



Four Pentecostal Views on Healing

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Introduction

This paper explores the gap between Pentecostal healing expectations gleaned from Scripture and the significant experience of non-healing in the practice of Western Pentecostalism. It analyses four scholarly Pentecostal perspectives: Chant and Thomas on the optimistic healing expectancy side and Clifton and Yong on the acceptance of non-healing experience side. This analysis is founded on the outline of L.W.J Oliverio's "hermeneutic of realism" which seeks to align theology with lived experience, is Christologically focused and engages with Scripture. This hermeneutic is developed in the light of particular Pentecostal and historical perspectives. The paper concludes that further research is needed to find a way to pursue seeking for healing from a biblical expectation without ostracising those who are not healed. It considers both the value of viewing all people as created in God's image needing honour and inclusivity, and the redemptive need of humanity to recognise they are under God's wrath and in need of repentance for salvation in Christ.

Pentecostalism and Healing

Keener notes that

hundreds of millions of people worldwide claim to have experienced or witnessed what they believe are miracles. Eyewitness claims to dramatic recoveries appear in a wide variety of cultures, among Christians often successfully emulating models of healings found in the Gospels and Acts. Granted, such healings do not occur on every occasion and are fairly unpredictable in their occurrence; yet they seem to appear with special frequency in cultures and circles that welcome them (2011, loc. 5830).

The worldwide Pentecostal (and Charismatic) movements are experiencing dramatic growth throughout the world, constituting an estimated one-twelfth of the world's population (Keener 2011, loc. 5357) and it is the phenomena of healing that is considered the driving force behind this growth (Keener 2011, loc. 5337). This growth is seen less in the west and more in the majority world where there is a lack of medical alternative. Healing manifests as deliverance from disease, physical ailments and demonic influence but is also radically transforming communities away from social maladies like unemployment, alcoholism, domestic strife, hatred and racism. Healing is seen as a gift of love from God to then be paid forward in acts of love and consequently, the research shows, communities of religious faith have better general health overall (Brown 2011, pp. 376, 498, 511–516; Keener 2011, loc. 5262, 5338, 11235–11305).

The picture is one of diversity of healing practices across a range of cultures that defy the negative caricatures of Western media and critical scholarship. However, there are negatives. Promises of healing do not reduce the frequency of healing need and at their worst, over promising can elicit guilt and blame for those who are not healed as well as leading to a denial of social/political causes of oppression and suffering that result in poor health (Brown 2011, pp. 416, 525, 638).

The nature of current healing *testimony* is consistent with how it is delivered in the gospels and Acts and how it has been delivered and believed throughout church history and presently among the majority of Christians, i.e., through credible eyewitness testimony rather than scientific documentation. While not discounting the improvements to general health that come with religious faith, the reality of fraudulent claims, nor normal recovery often claimed as healing, Keener (2011, loc. 2155, 13369, 13398, 13457) points to the copious amount of testimony, past and current, where instant, dramatic, extra normal incidents (e.g. resurrection from death and healing from blindness) have been cited in reference to the prayer of faith.

If all of the above establishes that healing in Pentecostalism is a reality, then the pertinent concern for this paper is why it happens so irregularly. The testimony about Jesus is that he healed “all who came to him” (e.g. Mtt. 12:15; 15:30) and usually instantaneously, several times citing that a lack of faith was the only hindrance to such healing (Mtt. 17:20, 21:21; Mk. 11:24; Lk. 17:6). The book of Acts testifies (Shelton 2006), and from Mark 16:20 Pentecostals often believe (Thomas & Alexander 2003, p. 155), that Jesus is still present and working healing through the hands of his followers. However, instantaneous healing of all who come is not the current situation of experience and it would be difficult to put this down simply to a lack of faith in the believers asking. As Keener (2011, loc. 5796) notes, it is difficult to find a solid New Testament rationale for the difference between the expectation and the current situation. The 1982 US Assemblies of God statement of “what we believe” noted something of this dilemma while clearly leaning the expectation heavily in the direction of success: “We do not understand everything about healing, but the Scriptures are clear. When one is sick he may pray in expectation of healing (Jms. 5:13-16)” (Poloma, Robeck & Bundy 1985, p. 66).

This arrives then at the purpose of this paper. How Pentecostals develop their healing theologies from the narratives and passages of Scripture that build an expectation of healing in the light of sound theological and hermeneutical principles will be considered. Most specifically this paper will explore two contrasting Pentecostal gap theologies that seek to reconcile the biblical expectation with actual practice.

Pentecostal theologies are diverse and prolific so a relevant sample¹ will be selected focusing on two key perspectives, those who emphasise the need for faith in a biblical expectation and those who consider the impact of such an expectation on those who are not healed. Two views will be presented from each perspective – so four views in total. An outline of sound hermeneutics will precede the critical examination of the biblical engagement.

Hermeneutic of Realism

It is not the goal of this section to lay out a comprehensive hermeneutical primer; rather the more complex hermeneutical challenges that apply to the question of healing in a Pentecostal context will be explored. An orientation of hermeneutical realism with a Christological focus will be set out as foundational to engaging with the healing Scriptures; particular Pentecostal and historical perspectives will be taken into account.

In response to the discussion over the hermeneutical priority of *author's intent* in Scriptural meaning Oliverio (2012), proposes a hermeneutic of realism. This hermeneutic pursues a deep honesty that recognises that the readers' own context and the language work together with the (sometimes elusive) authorial intent to *find* or even, as Archer (2004), in dialogue with the Holy Spirit and the church, *create* meaning in the text. Hermeneutical realism values dialogue across multiple perspectives, and acknowledges that complexity and ambiguity are built into the text and need to be embraced (c.f. Fee 1991, p. 33; Polling 2011, p. 7). It also recognises that the nature of Scripture is not encyclopaedic or exhaustive but situational and occasional (Fee & Stuart 2014, p. 60; Maier 1994, p. 184). Therefore in wrestling with miracle gap theologies it honestly seeks to own the limitations of the situation, rather than trying to force some kind of artificial agreement between the text of Scripture and variable human experience (Malony 1998, p. 69). The expected theology that results from such a hermeneutic, being harmonious with lived experience and the nature of the revelation (thus reflecting the divine-human dialogue), will be complex and untidy, non-dogmatic and yet consistent with God's intention.² Such a harmony, to be truly biblical, must be focused in Jesus Christ.

Christological Focus

Scripture is not neutral information about God, it is transformative (Maier 1994, p. 25). "The Scripture does not merely *tell* about salvation. By the Spirit's grace, the Scripture *works* salvation, renewing our vision of the world by transforming us at the depths of our being" (Green 2015, p. 113). This transformation is a movement into right relationship with God and our human neighbour, mediated by Christ and effected by the Holy Spirit as part of the bringing of the kingdom of God into earth. It is essential that this Christ-centred perspective be the vital focus of hermeneutics if it is to be faithful to the revelation.

¹ This limited focus on contrasting two views does not engage with other significant and relevant perspectives, for example those of John Wimber and the Vineyard movement or Bill Johnson and the Bethel movement or the diversity of majority world perspectives and the Western theologians and sociologists and anthropologists that have interacted with them e.g. Charles Kraft, nor more fringe, movements like Kenneth Hagin and Word of Faith or C. Peter Wagner and Spiritual Warfare. Such necessary engagement will be the task of future research.

² See Wright (1991) for an excellent discussion on God exercising his purposeful authority instrumentally through a Holy Spirit guided dialogue between Scripture and the church's' proclamation to humanity.

Root (2006, pp. 58–75), advocates a fitting theology that, following Christ’s lead, is incarnational (seeks to be with people) and identificational (seeks to join in and share their suffering). The result is social, ethical action. This sets up an agenda for “healing” that is much wider than embodied prosperity and comfort, centred on reconciliation with God and humanity. In terms of bringing reconciliation to people, the church is to be an ongoing witness of Jesus in a manner relevant to modern contexts which inform and reform our practice (Polling 2011, p. 2). From this perspective the “unhealed” can be seen as a people group with their own contexts, and the Christological goal is to be (represent) “Christ with them” sharing their suffering inside those contexts.

The “unhealed”³ do indeed have their own sub-cultures. People who experience disability, long-term sickness, addiction, minority sexual attraction and the like, form communities with language and practices that allow them support and to achieve functionality within their own situations. Pentecostalism has been guilty of ignoring these sub-cultures and marginalising their members when they do venture into Pentecostal communities. Counter to this, Osbourne (2006, p. 430) recommends a process for delivering the gospel cross-culturally. Firstly, understand the culture and learn its language, then communicate the gospel in terms that culture can grasp and finally, let those so taught reflect on their own culture in the light of the gospel. To do this well, a move away from western ideals of prosperity and an elevation of success culture is needed. Being informed by a more global perspective, a focus on the world’s marginalised and oppressed can be adopted (Green 2012, pp. 50–62). This *being with*, and *sharing in*, peoples’ suffering is the true spirit of Christ that should inform engagement with the healing Scriptures.

Engagement with Healing Scriptures

As Pentecostals wrestle with issues of healing in the west (where non-healing is the *common* experience in reference to the majority of our prayerful requests),⁴ there is a need to look at human situations in the light of Scripture, but also a need to look at the Scripture in the light of human situations (Veling 2005, p. 23). Restorationist mentalities that seek to establish (very inconsistently) the 1st Century NT practice as normative are not valid in terms of either the biblical authors’ intentions or as acceptable hermeneutical practice (Fee & Stuart 2014, pp. 119–150). The bible is not given as a “how to” book on bringing embodied comfort and prosperity. Rather, there is a need to bring lived experience into a dialogue with the Scriptures in order to give meaning to that experience in the light of Jesus Christ (Heimbrock 2010). However, such a grace-based hermeneutic (with its emphasis on the Almighty God condescending to come alongside human need) as has been here suggested, while most relevant to our context (i.e. the experience of non-healing), still does not escape the fundamental challenge proposed by Jesus’ own words.

Jesus said, “whatever things you ask in prayer, believing, you will receive” (Mtt. 21:22 NKJV). Christians do a lot of asking where no immediate receiving is obvious. What is to be made of this? Are statements like this to be put down to hyperbole along with comments like plucking out eyes and chopping off hands where Jesus’ statement cannot be taken literally (Fee & Stuart 2014, p. 136). Certainly it is difficult to see what

³ This label is suitable shorthand for this paper to represent those who have sought for healing (or are expected to seek for it) and have not yet received it as expected. It includes situations with varying levels of human accountability, causality and responsibility.

⁴ See Keener (2011, loc. 11015) for a detailed analysis of non-healing phenomena.

the real meaning would be if this statement was interpreted as hyperbole. Also, Jesus' own performance of miraculous signs and rebuke of his disciples' unbelief when they failed to heal or walk on water, would suggest he was speaking literally. Does it then come down to audience? Was Jesus only talking to his disciples? His "he who believes in me" (Jn. 14:12) does not seem to be so restricted. If it is taken that Jesus was speaking universally from these utterances till the present time, then is it simply a matter of lack of faith? The critical analysis will look at how some Pentecostals grapple with this dilemma, but first some particular Pentecostal and historical perspectives will be taken into account.

Particular Qualities of a Pentecostal Hermeneutic

Some of the particular strengths of Pentecostal Hermeneutics have also been its particular hermeneutical weaknesses. The strength of being focused on the experiential aspect of encounter with God that is affective and creative and encompassing the divine encounter with all of life (Land 1993, pp. 33–43), has carried the weakness of an action focus that has neglected sound reflection on praxis (Karkkainen 2002, p. 16). The strength of being focused on holiness and overcoming sinfulness, has carried the weakness of promoting legalistic righteousness which denies (or covers up) real experience of struggle and marginalises outsiders (Land 1993, p. 53).

Vondey (2010, pp. 11–12) explains that with Pentecostalism being a transitional movement in its very nature, its theology has been able to flexibly move across cultures and challenge social, ethical, religious and cultural thoughts and praxis in transformative ways. Is it however, able to transcend its weaknesses, become humbly reflective and turn this transitional strength inwards to an examination of its own healing culture and praxis? Martin (2013, pp. 138–144) suggests that contemporary Pentecostal hermeneutics is becoming more holistic, able to keep hold of its strengths, blending its experiential emphasis and ethical (holiness) skill with educated and scholarly reason. Hopefully this paper and the research it underpins is participating in such a transitional movement.

Historical perspectives

Hermeneutics and theology do not emerge from a vacuum but are culturally, contextually and historically informed. This paper is speaking from a minority world (Western) context, exploring limitations in Australian Pentecostalism's healing practices, which are founded in the movement's history. Cartledge (2016) identifies a Renewal (Pentecostal/Charismatic) research methodology which he labels a "Retrieval Standpoint." This practical theological methodology explores renewal praxis by going back to the early oral traditions and tracts of the Pentecostal movement, comparing them to the texts of Scripture and then seeking hermeneutical application for today. This typically Pentecostal methodology significantly parallels the Pentecostal hermeneutic of appealing to NT church history as a precedent for current practice. A brief sampling⁵ of two authors (both scholars of Christian history) who employ a retrieval standpoint is helpful for observing *some* of the historical influences. Nancy Hardesty is an evangelical scholar with roots in the Holiness movement of North America. She writes about North American Pentecostal roots in the Holiness movements at the turn of the 19th Century. Kimberly Alexander also has roots in the

⁵ The sample is limited to early North American influences, though other global influences e.g. from South Africa and New Zealand have also been significant (P. Hughes, private conversation, 29 August, 2016).

North American Holiness movement and in the Pentecostalism that sprung from it. She looks at the two key streams of early North American Pentecostalism that came from the Wesleyan and Finished work/Oneness traditions. Through literary and denominational associations these traditions have also been foundational in Australian Pentecostalism.

The key points of early Pentecostal healing theology/hermeneutics are likely to have a familiar resonance with anyone familiar with current theologies and will be reflected (though not directly engaged) in some of the critique below. It will suffice here to list some of these key points first from Hardesty (2003, pp. 88–97):

- Sickness and suffering are sourced in the Edenic fall of man.
- Pre-critical or non-critical. All Scripture is seen as directly applicable in the present.
- Physical healing, along with salvation, is secured in the atonement. Thus “if it be your will” prayers are viewed as unbelief.
- Jesus’ and the Apostles’ healing narratives were “analysed for lessons” on techniques, attitudes and faith.
- “Jesus healed *all* who came to him” is taken as a current indication of God’s will to heal all now.
- Jesus’ “I am with you always” (Mtt. 28:20) and designation as “the same yesterday today and forever” (Heb. 13:8) are taken together to say he is still active in healing now.
- Lack of body and soul health is indicative of a lack of faith.

Alexander’s (2006, pp. 203–215) observations parallel the above and significantly add:

- Healing is seen as a sign of the coming (and now present) Kingdom of God or as pointing back to the finished work of Christ on the cross.
- The use of secular medical interventions is shunned, being seen as indicative of a lack of faith.
- Symptoms are seen as temptations to unbelief to be denied.
- God is seen as always willing to heal but either sovereign in the dispensation of healing and consecutively or alternatively, only hindered by unbelief.

It needs further to be observed that the historical context flows forwards and backwards from these early influences. These historical attitudes themselves have historical origins, and they continued to evolve and develop as time went forward. Martin (2013, p. 3) for example outlines the roots of Pentecostal Hermeneutics in the 19th century holiness, healing, restorationist, revivalist and millenarian movements. And Karkkainen (2002) traces the movement of Pentecostal hermeneutics forward from its early roots to its present situatedness in dialogue with postmodernism. It is beyond the scope of this paper to trace the influences and developments of these historical particularities. They are listed here simply to establish and acknowledge that current thinking and practice has a historical background informing it. Specifically, these influences will be seen positively reflected in the authors with optimistic healing expectations below and resisted in those with acceptance expectations.

Critical Analysis of FOUR Pentecostal healing theologies

Holding in mind the hermeneutical concerns outlined above, a small sampling of texts from four Pentecostal theorists will be analysed in this section. Chant and Thomas are selected as representing a healing normative perspective and Clifton and Yong as

representing inclusive readings for the non-healed. Chant is selected because of his broad practical experience of teaching about, and ministering healing in, Australian Pentecostal churches, and Thomas because of his engagement with the key subject of healing in the atonement. Clifton and Yong are chosen as theologians with immediate, personal experience of disability which directly informs their theology. A broad summary of their key engagement with Scripture will be given with a particular focus in the analysis of their expectation-practice gap theologies. This will be followed by a summary of the theological challenges for future research raised by the analysis.

Chant

In the two works examined Chant's (2012, 2014) exposition of Scripture dominated his discussion. This exposition can be summarised as follows: Sickness and suffering is in the world because of Satan, the human "fall" into sin, and factors of time and chance. Jesus came into the world and undid the work of Satan and human sin. Because of this he healed all who came to him and commissioned his disciples and the church following to do as he had done. While healing is almost universal in the NT, not everyone who asked Jesus for it was healed. Nevertheless, a solid promise of God was given through Jesus that any who ask in faith for healing in his name should expect to receive it. Because of this promise, God's intent to deliver from satanic oppression and the protocol for obtaining healing in James 5:13-18, God's will to heal and deliver is clearly established. Faith for healing is characterised by: a determination to believe and claim God's promise (even when there are no signs of symptoms abating), a willingness to obey the commands of James 5 and to seek God for spiritual gifts, and exercising the God given authority to command change to occur in undesirable circumstances. Gifts of healings (1Cor. 12:9) are given more as signs of God's mercy and love, and especially in places where the Christian faith is not common. Prayer for healing (as in, James 5) is more an activity for *believers* that involves faith to seek for healing, obedience, confession of sin and correct discerning of the Lord's body. Chant recognises that faith does not always produce healing and puts this down to "inscrutable mystery" with hints at God's hidden, sovereign purposes. The instruction for the unhealed is to do nothing more than keep on seeking God in faith.

Chant's position is clearly in alignment with many of the historical views observed above. His outline of the NT expectation is, for the most part, compelling and exegetically credible. Nevertheless, his position falls short in considering: (i) the reasons suffering is in the world and (ii) the implications for the non-healed. These will be addressed in turn.

First, his ascribing suffering to chance, Satan and the fall, obscures the biblical emphasis on the participation of God's hand in the present condition of the world. It was God's judgement of curse in Genesis 3:15 that specifically set Satan in enmity with humanity. When Peter talks to Cornelius of Jesus' "healing all who were oppressed of the devil" (Ac. 10:38), the context is one of Jesus as the bringer of the Gospel of peace (with God) (v.36) and as God's appointed judge of the world (v.42), who brings forgiveness of sins through believing (v.43). Satan was set against humanity in the curse and it is God's merciful kindness that sets humanity free from his power and brings us to Christ for salvation which is deliverance from God's wrath (see Eph. 2:1-10). To suggest that it is God's will *always* to heal is to set God against his own curse. If such was God's will there is no reason why he would allow sickness in the first place, and advocating its continuance against his will can lead to the implication that Satan can somehow usurp God's plans. Further, Chant's position ignores those passages where

God takes direct responsibility for the infliction of sickness and suffering for judgement's sake (e.g. 1Sam. 5:6; 1Cor. 11:27-30; Rev. 2:22). Jesus purpose was not to abolish all suffering prior to the eschaton. His primary role is that of saviour, and healing and non-healing are *both* signs that authenticate this role.

Secondly, In talking about the times when faith seems not to work, Chant (2014, p. 81) states, "there is *nothing else to do* but cling to the promise of God" (italics mine). This leaves the unhealed with total silence about their situation and, in the light of seeing unbelief and sin being blockages to healing, uncertainty about their status with God. There is in fact much that can be done for the unhealed and much that can be drawn from the Scriptures to minister to the unhealed some of which shall be brought out in the examination of Clifton and Yong below.

Thomas

Thomas' (2005) article looks to strengthen support for the doctrine of healing in the atonement by looking beyond the traditional texts of Matthew 8:16-17 and 1Peter 2:24 and expounding the strong association between healing and salvation in John's gospel. He is able, using textual examination (including narrative placement) to establish that John uses four healing signs, which he bookmarks between two references to the cross, to establish a definitive link between healing signs and belief in Jesus for eternal life. He accurately points out that John states this intentionality quite explicitly in 20:30-31.

He supports this premise with, first a textual examination of John 10:10 where a contrast between Satan's destructive power and the superabundant life offered by Christ is made - seeing in this contrast an inclusion of divine healing; and second, a retrieval standpoint exploration of the serpent lifted in the wilderness (Jn. 3:14-15) in early Pentecostal literature. His exposition states that the Mosaic bronze serpent of Numbers 21:4-9, becomes a type of Christ being lifted up to counter the curse, whereby Satan's work against humanity is countered by Christ's atonement, manifested in both salvation and healing.

The implication he draws from the above is a close connection between healing and Jesus' atoning life which he believes accurately reflects the biblical witness and aligns with the experience of the Pentecostal community. He clearly and overtly builds the expectation that physical healing is part of the abundant life Jesus brings. While his textual engagement is compelling and seemingly sound some significant hermeneutical concerns can be noted.

Firstly, he fails to make a case that John intends the connection between healing signs in Jesus' ministry and the atonement to be normative for ongoing practice within the church, which is what he is trying to show. Secondly, he makes no direct application of his theology to actual ministry and consequently offers no discussion of the alignment of his belief with actual practice. It is at this point of difference between theology and practice that Theron's (1999, pp. 52-61) concerns regarding "healing in the atonement" theology are worth noting. Theon observes that in Pentecostal practice there are significant instances of healing *and* non-healing suggesting that, if there is a bipolar tension between Pentecostal theory and practice, the biblical positions advanced by Pentecostals need to be reconsidered against what is really going on so as to test if the theology is working. He cites research to suggest that church goers with sickness often feel safer in seeking help from secular interventions than the church, where guilt and rejection can be experience by the unhealed. He raises the concern that the practice of healing ministry may not be communicating to believers and unbelievers what the

church is intending to communicate and calls for more empirical research to explore the impact of the current practice. Exploring these concerns is the very research I intend to pursue.

Clifton

In his article "*The Dark Side of Prayer for Healing*," Clifton's (2014) engagement with Scripture is almost completely indirect, focusing more on theological concepts that show an underlying, yet familiar, connection to the biblical text. Whilst not abandoning prayer for healing as a compassionate cry to God for help in the face of suffering, he does call for a complete reorientation of Pentecostal practice and theology with regard to healing. He demonstrates through appeal to the testimony of sufferers that the current theology and practice is actually exacerbating the problem of pain and marginalising the disabled as well as either indicting God's goodness or the sufferer's faith. He believes that in practice, healing is in fact rare, rather than normative, and sounds a call for honesty in Pentecostal testimony; including validating confession of weakness, distress and suffering as representative of genuine and valuable experience.

His proposed reconstruction is to see in Jesus' healing a paradigm for compassion, love and inclusion for the marginalised, with a widening of the concept of healing to well-being and flourishing in life and community, through the exercise of virtuous character, in the face of life's challenges and limitations. Those experiencing disability are seen as being well positioned to model such virtue, and the church as well positioned to provide nurturing, supporting and inclusive community. He proposes replacing the present discomfort with fragility, with a move away from normalising ableness and an embracing of diversity and limitation. *Acceptance* of limitations becomes essential to healing with the Holy Spirit's prime activity seen as transforming mind and character to live purposely and virtuously.

Clifton's view is focused on reforming expectations. He does not seek to dismantle the kinds of theologies we have observed in Chant and Thomas with challenges to exegesis or by suggesting non-prescriptive agendas in the biblical authors (as does Warrington 2006). Rather, his hermeneutical starting point is on *practice* and its engagement with the experience of non-healing. He then returns to the Scriptures (indirectly) to look for concepts and themes that can construct a theology that is empowering for those experiencing suffering. The compassionate, virtuous community which he envisages is certainly well founded on the biblical principles to which he appeals and he succeeds in recognising that a broadening of the Pentecostal perspective to embrace suffering would facilitate coping. This is commendable.

What is absent from Clifton's revisioning is any engagement with suffering as associated with God's wrath and judgement. Hope for dramatic miracles is likened by Clifton (and the testimony he cites) to a desire for "magic" or party tricks and a request for God to work against his own natural laws. No explanation is forwarded for the given "fragility of life and the permanence of suffering and disability" (p. 207). The desire for virtuous community, while both biblical and commendable, is not connected with biblical themes such as repentance from sin and Christ's work as reconciler for a humanity under God's humbling curse and oppressed by the devil.

Yong

Yong's (2011) primary concern in *The Bible, Disability, and the Church*, is that all people regardless of their embodied situations, be treated with honour and equality as

made in the image of God and that the church be at the vanguard of inclusivity and acceptance and honouring. His concern is that traditional Pentecostal readings of the biblical text have valued a normative ableness that marginalises and devalues the differently abled. Yong proposes alternative readings of common texts and the consideration of neglected texts on disability such that a more complex reading of Scripture might give a disabled-friendly perspective.

Yong draws from the narratives of Jacob, Mephibosheth, Job, Zacchaeus and the Ethiopian Eunuch to show how even in the experience of embodied impairment God's redemptive purposes are manifested. He successfully demonstrates that biblical restoration is as much about freedom from social oppression and ostracism, and the inclusion of the socially marginalised, as it is about deliverance from embodied impairment. The narrative of Jesus, from his perspective, shows that God's perfection was in his sinlessness not his able-bodiedness. Jesus became completely human such that he experienced both social ostracism and persecution as well as physical suffering. He even carried the "imprints" of his disability, markers of his identity and life experience, in his hands, feet and side, into his resurrected state. God's glory and wisdom are seen not in the *elimination* of weakness but in the *redemption* of it.

Yong further wrestles with God's role in suffering, noting (particularly from Job) that what is often ascribed to Satan actually has its ultimate cause in God. He observes the biblical relationship between sickness, disease and disability with God's holiness and his curse on human sinfulness in texts such as Deuteronomy 28. He suggests that normative readings fail to account for disability as an accidental feature of human experience thus negatively leaving the disabled in a position of having to bear the burden of reminding humanity of their need for redemption.

This is a challenging issue. In the biblical material, individuals can suffer as a result of national/ethnic/racial (whole human race) sinfulness. Salvation, viewed as curse reversal, comes to the community such that some are spared and others are not, but the overall community is said to have been shown mercy and spared (c.f. Ps. 106). Even in Job, the afflictions (and subsequent restoration) delivered in reference to a testing of one man had collateral damage on his family, property, wife, friends and neighbours. How this tension between the collective community and the individual is worked out is part of the present challenge. The Old Testament curse passages are targeted at the whole community and do not single out the afflicted individuals (compare also Jn. 9:1-3) but consequently the presence of such individuals *is* an indictment against the whole community (c.f. Lk.13:1-5). I believe Yong's call for a potential "normative" or "accidental" view of disability could be maintained on an individual level while disability is still viewed as a "curse" or act of wrath on the overall community and humanity generally.

As difficult as this burden is to bear, it may yet be legitimate. However, as Yong correctly observes, God's response is not one of despising people in their weakness but honouring them and loving them and adopting them regardless of their weaknesses, motivated by His grace and compassion and care and love. The knowledge of human sinfulness is uncomfortably confronting, but it is helpful to face it squarely. Yong's concerns about equity can be enriched, if it is admitted that the weak carry a burden of witness, by emphasising that those who are strong ought to help to care for and honour them. Again extending from Yong, that God as Christ *takes on* our suffering, our "disability," is *key* to making sense of his exposing humanity to it in the first place. God does not make humanity face something without facing it his own self (even if not to the

same apparent degree or intensity - though one could argue that his grief over those he loves is *incomparably* painful, c.f. Mtt. 23:37).

Theological Challenges from the Analysis

Each of the theological positions explored above has its own particular focus and implications which, when thrown together, give the kind of diverse perspectives that can build toward the messy but accurate-to-life hermeneutic of realism suggested above. Thomas is concerned to show that the abundant life that Christ brings can include physical healing and Chant urges that such healing is founded in the promises of God that may be availed by faith. These are truly glorious emphases. For those who have experienced divine healing and for those who have come to salvation through the incredible growth of Pentecostalism through healing, the blessings are indeed superabundant.

Conversely, for those who do not experience healing, these emphases can have the reverse effect, potentially adding guilt and condemnation and doubts about faith and the faithfulness of God. The church, which should be leading in the area of bring the marginalised into the community of God can, without a balancing emphasis, be actively ostracising them. Clifton and Yong successfully speak to this area of concern, noting the value of all persons as centred in their being creatures in God's image and their subsequent capability to be, and *be seen* as, fruitful, contributing members of the faith community. They point out the ongoing value in a disabled life that is not "healed" according to normative expectations, and show how God's strength and glory is manifested in human weakness (2Cor. 12:9; 13:4) and human character growth. They correctly emphasise Jesus' connection to the marginalised and the weak, having experienced such phenomena himself as the author of human salvation.

Neither side of these two poles in the brief literature surveyed is dialoguing successfully with the emphases of the other. How both sides can be brought into balance where healing is pursued by faith without promoting an ostracising normativity is an area to be pursued in further research. It will be the challenge for Pentecostalism to humbly face and review its own praxis in a manner aligned with its traditions, faithful to scholarship and preserving of the dynamic experiential aspects of the God encounter. Importantly the testimonies of the unhealed need to be included in this dialogue (Clifton 2014, pp. 205–209).

A Christological focus is evident in all four perspectives, Jesus is with people to save and to heal, but also to suffer alongside of, and to share in the fullness of, the human experience. He is more than a restorer of embodied health, he is interested in restoring community and society, in building a *people* of God that live out the same kind of solidarity as Jesus modelled. However, what appears lacking in all of the above perspectives is a deeper biblical engagement with the role of God's wrath in suffering in relation to Christ. What Chant dismisses as mystery, and along with Clifton and Yong put down to chance and accident, calls for a more substantial engagement beyond the scope of this present paper. Thomas and Chant come close in their engagement with Christ as reverser of the curse, but a step beyond the instrumentality of Satan in suffering can be taken to consider the redemptive plans and purposes of God in both healing and non-healing. This needs to be done while avoiding a theodicy that further marginalises those who experience enduring situations of suffering. The solidarity of Christ with humanity and also with God is essentially central to such a model. There is no righteous requirement placed by God on humanity that Christ does not meet, and there is no curse

placed by God on humanity that Christ does not himself bear. A proper outline of these themes will require further development and research.

Along with Christ's cross, sickness and suffering remind us that humanity is in desperate need - both of salvation (specifically deliverance from God's wrath in the curse) and of a restoration of peace among themselves. Caring for the sick through prayer or in practical ways is a reminder that Christians are called as God's people, as Christ was, to care for human need. However, it must be borne in mind that the need has an inseparably eschatological as well as an immediately practical focus. The need transcends humanity's present condition, as important as this is; people who are suffering are not excluded by virtue of their suffering from a need to come into a right relationship with God. Christians are seeking to work in the tension of a coming kingdom that not only promises deliverance from the curse but also calls all people, whether perceptually healthy or suffering, to repentance.

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