

Doctrinal Research

HEALING: TEACHING AND ADMINISTRATION

Editor's Note: A new booklet on healing, written by Mr. Herbert W. Armstrong, is scheduled to go to press some time after the Feast of Tabernacles. The following teaching and administrative guidelines on healing, prepared by Herman L. Hoeh and others, was approved by Mr. Armstrong to be included in the forthcoming booklet for the general public, and recommended by Mr. Garner Ted Armstrong to be published immediately in the Bulletin for God's ministry.

The fact that God can and does heal people today has never been in question in the Church of God. But what has been of concern to the ministry is the *approach* in teaching the doctrine of divine healing.

New members are continually being added to the Church. With them come an ever greater array of questions about medicine, operations and the role of doctors. What, they ask, is God's prerogative? What is man's responsibility? Answers to these questions — too long blurred and confused as a result of the impact of medical technology and the knowledge explosion in medical science — should be made plain and simple.

As we all know, it became commonplace in the Church to assign, for example, bone setting, the care of teeth and attention at childbirth as man's responsibility. Whatever in these areas seemed beyond the ability of man to resolve was understood to be the prerogative of God. Then along came decisions on the adjustment of misplaced organs of the newborn, on repair surgery of the eye, etc. "God does for us what we cannot do for ourselves" seemed to summarize the basis for these decisions. But repair surgery can involve other organs than the eye. Many open-heart operations (not heart transplants) are quite literally repair surgery and hardly more difficult in technique than eye repair surgery. Logically, the eye or tooth is as much a part of the body as the heart.

The time when only aspirin was considered "right" to use has long since passed. The vast array

of painkillers, non-prescription and prescription medicines is so great that no minister can — or should — assume responsibility in giving advice to brethren in these areas. Attempting to resolve the myriad questions by asking: "Is it right in God's sight?" is neither possible nor is it in fact the right approach. The reason this has, in the past, seemed the right question to ask is that our understanding of divine healing developed in the late 1920's when modern medical science was in its infancy. So many operations doctors performed then appeared to be miscarriages of medical knowledge. But sewing up wounds, setting bones, care at parturition seemed simple enough to assign to man's responsibility. Major surgical techniques for the internal organs of the body — eye, heart, etc. — were not yet developed. Chemistry had not, in the late 1920's, made possible the present array of compounds, many of which are as free or freer from side effects as aspirin.

The simplicity of medical practice in previous decades made it seem possible that we, as ministers, could give a definite "yes" or "no" to the question: "Is it right in God's sight?" regarding any specific medical technique, surgical operation, pharmaceutical agent, etc. but that was not really the question to ask — because, in fact, from either a theological or a biological viewpoint it is conceptually impossible to draw any lines.

Take an example from Luke. Peter cut off the ear of the servant of the high priest (Luke 21:50). To restore the ear Jesus "touched his ear, and healed him" (verse 51). The ear was suddenly and miraculously restored whole. Should one conclude from this that sewing on an ear — repair surgery — is forbidden today? Certainly not. Should one conclude that, since surgeons can today sew on an ear if done in time, repair surgery is always necessary if one is to be healed? Certainly not.

Some in the Church have believed that God could miraculously remove warts or other surface growths from their body. They have been anointed by ministers and been miraculously healed. Some few have believed that God could heal teeth and fill cavities. They have been anointed and been miraculously healed and their tooth cavities apparently filled. We have their case histories. Should one conclude therefore that all medical attention to teeth or growths on the body is absolutely forbidden merely because God did miraculously heal some? Certainly not. Yet these miracles should point us all toward faith.

For too long we have focused our attention in the wrong direction. We have looked at the astounding developments in medical science and

the technical achievements of surgeons and asked: "But is it right?" Some things seemed wrong; some seemed right. Probably no two would have drawn the line of right and wrong in medical practice at the same place. And even if it were possible and proper to do so, it would take an ever-expanding administrative talmud of do's and don'ts to keep up with the knowledge explosion in medical science. And we still would miss what should be the real focus of our attention. We simply cannot — indeed, *must not* — ever state, or even give the impression, that "x is OK," "y is questionable," and "z is forbidden," when referring to *any* medical, surgical or pharmacological procedure.

Aspirin and penicillin, as well as the host of all other chemical agents — including dietary supplements — are all chemical substances with greater or lesser primary effects and greater or lesser side effects. They differ in degree, not in kind. They differ in structure and effect, but not by any difference in "spiritual rightness or wrongness." There is no way to draw a chemical line between the spiritually "right" drug and the spiritually "wrong" drug — between the harmless and the harmful — for every individual. Likewise, there is no way to draw a surgical line between the spiritually "right" operation and the spiritually "wrong" operation. The use of painkillers, X-rays, surgical intervention and antibiotics in bone setting differs only in degree from their use in the most exceedingly complex repair surgery of internal organs.

Insulin, whether of chemical or animal origin, for diabetes; thyroid hormone, whether of chemical or animal origin, for insufficient glandular function; and the entire class of antibiotics, whether "artificially" synthesized or "naturally" developed, *differ only in degree, not in kind*. They are all external chemical agents taken into the body to perform specific biological functions. A mechanical pacemaker implanted in the body and digitalis, a chemical, both serve to regulate the heartbeat.

God, who made everything, designed the interaction of chemicals in the human body to support life; but the most educated men are mere babes in understanding these interactions. How much better and easier to trust God for divine healing than to rely on the limitations of human skills. Perhaps more than anything else, healing expresses the deeply personal relationship between an individual and his God.

Jesus said: "According to your faith be it unto you" (Matthew 9:29). There are some of little faith (Luke 12:18) and some of great faith (Luke 7:9).

Jesus' disciples said: "Lord, increase our faith" (Luke 17:5). The new healing booklet focuses our attention on faith in God instead of doubtful questions about medical practice. There are different degrees of faith both within the individual and between individuals. One's faith can at times fail (Luke 22:32). Some new brethren may have little or no faith. Others may have far more faith than members of longstanding. Instead of judging one another as to how far some go in using doctors or drugs, we should comfort the weak and encourage one another. And we all should seek to follow the example of those strong in faith.

God can heal an ear today without having it sewed on. God can also heal it if one asks to have an ear sewed on. God can miraculously fill tooth cavities, or He can stop the pain and leave the cavities unfilled. Or some may have teeth that are decayed and poisoning the body extracted. "According to your faith be it unto you," said Jesus. Mr. Armstrong points out that the individual's faith and the minister's faith are paramount in how far one trusts God, or how far one entrusts himself to men with their varying degree of skills and knowledge.

Of major import to us today when questions of healing arise are the principles Paul expressed to the Roman Christians: "But why dost thou judge thy brother? or why dost thou set at nought thy brother? for we shall all stand before the judgment seat of Christ" (Romans 14:10).

And: "Let us not therefore judge one another anymore: but judge this rather, that no man put a stumbling block or an occasion to fall in his brother's way" (verse 13).

"For whether we live, we live unto the Lord; and whether we die, we die unto the Lord: whether we live therefore, or die, we are the Lord's" (verse 8).

In summary, God can, *has* and *will* heal us of sicknesses and diseases. To draw lines and list do's and don'ts is to forget the primary point. How much better to concentrate on what really counts — developing that deep personal relationship between God and His begotten Sons.

Our duty as ministers requires this kind of fatherly wisdom and encouragement to the congregation of Christ which is under our charge.

The new booklet is a great step forward. All ministers will be sent advance copies. We appreciate your questions and comments.

— Herman L. Hoeh

DOCTRINAL MEETINGS REPORT

Thursday, September 5, saw another doctrinal