Is Religion Therapeutically Significant?

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How are religion and medicine related? Each seeks to cope with many of the mysteries, tragedies, and critical beginning and end points of life; each is concerned with human well-being. Yet what respective roles do they play in the mysteries and tragedies of human existence and in the maintenance and securing of well-being? My concern here is to explore in a fresh way some of the interfaces between medicine and religion and in the process to suggest that the roles of religion are more extensive than is commonly assumed. I have in mind two exploratory theses.

Religion and the meaning of illness and curing

The first thesis is that rather than being solely a kind of moral and emotional helpmate to scientific medicine, religion—inevitably allied with philosophy—supplies an over-arching conceptual understanding of the world in which medicine is practiced. Religion, that is, often supplies a set of “ultimate explanations” for the existence and meaning of illness and curing. It addresses itself to whether sickness is natural or unnaturally intrusive, an unmitigated evil or partial good, a result of impartial or personal causes, an enemy that is to be actively eradicated or an entity that should be passively accepted. It often informs powerfully the values and social images of medical practitioners and influences the sanctioning or prohibiting of certain human activities, e.g., diet, sexuality, drug-taking, and so on. It shapes or helps to shape everything from marriage patterns to taboos regarding blood and the disposal of human waste, all of which are frequently incorporated into law.

This understanding of religion as a major influence in setting the conceptual parameters for the way human beings understand disease and practice curing is almost the reverse of the common image of the relationship between religion and medicine. Our most common visual image of this relationship is probably that of a chaplain visiting a large hospital. In this instance religion is serving

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the broader interests of medicine; or medicine, as the more inclusive of the two, is securing the limited services of religion. A more adequate and accurate image might be that in which the hospital is set against the background of a broader religious-philosophical framework. Here the actions and ideas of those within the hospital are constantly informed by the broader conceptual world in which they live, an image that suggests not the dominance of one area over the other but the constant interaction between the two.

This image regarding the relationship of religion and medicine assumes that concepts about disease, health, and therapy are constantly informed by the world-view of each respective human cultural group. This is the underlying assumption behind a number of new studies in medical anthropology, and to a significant extent is the logical extension of new analyses regarding both the philosophy of medicine and the nature of religion. Recent anthropological studies focus on such "ethnic religious traditions" as Puerto Rican Catholics, Southern blacks, and Navajo Indians; but surely the operating concepts behind these studies can be used to explore further the interconnections between scientific medicine and the major religious traditions of East and West. The subject of "religion and medicine" thus involves the interpenetration of traditional and modern religion and philosophy with medical concepts and practices.

*Christianity as a "healing religion"

The second exploratory thesis arises out of reflections about traditions of religious healing. Let us here reflect in a general way on the Christian tradition. Is Christianity a "healing religion," that is, a faith that is concerned in a unique and intensive way with the health and well-being of human beings? If it is such a religion, what are the implications of these concerns?

Unquestionably, Christian thought is replete with medical language. Christians sing "There is a Balm in Gilead;" and through the often quoted words from the book of Isaiah profess faith in a Christ who was "wounded for our transgressions... bruised for our iniquities... and with his stripes we are healed" (Isaiah 53:5). Is this reliance on medical language more metaphorical than real?

When we look critically at the Christian heritage, we are surprised, I believe, not so much by the absence of medical concerns as by their prevalence. In the New Testament literature, for example, we find not one but four healing traditions attributed to Jesus. Furthermore, in the first three of these cases the church felt supremely commissioned to perpetuate the healing traditions begun by Jesus. First, according to both his foes and followers, Jesus is understood as a great exorcist who heals the sick—mostly mentally disturbed individuals—by casting out demons with the power of God (Luke 8:26-39; Mark 3:20-27). This understanding of curing diseases caused by demons or spirit possession is probably the oldest and most pervasive conceptual model of disease and healing in world history. The Christian church regarded curing by exorcism as a gift and imperative from Jesus (e.g., Mark 6:7-13 and Acts 19:11-20). Indeed exorcism is still sanctioned officially in such traditions as Roman Catholicism and Anglicanism and is practiced by several Pentecostal groups, particularly in Africa and Asia.