early divine healing movement focused primarily—near exclusively—on physical illnesses, contemporary Charismatics conceptualise illness in a significantly broader sense.

#### **4.2 What is Illness?**

In efforts of spiritual healing, what is targeted as the locus of illness? Or, phrased alternately, what is understood to be in need of healing? One cannot discuss healing apart from illness, because we need to have a full understanding of all the parts of an individual that can get “sick” so to understand all the parts of an individual that can experience healing. As summarised in chapter two, scholars have explored a number of diverse healing practices that seek to address different types of healing—physical, emotional, psychological, and spiritual at the individual

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<sup>235</sup> Curtis, *Faith in the Great Physician*, 87.

level, and even social healing at the societal level. For contemporary Charismatics, *anything that prevents an individual from living life to his or her “fullest” is conceptualised as in need of healing*. The details of this are explored in the preceding chapter through the stories of various individuals.

It is within this understanding of illness that Cynthia referred to her “heart issues,” by which she denoted not a physical ailment but an emotional mal-alignment which was fixed only through “coming to God.” It is due to this holistic understanding of illness that Maureen spoke of being healed of her cough, her cancer, the emotional abuse experienced from both her husband and her church, and the detrimental “soul ties” which either she had formed or which had been passed down to her through the decisions of the generations that went before her. It is through the inseparable connection that Charismatics have forged between the spiritual and physical, or immaterial and material, parts of the individual that Marilyn declared her claustrophobia had been cured by first attributing its hold on her to a specific childhood memory and then retroactively “inviting Jesus into that place” with her. Though these were not explicitly described in terms of “illness” they were implicitly, and explicitly, recognised as in need of healing.

In sharing their experiences of healing, other individuals told me stories about lowering their anxiety levels, increasing their sense of self-worth, recovering unexpectedly from severe medical diseases, going “cold turkey” in drug rehabilitation efforts, ceasing criminal activities, and receiving unexpected sources of income. These were not conceptualised as a “means of spiritual progression” or “tests of faith” (as similar circumstances were often theologically conceptualised in the 17<sup>th</sup> and 18<sup>th</sup> centuries) that God allowed to occur.<sup>236</sup> Rather, they were understood as obstacles that prevented individuals from experiencing the life that God intended,

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<sup>236</sup> See the work of Jan van Dijkhuizen and Karl Enekel, *The Sense of Suffering : Constructions of Physical Pain in Early Modern Culture* (Boston, MA : Brill Academic Publishers, 2008).

and desired, for them to have. This shift is indicative of two distinct things: firstly, the understanding of what “counts” as illness within the Christian community has expanded to include other than that which is physical in nature; secondly, the very understanding of the purpose of illness has shifted—contemporary Charismatics understand God to take an active role in improving individual’s lives in the here and now.

### **i. Healings as Cosmic Victories**

I believe there are significant connections between this contemporary understanding of “illness” (outlined above) and its 19<sup>th</sup> century understanding (which, though mostly limited to physical illness, Curtis proposed as being conceptualised eschatologically as a way of gaining a “cosmic victory against Satan.”)<sup>237</sup> Although some of the nuances have changed, many Charismatics continue to understand illnesses—in all their various types, breadths, and depths—as being associated with some element of “the demonic.” This was shown through specific language choices during interviews—such as Anna who referred to her stresses and other anxieties as “darkness” and sometimes directly as “the demonic,” or Maureen who drew a link between viruses/bacteria and “demonic spirits.” As a result of this association, Charismatics who engage in healing practices are continually battling—and, for the most part, they explain, winning against—the demonic forces in our world.

It is perhaps timely to here remind ourselves that just as “illness” is not limited to physical (or even mental/psychological) illnesses for Charismatics, so too is the category of “the demonic” not limited to the popularised, cartoon idea of devils with pitchforks. Earlier in this thesis I referred to Csordas’ definition of the demonic, in which he suggests that a demon is understood by Charismatics as “an intelligent nonmaterial being that is irredeemably evil, is under the domination of Satan, and whose proper abode is Hell. Evil Spirits interact with humans

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<sup>237</sup> Curtis, *Faith in the Great Physician*, 200.

by harassing, oppressing, or possessing them.”<sup>238</sup> But, importantly, this “demonic” is not understood to have a uniform appearance, role, or purpose—some of my informants expounded upon this definition and explained that the very feelings of shame or guilt (notably immaterial sensations which individuals’ minds are often plagued by) are themselves the “voices of the demonic,”<sup>239</sup> while other individuals I spoke with claimed to have visibly seen “the demonic” in their own homes.<sup>240</sup>

I propose that, in addition to (as I have argued above) the reality that the Charismatic understanding of illness is broader than physical illness, Charismatics have maintained a sense of the 19<sup>th</sup> century notion that the treatment of illness can be understood as a “cosmic victory” against Satan. If both these assertions are correct (which I believe them to be) we can then conclude that each “type” of illness that is conquered through contemporary Charismatic healing is understood within the Charismatic community as a way of defying “the enemy” (that is, Satan) and ushering in God’s plan. In other words, every single type of illness—social anxiety, common colds, cancer, drug or alcohol addictions, broken marriages or family malfunctions, financial strains, physical ailments, loneliness, phobias, low self-esteem, etc.—which is addressed by Charismatic healing plays a part in eradicating the actual cosmos of demonic influence. For Charismatics, along with other branches of Evangelical Christianity, this is inexorably wrapped up in the theological conviction that the Kingdom of God—initiated on the day of Pentecost as outlined in Chapter One—is drawing ever-nearer. If every type of illness mentioned above is a way of directly claiming victory over the demonic and subsequently directly participating in

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<sup>238</sup> Csordas, *The Sacred Self*, 65.

<sup>239</sup> As explained by Doug.

<sup>240</sup> As explained by Maureen.

“bringing the Kingdom of God nearer” then by engaging in spiritual healing efforts, Charismatics are actually participating in what they refer to as “Kingdom living.”<sup>241</sup>

### 4.3 Reacting to healings

#### i. “Praise God!”

The Charismatic conceptualisation of the cosmological impact of spiritual healing helps provide an explanation as to why Charismatics focus so deeply on healing. Yet, there is an additional—and, certainly, a more commonplace—explanation for this focus: Charismatics frequently experience real, transformative outcomes from their engagement with spiritual healing. Much like some of the individuals’ stories documented in the 19<sup>th</sup> and 20<sup>th</sup> century divine healing movement, many of my research participants experienced remarkable healings as a result of a private healing retreat, communal prayer, inner healing counselling, deliverance ministry, or a personal revelation attributed to the Holy Spirit. For example, after Anna received prayer and deliverance ministry from a pastor, she went outside and found that even the physical environment around her looked instantaneously different. She describes, “I went outside and, you know, I used to think that the sky was very bright, but this day [after the deliverance ministry] it was so bright and blue—it was like nothing I had ever seen. It’s like my actual eyesight was altered. It was so blue! And I walked down the street just singing aloud, I was so lifted. I was released.” Likewise, after Olivia spent time in personal prayer during which she became a “born-again Christian,” she felt an instantaneous release from her several years of addiction to crack-cocaine and has since never used drugs again. Similarly, Soraya (whose story is outlined in detail in chapter three) repeatedly emphasised the “instantaneous” and “immediate”

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<sup>241</sup> “Kingdom theology” was first proposed by Gerhardus Vos (Princeton) in the early 20<sup>th</sup> century. It was later re-popularised by George Eldon Ladd (Fuller seminary) in the mid-late 20<sup>th</sup> century. Individuals who particularly influenced the Charismatic movement include George Ladd (1959; 1974) who emphasised the theological notion that the kingdom of God is “already here, but not yet complete,” as well as John Wimber and Gordon Fee. See also the works of Moltmann, Jackson (1999), Wink (1998), N.T. Wright (1992; 1996) and Groome (1998).

ways in which she experienced healing in particular moments. Charismatics experience real-world effects, which they attribute directly to their involvement with spiritual healing.

These instantaneous healings are, not surprisingly, met with exuberance and joy, and gratitude and praise is given to God for bestowing His “love,” “grace,” and “blessings” on individuals. Both while I have attended private and group healing sessions, and also when I have attended “testimony times” (public gatherings during which individuals share to a group about their former healings) the exclamation “praise God!” can be heard on the lips of many in attendance; this phrase is said so frequently and so on cue with any proclamation of healing that it seems almost on par with an involuntary response, much like a knee-jerk reaction.

## ii. “Trust God.”

But if healing these various “illnesses” are theologically understood in terms of rising above, or conquering the powers of the demonic, and ushering in the Kingdom of God, how, then, do Charismatics explain when these illnesses do not go away completely?—or when they go away but return?—or do not go away at all?

Since the emergence of the divine healing movement in the 19<sup>th</sup> century, proponents of Charismatic healing have been perpetually met with results that were—to say the least—other than that what was expected. As mentioned in chapter one, historians have noted that a number of individuals died in the midst of their pursuits of spiritual healing. Heather Curtis also noted that, in the early years of the divine healing movement, individuals sometimes experienced a “physical healing” but later continued to have bouts of the same illness.<sup>242</sup> The explanations Curtis found for this varied: some healers argued for the long-standing position of divine sovereignty in which it is accepted that “God knows best,” others said that it was the fault of human agency and that humans—not God—are to blame. One prominent healer, R.K. Carter,

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<sup>242</sup> Curtis, *Faith in the Great Physician*, 190.

went so far as to assert that a “long continued affliction *may* indicate an obstinate refusal to follow Jesus entirely.”<sup>243</sup> On the other side of things, another healer of the early divine healing movement, Charles Cullis, advocated for the belief that healing had already been granted as a result of one’s *faith*, and that individuals whose symptoms still lingered ought to continue to hold to their faith in order to eventually see the symptoms disappear.<sup>244</sup> Not surprisingly, there existed a range of beliefs in regard to how individuals responded when their prayers for healing were not met in the way they anticipated or originally desired.

Evidently, the same trend exists today: Charismatics in Ottawa profess that “full healing” comes through “faith in God,” and yet within this claim there seems to be—at least among some Charismatics—an intrinsic acceptance that the “fully healed” individual must play an active role in maintaining his or her healing. I turn again to my interviews to demonstrate this. Speaking of what Marilyn called her “habitual behaviours, or ticks”—which she attests to being healed of through prayer and inner healing ministries—Marilyn explained to me, “when we’ve been healed, we have to let it go. We have to trust him. Trust him, and try not to take it back.” Her explanation allows for the possibility that it *is* possible to experience a reversal of the healing effects, should the individual not act in a certain way. Similarly, referring to her six-year-long cough—which, Maureen explained, she was healed of when her brother along with a few other individuals prayer for her physical healing after a church service—Maureen emphasised that we have to *believe* and not only *have faith* but *show faith*—in order to prevent symptoms from returning; when Maureen experienced a slight relapse of her cough, she attributed it not to an “incomplete” or “partial” healing from when her brother prayed for her, but to her own subsequent lack of faith which allowed “the demonic” to re-establish itself in her life. And

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<sup>243</sup> quoted by Curtis, *Faith in the Great Physician*, 89.

<sup>244</sup> Curtis, *Faith in the Great Physician*, 190.

Rachel, when explaining how her vision was temporarily restored but then almost immediately lost again, explicitly attributed this “loss” of healing to her own negative feelings which arose toward the man who had prayed for her—the healing was “undone” by her attitude.<sup>245</sup> Today, like in the 19<sup>th</sup> and 20<sup>th</sup> century, a variety of reasons are given to explain partial healings, or the return of pre-healing symptoms.

#### **4.4 Faith:**

##### **i. “Being sure of what you hope for [...]”**

Inevitably, there are also moments or times where individuals pray earnestly for healing and see no change whatsoever. Anna, who was diagnosed with fibromyalgia and chronic fatigue following a physical accident she experienced over twenty years ago, has been persistently praying for healing and deliverance from her physical pain. Yet, she continues to experience pain on a near-daily basis. How do Charismatics reconcile the belief in a God who *desires* to heal them, and who *can* heal them, but doesn’t? Addressing this, Anna explained: “But as I sit here, I know I’m going to be healed. Totally. Because [right now] there’s pain all through my body...and...it’s difficult sometimes. But I hold onto Him [God] each day for the strength to do stuff and to get on with life and know there is still hope.” Anna is not simply praying for physical healing which she hopes will happen in the future (though, certainly, she is doing this, too) but she is furthermore “actually *thanking* Him for the healing that is going to happen.” This sense of expectation is important. For Charismatics such as Anna<sup>246</sup>, faith is understood not

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<sup>245</sup> As a matter of fact, when I shared an earlier draft of this thesis with Rachel, she emphatically corrected my earlier (mis)interpretation (in chapter three) that her loss of vision was a result of her doubting the validity of the healing. The loss of her vision, she emphasised, was not due to her doubts but due to the moment that she “became offended with the man in [her] heart.”

<sup>246</sup> I am careful to discuss this in limited terms because approximately half of my research participants agreed with Anna in believing that all healings are possible through faith, while others did not believe this—one man, Doug, informed me “I could pray for your finger if it’s broken...and God *might* fix it...but I’m not going to bet on it.” As is always the case when approaching belief through the lens of lived religion, there will be a vast degree of variance

simply as belief in the *power* of God, but is understood to be the natural result of knowing the *heart* of God—when you know that God desires your healing, faith is standing planted in that belief even when circumstances seem to dictate otherwise.<sup>247</sup>

## ii. “[...] and certain of what you do not see”

During a focus group session I conducted (at which five women, who all knew each other, were present), there was a point at which the dynamic changed from one where I asked questions and received a panel of responses to one where I went almost an hour without saying a single word and instead listened as the women shared stories and bounced ideas back and forth with each other. Without my prompting, the topic of what to do when healing “doesn’t happen” arose. The women began sharing their stories and opinions with each other, and ultimately offering suggestions of how to continue to pursue healing in the midst of non-healing. In an attempt to teach the other women about her own experiences of when healing does not seem to work, Cynthia stated, “it’s the regenerative power of the Holy Spirit, and Jesus’ name, that heals. [But it is] through our belief. So when healing doesn’t happen it’s either that you don’t accept it [...] or that you don’t give God the glory.” At this point, Soraya spoke up and explained that she has come to believe that every prayer for healing initiates a process of healing that will eventually occur. Anna, who had stayed quiet up until this time (the night before, when she was praying, God had told her not to speak during the group meeting unless He prompted her to) began to speak of her own experience with not receiving healing from her fibromyalgia despite a number of years of prayer. Anna agreed with Soraya, saying that over the years she has come to learn that healing is a slow but steady process which requires perseverance and faith. Anna then

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amongst practitioners. The scope of this thesis does not allow me to go into a detailed description of the beliefs, but it is important to acknowledge the diversity here.

<sup>247</sup> This is distinct from, yet similar to, theological ideas which state that faith is believing despite not being able to understand rationally. This stance has been excellently voiced by Soren Kierkegaard in “Truth is Subjectivity.”

shared with the group that she continues to try to “act in faith” and to trust that God will eventually heal her. She explained, “every morning I wake up and I say ‘thank you Lord for the healing you are going to do.’”

Some of the women confessed their difficulty in truly believing that God was going to heal someone—particularly when they continued to pray for an individual and continued to see no results. The women had mixed views of why no signs of healing were visible—perhaps the individual lacked true faith, perhaps she or he did not want to be healed since the sickness had become such a part of his or her identity, or perhaps (though this view was not held widely and, even when it was held, was held with many nuanced explanations attached to it) he or she was living a life of sin which prevented him or her from receiving God’s healing. The women all agreed that individual belief (or lack thereof) is a significant component in healing: true, unwavering, “single-minded” faith was necessary in order for one’s prayers to be effective.<sup>248</sup>

The conversation continued, covering topics such as the emotional involvement one experiences when praying for one’s family members or loved ones, the best way to address the demonic, what extent of faith is required, how to improve one’s faith, etc.<sup>249</sup> The conversational tone was one in which the women were sharing their experiences with each other as a way to teach and/or learn from each other with the hopes of all improving their own “healing walk,” strengthen each other’s belief, and ultimately become more efficacious at praying for healing for one’s own life and the lives of others. The women who identified themselves as “newer” to this (Marilyn and Anna) were particularly persistent in asking the other women questions of clarification and advice.

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<sup>248</sup> The term “single-minded” was used in contrast to the idea of being “double-minded”—that is, believing theoretically in God’s ability to heal but still having doubts of whether or not He would heal in this specific instance.

<sup>249</sup> It was emphasised that all commands to the demonic have to be verbalised because Charismatic theology teaches that the demonic, unlike God, cannot read one’s mind.

One of the questions that all the women identified as being extremely relevant and important to their own practices of spiritual healing was on the topic of how to best pray “in faith” for the healing of another. Does one, as Maureen suggested, plough through in spite of disbelief and verbally express strong belief despite feeling fleeting moments of doubt? Does one, as Anna had been practicing, “persistently knock”<sup>250</sup> and daily come before God with requests and thanksgiving in regard to upcoming healing? Does one, as Cynthia advocated, repeat the biblical promises of God’s desire and ability to heal all things, with conviction that God will keep His promises? At this point, Soraya (who had remained rather quiet) responded: “From the beginning [of when I began praying for healing], I have seen that we have to pray for people based on what the word of God has promised, but faith is more than just [claiming or stating those biblical promises]. Because faith is *seeing what is not there*. For example—” Soraya stopped and looked directly at me, abruptly reminding me (and, perhaps, the other women in the group) that I was present as an observer and, at least theoretically, the conversation was, at least in part, for my benefit. She continued, “—when I prayed for your neck [during the healing massage] I had to imagine that I saw your neck moving properly, moving correctly. I project that vision [of a healed neck], that I want, over you. I want to see your neck being good, not damaged. *That* is faith. It is bringing into being that which is not there.”

The questions posed and answers responded to throughout this discussion help elucidate the way that Charismatic healing practices are formed by, and inform, broader Charismatic theological beliefs surrounding the nature of God and the relationship between God and humanity. It reveals a belief system in which God wants to restore individuals (and, ultimately, the entire universe) to a state where there is no suffering. But, more importantly for the outworkings of Charismatic faith, it necessitates human involvement. Charismatics

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<sup>250</sup> Matthew 7:7.

simultaneously strive to become “more complete in and by God” and envision their own participation to play an active part in achieving this.

## LOOKING BACK AND LOOKING AHEAD: CONCLUDING THOUGHTS AND RECONSIDERATIONS

After situating Charismatic healing within its biblical and historical contexts, and within the academic literature on spiritual healing more broadly, I have approached contemporary Charismatic Protestant expressions of spiritual healing through a phenomenological lens. I have endeavoured to write rich, thick descriptions of the stories shared with me by my research participants so to provide the reader with an understanding of contemporary Charismatic Protestant practices of spiritual healing. I have also chosen to engage in “dialogism” and “polyphony” whenever possible—specifically in chapter three where I quote at-length directly from interviews in the five case studies.<sup>251</sup> This writing technique has been influenced by the methodological tools offered by lived religion and phenomenology, and, ultimately, by a theoretical lens which concedes religion to be “alive.”

### 5.1 Reconsiderations

#### i. The Definition of Spiritual Healing

Earlier in this thesis I proposed the following as a definition of spiritual healing: “a movement toward health or wholeness that is inseparable from one’s spiritual belief system.” I then particularised this within a Charismatic understanding of healing by including the Charismatic emphasis on the holistic self, and the interconnectedness of the immaterial and material aspects of an individual; Charismatic healing targets the body, soul, and spirit through a combination of physical healing, inner healing, and deliverance ministry. And yet, as accurate as this definition may be to the Charismatic understanding of spiritual healing, it is evidently missing a crucial component: as was emphasised to me throughout many of my interviews, Charismatic healing is a slow, continual, ongoing process, punctuated with particular miraculous

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<sup>251</sup> See James Clifford’s “Introduction” in *Writing Culture: The Poetics and Politics of Ethnography* (1986) in which he advocates for self-reflexivity within ethnographic writing.

and instantaneous moments of healing along the way. Furthermore, this process of healing is ultimately a journey of restoration: Charismatics understanding all of their healing efforts to work toward restoring each individual—and, ultimately, the entire cosmos—to the way God always desired it to be. This emphasis on the restorative component of healing is embedded within the long-standing Evangelical cosmological view in which God is understood to have created a perfect world and that humanity and God can join together in effort to restore the world back to this state.<sup>252</sup> I believe it is important to understand that Charismatics view spiritual healing within this framework.

## ii. Reconsidering the Notion of “Western”

The lived religious practices of Charismatic healing have also led me to reconsider the usefulness/accuracy of the catch-phrase summation “Western.”<sup>253</sup> There has been a tendency to stereotype and summarise “the West” into a people group that lives in a “disenchanted cosmos.”<sup>254</sup> Underlying this choice of vocabulary is a theory which surmises that “the West”—in, admittedly, its mass movements of secularisation<sup>255</sup>—lives in a cosmological framework that lacks belief in the Sacred; it has lost its “sense of wonder.”

There are various understandings of “secular” and so it is important to nuance my use of the term here. In his influential book *A Secular Age*, Charles Taylor advocates for us to

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<sup>252</sup> I have written elsewhere about this understanding within Charismatic theology. See Pohran (2014).

<sup>253</sup> Obeyesekere provides a thorough counterargument to this in which he claims that theories developed in the West must, out of necessity (he argues that Western scholars cannot escape their Western paradigms), be applied to spiritual experiences. He claims that a phenomenological presentation of the “emic” or “native” view is “an arbitrary construction, an ideal type” (p. 221) and states that anthropologists cannot make sense of emic claims but must explain them with “Western” theories. He is extremely critical of participation that extends beyond “participation in dialogue” and argues that “only naïve ethnographers identify with their subjects” (p. 228).

<sup>254</sup> Max Weber, “Science as a Vocation” (1917); Richard Tamas, *Cosmos and Psyche*.

<sup>255</sup> In *A Secular Age* Taylor argues against the traditional narrative of the West’s secularization and instead proposes an age of “mobilization” to have occurred from about 1800-1960. During this age of “mobilization,” many traditional religions declined in popularity, but other, newer forms “recruited and mobilized people on an impressive scale” (p. 471) and, in doing so, created exclusive co-religionist settings in which religious beliefs were inevitably propagated and strengthened. Around the 1960s, Taylor argues, this age of mobilization was replaced with a culture of “authenticity” in which individuals work out a unique, particularised understanding of humanity. This emphasis on individual ways of determining authenticity resulted in a vast decline in organised, institutionalised religion.

understand “secular” not as the eradication of religion from the public eye or even a decline of religious belief and practices, but as what he calls “the conditions of experience of and search for the spiritual.”<sup>256</sup> This third way of understanding “secularism” is important to acknowledge in this discussion, and I suspect the wide influence of Taylor’s thoughts will increasingly shift the way in which we understand, and speak of, “secular”—both inside and outside of academic discourses. However, I am not here addressing whether “the West” is “secular” in the way that Taylor suggests it is; that question is beyond the scope of this thesis.<sup>257</sup>

It is the first two understandings of “secular” which Taylor summarises—not the third one, which he proposes we accept—which dominate academic and popular discourses.<sup>258</sup> In recognition that “secular” is most commonly associated with a lack of religious belief and/or practice (that is, a “disenchanted” cosmos), I am here questioning whether the long-standing equation of “Western” with “secular” is reflective of the abundant diversity of religious and/or spiritual belief that is prevalent in the West.

Although the great number of scholars who use the term “Western”<sup>259</sup> hardly do so in ignorance of the number of individuals in “the West” who identify as spiritual and/or religious, the persistence that the term “Western” indicates “secular” effectively excludes spiritual and/or

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<sup>256</sup> Charles Taylor, *A Secular Age* (Cambridge, MA: Belknap Press, 2007).

<sup>257</sup> Taylor’s understanding of “secular” is not based on belief or disbelief, but as a set of conditions that came into place because of specific factors. These conditions (described with great attention to detail by Taylor and summarised only briefly in the above footnote) have made it so that a rejection of traditional religion is a more logical, easier choice. As a result of this, there is room for Charismatic beliefs/practices *within* Taylor’s understanding of the “secular West” because Taylor’s secularism is not based on belief. Yet, the question of whether such beliefs can exist (i.e. spring up) *out of* Taylor’s secularism is, I think, a more difficult question to answer.

<sup>258</sup> Robert Bellah, “A Secular Age: Secularism of a new kind,” in *The Immanent Frame: Secularism, religion, and the public sphere* (2007).

<sup>259</sup> Edith Turner (1994), Jean-Guy Goulet (1994) and Mary Keller (2002), among others, use “Western” as a catch-phrase summation of the reductionist scholarship that favours a worldview that can be explained by scientific positivism and the rational-empirical method. Notably, Tim Ingold (2012) notes that “Western” has been used as “a kind of short-hand” for the rejection of spiritual beliefs/practices associated with Aboriginal spiritual traditions. This acknowledgment that “Western” is a “short-hand,” or a catch-phrase summation, for a particular worldview within “the West” signifies that there is a very real phenomenon which the term “Western” is summarising. Here, I am questioning whether the term is suitable—not whether the phenomenon is taking place.

religious beliefs from being understood as “Western.” Yet, I think the equal persistence of religious practices like Charismatic healing—which itself sprung up on “Western” soil when it emerged in North America in the 19<sup>th</sup> century, and which is widely practiced by individuals whose families have lived in “the West” for generations—should cause pause for how we understand “the Western worldview.” The overall acknowledgment that there *is* in fact a distinct worldview in “the West” which privileges the rational-empirical method, and which dictates people’s discussions and expressions of spirituality cannot, in my mind, be disputed—and certainly that is not what I am trying to do here. What *can* be disputed is whether the actual term “Western” is the most accurate/useful term by which to summarise this worldview.

Through the course of my research, I have noted an increasing tendency for friends and colleagues to respond with surprise (and, sometimes, disbelief or even disgust) that Charismatic healing efforts are localised here—in the capital of Canada. (“No, these stories weren’t collected during my travels in India,” I have responded to bewildered friends. Or, “No, most of my research participants are Anglo-Saxons, and are middle-class or upper-class,” I have clarified at conference presentations). It is, apparently, rather shocking that such practices occur within a “Western” framework.

I wonder if the academic notion of the “Western worldview” with its “disenchanted cosmos” has effectively propagated the idea that belief systems which allow for an “enchanted cosmos” exist only in “non-Western” traditions. Certainly, I recognise that even individuals who use the term “Western” to refer to a distinct phenomenon do so with the acknowledgement that there are religious traditions which exist “in the West.”<sup>260</sup> Yet, for the most part, “Western” continues to connote “disenchanted” and “secular.” Contemporary expressions of Charismatic

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<sup>260</sup> These correspond most directly to two ways of understanding “secular” –as stated above, and outlined by Taylor in the first few pages of *A Secular Age*.

Healing in Ottawa, Canada have given me pause in regard to the accuracy of this notion of “Western.” Is there room in the existing understanding of “Western” for these sorts of “enchanted” stories and experiences—which themselves are rooted in, and take place on, Western soil?

This discussion of the use of “Western”—and, importantly, the way in which “enchanted” belief systems and practices such as Charismatic healing do or do not fit within the existing understanding of “Western”—is far from extensive. Deeper consideration is necessary in order to weigh in on the usefulness/accuracy of the catch-phrase summation of the term “Western.” I think that a study which considers the complicated, diverse, and ever-changing use of the term “Western,” which draws from diverse religious and/or spiritual belief systems, and which considers several angles will be an important step in exploring what might be at stake by excluding “enchanted” belief systems from being understood as “Western.”<sup>261</sup>

### **iii. Reconsidering Religion**

I believe that Charismatic healing practices play a key role in formulating the Charismatic understanding of religion more broadly. In other words, spiritual healing is one of the dominant metaphors through which Charismatics experience their faith—and is, as a result, perhaps one of the most comprehensive symbols through which individuals outside the Charismatic belief system can understand Charismatic theologies and religious practices. As elaborated upon in chapter four, Charismatic healing, though inarguably occurring at the individual level, is not limited to mere individuals. Rather, Charismatics conceptualise the ripple-like effect of individual healing experiences to have an impact at the cosmological-scale. Individual healing—both physical and spiritual—contributes to the grander Charismatic

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<sup>261</sup> I speculate that this might be particularly important to the [geographically] Western traditions whose spiritual beliefs and practices are so closely tied with their land.

worldview, in which individuals work together, with God, toward the restoration of the entire cosmos.

This prompts us to consider that “religion” might be best understood by Charismatics not solely as a set of propositions or beliefs but as a series of small, ongoing healings which all contribute toward a greater story of healing and restoration. Building on this, I wonder if there might be a direct reciprocal relationship between healing which occurs at the individual level, and the broader Charismatic beliefs that suggest that healing is the dominant metaphor through which Charismatics experience their faith. In the Charismatic worldview, individual healing results from God’s love for individuals, but it also is understood to contribute to cosmological restoration. Acknowledging this over-arching belief, I wonder if the broader Charismatic belief system surrounding cosmic-wide redemption might in turn contribute to the extent/depth to which Charismatics experience individual healings. In other words, the *belief* contributes to the *experience*: the relationship is reciprocal; the influence is a two-way street.

Although Charismatics do not explicitly describe this, I believe there is a distinct relationship between my proposition above and the Charismatic notion of faith leading to healing results (see my discussion at the end of chapter four). Additionally, there are significant correlations between this proposition and the idea of “cultural kindling,” a phrase recently coined by Cassaniti and Luhrmann to discuss an idea that has been explored in anthropology for a long time: that local religions and cultures shape the way that people experience things, but also correlate with the amount or the extent to which individuals experience certain phenomena.<sup>262</sup> Cassaniti and Luhrmann formulated this hypothesis based on Luhrmann’s 2012 study of Vineyard churches in which she noted that the amount of time with which individuals’ sought-out certain experiences (for Luhrmann’s study, dialogical prayer) and the extent/depth to which

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<sup>262</sup> Cassaniti and Luhrmann, “The Cultural Kindling of Spiritual Experience.”

they experienced them. Cassaniti and Luhrmann later conducted research amongst USA Vineyard Christian communities and Thai Buddhists, from which they concluded that individuals are vastly more likely to describe an experience of something which already exists as an integral part of their broader religio-cultural cosmology. For example, they noted that Thai Buddhists were far more likely than Vineyard Christians to report phenomena such as sleep paralysis, and far less likely to report experiences (such as feeling that the power of a personal God was surging through them) which were more commonly described within a Christian cosmological worldview. The cosmological belief system at the religio-cultural level influences the frequency of individual experience. Applying this hypothesis to Charismatic healing, I suggest that one reason that Charismatics often experience seemingly mind-boggling healings at the individual level is that healing is an integral component of Charismatic cosmology.

By proposing that the existing belief of healing may have a role in facilitating the extent/depth of individual experiences, I am not suggesting that these claims of experience are naïve/deluded and are not in fact ontologically true. To be sure, the question of an ontological, factual assessment of what is “really happening” in Charismatic healing is outside the desired scope of this thesis. Throughout this work, I have neither sought to “prove” nor “disprove” the factual reality of Charismatic healing. Rather, I have endeavoured to grasp at a phenomenologically-oriented understanding of the practice of Charismatic healing, and to then situate this understanding within more general academic discussions of religion and healing. Ultimately, I hope that this work contributes to not only furthering an understanding of the practices of spiritual healing as experienced and described by Charismatic Protestant individuals in Ottawa, Canada, but also to the emergent efforts within academia to carefully consider the

ways in which individuals' over-arching belief systems contribute to their experiences.

**APPENDIX A: THE LORDSHIP PRAYER**

"LORD Jesus Christ, I acknowledge my need of You and accept You as my Saviour, my Redeemer, my LORD and my Deliverer.

I invite You now to be LORD of the whole of my life:

1. LORD of my mind and all my attitudes and my mental health.
2. LORD of my body and my physical health.
3. LORD of my spirit and all my worship.
4. LORD of my family and all my relationships.
5. LORD of my sexuality and its expression.
6. LORD of all my work and service for You.
7. LORD of all my material goods and needs.
8. LORD of all my finances.
9. LORD of all my emotions and all of my reactions.
10. LORD of my will and all of my decisions.
11. LORD of the manner and time of my death.

Thank You that Your blood was shed that I might be set free.  
Amen.

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