

Editorial

THERE ARE SIGNS that mainline Protestant churches intend to reclaim their historic ministries of health and healing. Some contend that, in this century at any rate, mainline churches have largely relinquished these ministries to others. Major reasons for this are both theological and medical in nature. Theologically, mainline churches have drunk deeply from the wells of nineteenth- and twentieth-century Liberal thought. Liberal thought, however, has long been known for the low view it takes of the miraculous healings the Gospels describe Jesus as having accomplished. Whereas Christian faith has traditionally held that the miracles of Jesus point to God as immanent, that is, as active in the realms of history and nature, Liberal thought has maintained that it is naive and against science to think that Jesus, except perhaps for having helped persons with psychosomatic illnesses, performed the miracles attributed to him. Looking back, it would seem to run counter to history to suppose that mainline churches, having effectively adopted a low theological view of Jesus' ministry of healing, would nevertheless sustain a high theological view of their own ministries of healing.

Still, is it not true that mainline churches have heavily involved themselves in the several aspects of modern medicine? Have they not built hospitals, clinics, and homes, and have they not availed themselves of the professions of medicine and psychology and nursing? They have indeed! So what is the point? The point is that mainline churches have not only embraced modern medicine but also capitulated to it. Instead of using modern medicine in line with the dictates of a robust theology of health and healing, the tendency for mainline churches has been to appropriate medicine's understanding of health, healing, and human existence. Surrendering bodies to physicians and minds to therapists, pastors have largely contented themselves with some vague notion of caring for souls. Only uncertainly have mainline churches explained how or why their own congregations should want to be engaged in their own ministries of health and healing.

It appears that this situation is beginning to change. Such change is what this issue is about. Thomas Droege asserts that it is only out of faithfulness to Jesus Christ himself that congregations can begin to see themselves as communities of health and healing. James Wind contends that without theological reflection solidly grounded in the long tradition of the church, it is idle to speak of the "full healing" of the human being. John Carroll explores the four Gospels and concludes that, at the basis of their picture of sickness and healing, lies the fundamental conviction that God wills, not just the cure of humans, but their wholeness. And Abigail Evans undertakes the eminently practical task of describing any number of programs of health and healing now available. Should health care be on the minds of Americans, it is also on the minds of mainline churches. The question is not only what to do but also why and how.

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