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Holistic Healing Ministry: A Practical Guide for Korean Presbyterian Churches

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This thesis is dedicated to my wife, Yoon Joo Oh and to my parents for their prayer and support.

ABSTRACT

Holistic Healing Ministry: A Practical Guide for Korean Presbyterian Churches

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Liberty Theological Seminary, 2012

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This study attempted to provide practical and effective advice to Korean Presbyterian churches (KPCs) for adapting Holistic Healing Ministry (HHM), not as an optional ministry but a necessary ministry for all local churches through the exact biblical concept about HHM. Through the analysis of survey for HHM conducted in many congregations of KPCs, this thesis evaluated the present reality of HHM ministered to KPCs, examined holistic health conditions of the congregations of KPCs, and identified which domain of health – physical, emotional, or spiritual – KPCs are currently interested in. Moreover, this thesis drew up a plan for KPCs to develop a team ministry, in cooperation with hospitals that share the same vision and goals of providing HHM to their congregational members and patients.

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CHAPTER ONE

Introduction

A key word signifying an important social trend in South Korea today is *well-being*. This well-being trend has made a tremendous change and impacted all areas of South Korea like a huge typhoon. The existing concept of well-being focuses on physical health by means of a good diet and good exercise has positioned itself as a new cultural code through a combination of body, mind, and spirit.

This wind of well-being in the society of South Korea has also impacted local churches. Pastor Choo Bugil, the founder of the Korean Family Ministry Institute and the visiting professor of Anyang University Theological Seminary, opened Wellbeing Church in Seoul, Korea in 2003 in order to change negative feelings of existing local churches. This church received intense media attention at that time, an unusual event that a small church received a big spotlight, representing how deep the thirst for the holistic health of many congregations was at that time.¹

In the past, the Korean churches have accomplished their mission as the ship of salvation. As shown in figure 1.1,² the Korean churches experienced explosive numeric growth from 1960 to 1990, and the Korean church has become a remarkable model in its quantitative expansion.

¹ Young Bin Kim, *Dreaming Wellbeing Church*, <http://www.chtoday.co.kr/view.htm?id=152728> (accessed by July, 14, 2011).

² See Won Gyu Lee, *The Reason of Stagnation of the Korean Church*, <http://www.amennews.com/news/articleView.html?idxno=1031> (accessed by November, 29, 2011).

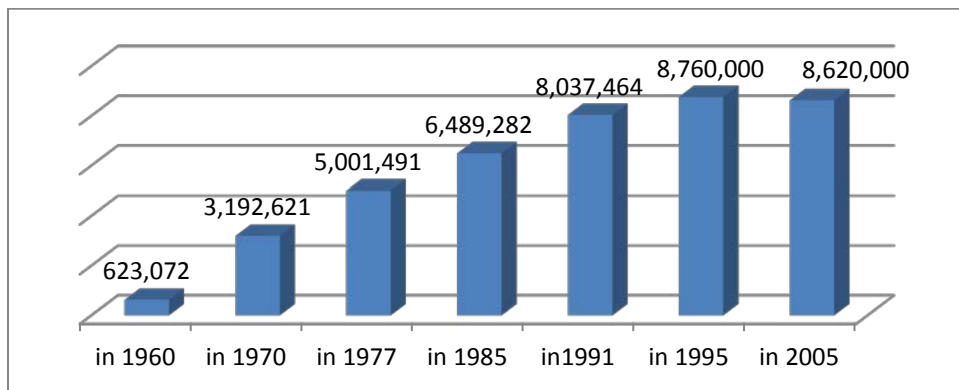


Figure 1.1 Change in the Korean Christian Population from 1960 to 2005

However, since 1995 the Korean churches have experienced stagnation because qualitative maturity has not followed the quantitative growth. In spite of the ceaseless proclamation of the Korean churches for salvation, it has not created holistic life change and holistic health. As a result, today the number of Christians who suffer from physical, emotional, spiritual, and social disease have increased. Many Christians, disappointed by local churches that focus on numeric church growth without any differentiation from the secular world, are asking local churches for holistic healing ministry (henceforth HHM)³ out of their hunger to live a healthy, faithful life based on holistic maturity.

The Necessity of Holistic Healing Ministry

According to a survey conducted in 2010, under a request from the Christian Ethics Movement of Korea, by GH Korea⁴ about the public social credibility of the local churches in Korea, Korean people were asked, “Is the Korean Church reliable?” and they responded as follows: those who responded with strong agreement was 6.8%, agreement 10.9%, strong

³ Holistic Healing Ministry is making their congregations recover holistically from the midst of pain, doubt, weakness, and brokenness, teaching them to make the healing choices that will help them become Christ-like in character, equipping them to be holistic healers who perform HHM in their fields.

⁴ See <http://www.christiantoday.co.kr> (Dec, 1, 2010), <http://trusti.kr> (Website of Christian Ethics Movement of Korea), accessed by June, 2, 2011.

disagreement 18%, disagreement 30.4%, and undecided 33.8%. Unfortunately, this result clearly shows that many Korean people find the local church unreliable.

However, many Christians were shocked, not because of the opinion of the general public, but because of the unexpected opinions of existing believers who participated in the survey. When the same question was asked to Christian believers, the results revealed a rapid decrease in credibility and reliability of the local churches in Korea with the following results: Strong agreement 6.8%, agreement 10.3%, undecided 23.8%, disagreement 29.1%, strong disagreement 29.9%.

When people were asked through the same survey to indicate the most credible religious group within South Korea, the Catholic Church and Buddhism gained the highest trust rating with 41% and 33.5% respectively, while Protestantism fell into third place with only 20%. And when they were asked, “What needs to change in the local churches to regain confidence and credibility?,” the following was their response: Church leadership (28.3%), church management style (20.7%), lifestyle of the saints (18.8%), manner of evangelism (15.9%), and active social input (15.7%).

Byung Yun Kim, a professor of Seoul National University and the general manager of the Headquarter for Honesty and Trust Improvement, made several concrete suggestions for the Korean local churches on the basis of the shocking results of the survey.

First and foremost, Kim suggested that the Korean local churches must not focus on quantitative growth of congregations, but rather, on the qualitative development of their congregations. He also suggested that the Korean local churches must change the ways of communicating with society, find a more proper approach, and avoid an aggressive manner of

evangelism. Kim further stated that the Korean local churches must not confine their highly disciplined congregations into their church buildings, but dispatch them out into the world. And he insisted that the Korean local churches must reach out to their neighboring churches and form strong networks that will help them to effectively influence their communities.

The challenge of the Korean local church is finding a proper form of recovery, and the solution to the problems is surprisingly simple. The solution is to return to the core value of the church. The church is the body of Christ, and every member of the body needs to be healthy. Rick Warren insists that “the key issue for churches in the twenty-first century should be church health, not church growth.”⁵ Paul explained it like this: “They have lost connection with the head, from whom the whole body, supported and held together by its ligaments and sinews, grows as God causes it to grow” (Col. 2:19 NIV). When every member of the body is healthy, the church will naturally grow as the saints mature into the image of Christ.

The Korean local churches must focus not on quantitative growth, but on the healthy growth of their members through holistic healing. The Korean local churches must do their best to restore their congregations to health in Jesus Christ by taking care of them to recover from their sufferings and pain. And, as the restored people of God with experiences of restoration and recovery, the local churches should help their congregations to reach out to others who are suffering from similar pains as “wounded healers.”

R. W. Neighbour, Jr. once said, “The healing and miracle of God is a special moment which God shows His grace and power in order to bless us.”⁶ Through HHM, many people who

⁵ Rick Warren, *The Purpose Driven Church* (Grand Rapids, MI: Zondervan Publishing House, 1995), 17.

⁶ Ralph W. Neighbour, Jr., *Where Do We Go From Here?* 2nd ed. (Houston, TX: TOUCH Publications, 2000), 164.

are suffering from diseases will experience not only holistic healing, but also the presence of the kingdom of God. The Melbourne Congerence Report clearly shows us the presence of the kingdom of God through healing as follows:

Our Lord healed the sick as a sign that the kingdom of God had come near, and commanded his disciples to do the same (Luke 9:1-6). It is a healing of the whole person—forgiveness for the guilt-laden, health for the diseased, hope for the despairing, restored relations for the alienated—which is the sign of the kingdom’s arrival.⁷

The Statement of the Problems

Today, although Korean Presbyterian churches (henceforth KPCs) focus on preaching, teaching, and evangelism ministry for numeric church growth, HHM, the mark of the church healing the sick, has not been practiced in the full sense of its purpose. Jesus took compassion on people suffering from diseases, and he healed many of the sick (Matt. 8:16, 9:35). Through the redemption of the cross he holistically healed all diseases. He then entrusted the healing ministry to the church and ordered the church to practice healing prayer for the sick. According to Jesus’ command, all the churches must be actively involved in a healing ministry for the sick.

From the perspective of HHM, categorizing all diseases as either only spiritual or only physical is not a desirable approach. Many KPCs did not biblically care for their congregations as a whole being. They neglected physical, emotional, and social diseases, while overemphasizing the spiritual diseases of their congregations, trying to settle all problems spiritually by evaluating their congregations through the measure of faith. Therefore, healing has been totally spiritualized, and its physical dimension has been lost.⁸

⁷ World Conference on Mission and Evangelism, *Your Kingdom Come* (Geneva: World Council of Churches, 1980), 199.

⁸ Abigail Rian Evans, *Redeeming Marketplace Medicine: A Theology of Health Care* (Cleveland, OH: The Pilgrim Press, 1999), 53.

On the other hand, KPCs often neglected emotional, spiritual, and social disease related to physical diseases by focusing on only physical diseases. If the local churches only focus on the physical aspects of diseases, apart from a whole being, they are not practicing biblical holistic healing.

In regards to healing ministries in South Korea, the absence of a clear theology for the ministry is a major problem. It is difficult to find a sermon or a Bible study about the theology of healing; therefore, the reason why many pastors of KPCs hardly preach about healing to their congregations can be summarized into two reasons.

Firstly, many pastors of KPCs barely know about biblical healing because they did not learn about HHM in their respective seminaries. Most Korean Presbyterian theological seminaries do not currently train their future pastors and leaders in the areas of HHM. Secondly, many pastors of the KPCs have skeptical and negative images about healing ministries because many churches practice healing through unbiblical healing methods, such as psychological, hypnotic and mystical methods.

In recent days, HHM has gained much attention. Books and dissertations about holistic healing have been published in Korea and HHM has been implemented in some hospitals and healing centers. However, the KPCs rarely recognize the necessity of HHM because there is no concrete role model that has proved HHM to be effective.

This thesis will attempt to lay a theoretical foundation and provide practical methods for implementing HHM inside the local churches in South Korea. It will also attempt to provide, by means of biblical data and practical examples, suitable answers to resolve problems in practicing HHM.

Thus, this thesis will examine the exact biblical concept about HHM on the basis of biblical and theological data. Through examination, this thesis will urge that HHM is not an optional ministry but a necessary and needed ministry for all local churches.

Through the analysis of survey for HHM conducted in many congregations of the KPCs, this thesis will then evaluate the present reality of HHM ministered to the KPCs, examine holistic health conditions of the congregations of the KPCs, and identify which domain of health – physical, emotional, or spiritual – KPCs are currently interested in. These examinations and evaluations will allow this thesis to provide practical and effective advice to KPCs for adapting HHM as an essential part of their ministries.

Finally, this thesis will draw up a plan for KPCs to develop a team ministry, in cooperation with hospitals that share the same vision and goals of providing HHM to their congregational members and patients.

The Statement of Limitations

The research conducted for this project has the following limitations in three particular aspects. First, the target of the sample study for HHM is limited to congregations of Korean Presbyterian churches in big and medium-sized cities of South Korea, including their pastors, elders, deacons/deaconesses, and lay-people. However, the data might have shown substantial difference in its results, if churches of other denominations were taken into account. The realistic difficulty of sampling across diverse denominational borders has limited the spectrum of validity for the analytical outcome of the survey utilized within this research.

Secondly, there have been diverse theological arguments regarding holistic healing within South Korea. In particular, the relationship between prayer for healing and the use of

medicine and modern medical technology has been quite controversial and sensitive. Among such arguments, this research insists that a believer should use modern-day medicines, according to its availability, because God is also the creator of the substances that were used to produce those medicines with relevant healing properties.

Thirdly, HHM is yet to be verified within Korea for its effectiveness. Programs like Daniel's Fast and the parish nursing ministry, which this research introduces as practical methods for HHM, are making steady progress in American churches. However, they are not yet verified as biblical and effective healing ministries for the local churches in South Korea.

The Biblical and Theological Basis

Biblical Basis

Jesus the Holistic Healer in the Four Gospels

Jesus was a *holistic healer* of the body, mind, and soul. Jesus saw wholeness as the well-being of the total person: physical, emotional, and spiritual. There was no separation of body, mind, and soul because Jesus understood them as bound together in a living unity.

The four Gospels teach three important points of Jesus' healing ministry as follows: The first point is that the healings of Jesus reveal his concern for the complete well-being of the sick. The second point is the strong conviction that Jesus held concerning the well-being of others. In short, Jesus reveals for the believer God who is deeply involved in human suffering. The third point is that the healings of Jesus can be understood as exhibitions of the Kingdom of God in its fullness.

Pilch, a professor of Biblical Studies at Georgetown University, demonstrates that Jesus is the Holistic healer through the story of the paralyzed man in John 5. Pilch offers an

interpretation of Jesus' action that is not immediately apparent. Jesus' acts of healing included a concern for the lame man's self esteem. With compassion and care for the man's plight, Jesus touched the man who was alone and without the help of family or friends. Therefore, the healing was emotional as well as physical. Not only in this passage of John, but also throughout the Gospels there are demonstrations of Jesus' passionate concern for the complete well-being of those to whom he ministers. It would be accurate to claim that Jesus must have been concerned not only with the spiritual salvation of others but with the curing of their bodies, and for that matter, their entire state of being, including a sense of purpose or meaning.⁹

Contrary to the bias of the popular contemporary Christian culture which emphasizes God's concern for the spiritual and moral dimensions, the four Gospels reveal Jesus as one who cares for the whole person. This wholeness includes the emotional, social, and physical dimensions without excluding the spiritual and moral dimensions of human life.

Therefore, Jesus' efforts for the salvation of unbelievers were not exclusively oriented to the spiritual or moral dimensions. Rather, his saving efforts included the emotional, social, and physical needs of them as well.

Jesus' healing ministry is a manifestation of the eschaton. His healing power is evidence of a new in-breaking of the Reign of God. In his study of the miracle stories of the synoptic Gospels, Herman Hendrickx said the healing works of Jesus do not merely disclose the fact that the rule of God is breaking in the person and ministry of Jesus. They show also the way in which this happens: where God establishes his rule, people become healed. This does not only mean "healed" in a spiritual sense, but also denotes that the entire person, including his/her corporality,

⁹ John Pilch, *Healing in the New Testament* (Minneapolis, MN: Fortress Press, 2000), 12-14.

has been received by Christ and led to salvation.¹⁰ Therefore, the healings of Jesus are a taste in the present of that which will be perfected in the fulfillment of the eschaton. He is not just concerned about our eternal life, He also wants to introduce us to and enable us in the holistic healthy life.¹¹

1 Thessalonians 5:23

Jesus cares for the well-being of his people, for the whole person—the physical, emotional, and spiritual dimensions. Therefore, man made up of three parts—the spirit, the soul, and the body— and if one part is sick, the whole is sick. 1 Thessalonians 5:23 is a crucial text that describes holistic healing:

“May God himself, the God of peace, sanctify you through and through. May your whole spirit, soul and body be kept blameless at the coming of our Lord Jesus Christ.”

First Thessalonians 5:23 is unique among Paul’s letters because it is the only text that clearly discusses the blamelessness of souls and bodies. Interestingly, out of all the texts that include the word *blameless*, only in 5:23 does Paul say, “God of peace” (Greek *eirene*, Hebrew *Shalom*) rather than just “God.”

In Hebrew, *shalom* has many meanings, such as completeness, safety, soundness, welfare, health, prosperity, peace, peace from war, and friendship.¹² *Shalom* is used with many of the meanings above in Scripture. *Shalom* is not only a vision of the unity of all things but unfolds

¹⁰ Herman Hendrickx, *The Miracle Stories* (San Francisco, CA: Harper and Row, 1987), 14.

¹¹ Lloyd John Ogilvie, *Why Not? Accept Christ’s Healing and Wholeness* (New Jersey, NJ: Fleming H. Revell, 1985), 9.

¹² Francis Brown, S. R. Driver, Charles A. Briggs, *The New Brown, Driver, Briggs, Gesenius Hebrew and English Lexicon* (Peabody, MA: Hendrickson, 1979), 1022.

now in our midst in specific instances of healing.¹³ The biblical concept of *shalom* speaks of wholeness and wellness, of the total well-being of individuals and communities. It arises out of a covenant relationship characterized by love toward God and love to neighbor and self.¹⁴

Among the meanings, completeness and health are explicitly implied in 1 Thess. 5:23. Paul says, “The God of peace sanctifies you *completely* [emphasis mine]. May your whole spirit, soul and body be kept *blameless* [emphasis mine].” In order to be kept blameless, Christians must avoid every form of evil. Paul realizes he cannot underestimate the power of devils (1 Thess. 2:18; 3:5). Only the God of peace (*shalom*) can bring true *shalom* from war with evil powers; thus, in 5:23 an aspect of peace from spiritual warfare exists, too.

The text of 1 Thess. 5:23 teaches that God desires to make people whole. The terms spirit and soul and body read in a collective sense signify the totality of personhood. William M. Greathouse says, “Entire sanctification is spiritual health restored and preserved by the power of God”;¹⁵ however, God is also concerned for human physical health. Jesus fed people and healed the sick. He responded to their physical needs and cared about their bodies as well as their souls and spirits.

HHM, however, must be distinguished from the “social gospel movement” at the beginning of the twentieth century. The “social gospel” focused more strictly on saving the social order rather than on saving individual souls.¹⁶ HHM is not based on an either/or type of ministry but rather on both saving souls and social justice. In true HHM, social ministry is as

¹³ Zach Thomas, *Healing Touch* (Louisville, KY: Westminster/John Know Press, 1994), 44.

¹⁴ Abigail Rian Evans, *The Healing Church* (Cleveland, OH: United Church Press, 1999), 179.

¹⁵ William M. Greathouse *Wholeness in Christ* (Kansas City: Beacon Hill, 1998), 140.

¹⁶ George M. Marsden, *Religion and American Culture*. Fort Worth (TX: Harcourt, 1990), 119.

crucial as evangelism. Sider asserts that “without social ministry, evangelism can be perceived as just ‘so much mouth.’ Without the gospel, social activism is stripped of the Holy Spirit’s transforming power.”¹⁷

HHM must be, therefore, a Spirit-filled ministry. God first fills people with his Spirit to make them whole and he sends them to others. In 1 Thess. 5:23, Paul prays that the God of peace will make his followers whole, and since they are the temples of the Holy Spirit, God also desires to make others whole through their ministries. Through Spirit-filled people, the God of peace heals others, feeds the hungry, and fights social evils—not violently but through loving actions.

In 1 Thessalonians 5:23, Paul prays that the God of peace make people whole; nevertheless, until the coming of the Lord, Paul knows that he will continue to suffer from disease. He knows Satan will seek to destroy his ministry. On the other hand, he believes that the God of peace is much more powerful than Satan, and God has given Christians the gifts of the Spirit to heal others.

The God of peace makes Christians whole and gives them the gifts of the Spirit so that they, as the Church, are able to serve others. 1 Thessalonians 5:23 tells Christians that the God of peace encourages Christians towards HHM to heal individuals, families, communities, the Church, and all of creation.

Isa. 53:4-5

Christ redeemed us from that curse that came as a result of the fall of Adam when he died on the cross: “surely he took up our infirmities and carried our sorrows... by his wounds we are

¹⁷ Ronald J. Sider, Philip N. Olson, and Heidi Roiland Unruh. *Churches That Make a Difference* (Grand Rapids, MI: Baker, 2002), 46.

healed” (Isa. 53:4-5 NIV). This passage refers to both the physical and spiritual healing that Christ purchased for us, for Peter quotes it to refer to the believer’s salvation: “He himself *bore our sins* in his body on the tree, that we might die to sin and live to righteousness. By his wounds you have been healed” (1 Pet. 2:24).

However, Matthew quotes the same passage from Isaiah with reference to the physical healings Jesus performed: “He cast out the spirits with a word, and healed all who were sick. This was to fulfill what was spoken by the prophet Isaiah, “He took our infirmities and bore our diseases”” (Matt. 8:16-17)¹⁸

All Christians would probably agree that in the atonement, Christ has purchased for us not only complete freedom from sin but also complete freedom from physical weakness and infirmity in his work of redemption. Christians would probably agree that our full and complete possession of the benefits that Christ earned for us will not come until Christ returns. It is only “at his coming” (1 Cor. 15:23) that we receive our perfect resurrected bodies.

So it is with physical healing and redemption from the physical sickness that came as a result of the curse in Genesis 3. Our complete possession of redemption from physical illness will not be ours until Christ returns and we receive resurrected bodies.¹⁹

Theological Basis

Human as a Whole Being

Throughout the ages, Christian philosophers, theologians and scholars have attempted to answer basic questions about human beings and their existence. Seemingly elementary issues,

¹⁸ Wayne Grudem, *Bible Doctrine* (Grand Rapids, MI, Zondervan Publishing House, 1999), 416.

¹⁹ *Ibid.*, 416.

such as what constitutes human beings and what makes them different from other forms of life, have occupied great minds and fueled debate within the church for centuries.

Christians have sought to embrace a doctrine of human beings that is consistent with Scripture and the historical witness of the church. This task has not proved easy, as Scripture does not directly address some of the questions and issues that arise related to human beings. As a result, multiple opinions have been present within the church over the centuries. These different understandings of human beings are not only important for a correct theological understanding but also impact the whole of Christian faith and practice.

The questions about the constitution of human beings and the relationship between the body, mind, and spirit are also relevant to, and have impacted, the scientific disciplines over the ages.²⁰

The life of man is totally destroyed and distorted by physical disease and suffering, mental fear, a spiritual sense of guilt, severance of man's relationship with God, destruction of nature, human selfishness and desire, and alienation from neighbors. Therefore, to recover from human illness in only one aspect of spirituality is difficult. This is why ministry should ultimately help people be healed and forgiven holistically, in spirit and body. The solution to the problems in a man's life should be sought on the basis of understanding him as a whole being.

It is very important to see humans as a whole in HHM. If one part of a whole person is damaged, the damage spreads to other parts of the person. Thus, HHM needs a holistic approach to deal with the complex nature of human beings. Jesus, who showed himself as a model minister to the whole person, saw people as whole beings and thus healed not only their bodies but also

²⁰ Baum, A., Gatchel, R.J., Krantz, D.S., *An Introduction to Health Psychology*, 3d ed. (New York, NY: McGraw Hill, 1997), 1-7.

their spirits and souls by the power of atonement and the restoration of God's kingdom, expelling satanic influences.

Disease in the Bible

The Bible describes real diseases, sometimes with sufficient detail that modern diagnosticians can try to determine the actual disorder and to name it with today's terminology. At the same time, as in all early cultures, scientific explanation is not the primary issue in understanding disease. A more frequent and more important question for people in the Bible is not how people fell ill, but why people fell ill. Thus, the investigation and description of disease, as well as its treatment, will always have deep communal and religious connections. Questions about relationships, lifestyle, social networks and sin, will quickly be drawn into the equation. Disease is never only a physical reality.

The Bible does not have one way to think about calamity, however, as our individual healing stories attest. Divine wrath, personal and communal fault, other powers and forces and the natural consequences of life in a finite world all might contribute to disease. The biblical stories encourage both careful reflection and sincere prayer in the face of disease.

Contemporary theologian Martin Marty, who took a view of disease as a whole being structure, suggests biblical and modern perspectives in his description of four foci of illness:

First: I am ill because I belong to creaturehood, am a member of the fallen human race. If I am to be well, I must draw upon what God has done to change the condition of this fallen human race. Second: I am ill in this time and this place, perhaps as a result of a contagion, an environmental condition, a set of bad habits. I define this illness partly in terms that this culture and its therapies offer. Third: I am ill within this community and tradition, this way of telling and hearing a story, this way of listening to the "voice of illness" and of then speaking a word to it. I will get help from the form of prophecy that is appropriate to this therapy. Fourth: I am ill not only in the community of peoplehood, culture, and tradition; I am also ill alone, by myself. My illness learns from others and communicates to them. However, it is part of my unique, set-apart, personal condition

and circumstances. If I am to find or know well-being, I will do so in part because my physicians, counselors, and speakers of the word diagnose my specific condition.²¹

Taking a view of disease as whole being structure is an essence of HHM. When all parts of human beings function well physically, emotionally, and spiritually, holistic health follows as a result.²²

The Source of Disease

Sickness is a direct result of man's fall. Theologians use the term "*the fall*" to summarize the massive disruption of creation caused by the initial rebellion when evil first entered the world.²³ With man's disobedience, he lost the indigenous image given to him by God. His sin against God caused man to encounter all kinds of disease. The image of God that man once had included a healthy condition physically, emotionally, spiritually, and socially. Because of his disobedience however, man lost God's image and fell into unhealthiness. This kind of detrimental influence impacts not only all areas of men as whole being and their families, but also turns societies toward spiritual darkness. Diseases are simply part of the outworking of the curse after the fall and will eventually lead toward physical death.²⁴ Therefore, to be healed from disease we should confess our sin. Paul Tournier said:

At this point we must consider the physical and psychological effects of confession. I have at times been accused of over-emphasizing the importance of confession, as if the whole cure of souls were contained in it. I speak from my own experience as a doctor. Without neglecting the good effects of sympathy, exhortation, advice, and doctrinal

²¹ Martin E. Marty, *Health and Medicine in the Lutheran Tradition* (New York, NY: Crossroad, 1986), 48-49.

²² David Belgum Cedol, *Religion and Medicine* (Ames, Iowa: State University Press, 1967), 71.

²³ Philip Yancey, *Where is God When it Hurts?* (Grand Rapids, MI: Zondervan Publishing House, 1990), 67.

²⁴ Wayne Grudem, *Bible Doctrine*, 415.

teaching, I am convinced that, from the medical point of view, none of these can be compared in importance with confession.²⁵

However, modern medicine has no answer about the origin of disease because it is very difficult for modern medicine to handle even symptoms of disease. About this disappointing reality, Paul Tournier said that “of the meaning of disease, science has nothing to say: from the standpoint of science, nothing has meaning—neither the universe, man, life, death, illness, nor cure. The scientific view of the world is a stupid one. We see this clearly in the anguish that can take possession of a man when suddenly he realizes that nothing has meaning for him, neither his existence, his actions, nor his destiny. Science shows us only phenomena, a universal and impassible chain of phenomena, without beginning or end, without origin or goal.”²⁶

The Biblical Meaning of Pain and Suffering

God does not protect us from all harm. In fact, he allows us to enter into the dark places of life from time to time, and he “prunes” us so that we will grow stronger and bear more fruit.²⁷ The great modern apologist, C. S. Lewis, helps us understand pain: “God whispers to us in our pleasures, speaks in our conscience, but shouts in our pain. Pain is God’s megaphone to rouse a deaf world.”²⁸ Author and psychologist Larry Crabb observes that many of us think of God as “especially attentive waiter.”²⁹ When believers receive good service from him, they give him a nice tip of praise. When they do not get what they want, they complain. Therefore, sinful

²⁵ Tournier Paul, *A Doctor’s Casebook in the Light of the Bible* (New York, NY: Harper&Row, 1954), 209.

²⁶ *Ibid.*, 14.

²⁷ Tim Clinton & Joshua Straub, *God Attachment* (New York, NY: Howard Books, 2010), 93.

²⁸ Maurice Burton, *The Sixth Sense of Animals* (New York, NY: Taplinger Publishing Company, 1972), 9.

²⁹ Larry Crabb, *Finding God* (Grand Rapids, MI: Zondervan Publishing House, 2003), 18.

attitudes and behavior have only brought humanity more pain, as well as brokenness in its relationship with him and loved ones.³⁰

When people try to avoid pain, they may miss God's purpose for it. And to deny pain is to refuse God's power to help people recover. If so, human beings will never find healing from their pain. Most people never choose to move toward healing until there is no other option.

An Author and professor, J.I. Packer, observed that God has a higher purpose for human struggles. God's purpose, he notes, is to deepen humanity's relationship with him.

D.A. Carson said that there are at least three ways in which pain and suffering, rightly received in faith, will contribute to our growth as Christians.

First, Richard Baxter states that "suffering so unbolts the door of the heart, that the Word hath easier entrance." For in a fallen world, pain and suffering can be God's megaphone, to an individual or to a nation, distracting his or her attention from the selfishness of a life that functionally disowns God, no matter what a person may recite in his or her creeds.

Second, pain and suffering actually transform a person. As Romans 5:1-5 teaches, rightly accepted, pain and suffering cleanses the person from self-centeredness, gives insight into the nature of this fallen world, makes the person remember the sufferings of Christ and of others.

Third, experiences of pain and suffering engender compassion and empathy in the human being, and therefore, make the person better able to help others.³¹

The church has not been spending its energy to go deep with the unfathomable God of the Bible. Against the overwhelming weight and seriousness of the Bible, much of the church is

³⁰ Tim Clinton & Joshua Straub, *God Attachmen*, 108.

³¹ D. A. Carson, *How Long O Lord?* (Grand Rapids, MI: Baker House Company, 1990), 121-2.

choosing, at this very moment, to become lighter, shallow, entertainment-oriented and successful in its irrelevance to massive pain and suffering.³² Therefore, one purpose of a church is to provide its members' lives with meaning and to enable them to interpret their pain in the context of Christ's love and redemptive acts. And the church must never deny the reality of suffering—be it mental, spiritual, or physical—or assume that suffering is God's way of punishing a lack of faith or a secret sin. The church must be a source of comfort for the afflicted.³³

The Meaning of Holistic Healing

Holistic healing is not an absence of disease physically, but the process of not only recovering from disease, but also being a healthy person as a whole being through a holistic and lifestyle approach focusing on all parts of the individual.

If someone asks many doctors and nurses of a hospital the meaning of the term *healing*, their responses may be more inclined toward a focus on the scientific dimension of the physical components of the person. In other words, they most likely would answer in terms of *cure*. There is a difference between the meanings of the terms *healing* and *cure*, and it is one that calls for explanation.

The term *cure* is rooted in the Latin *curare* meaning, “to take care of.” The term developed to mean “a medical course of treatment for a body ailment.” The term *healing*, on the other hand, is rooted in the Old English *hal* meaning “to make sound or whole.”

Richard E. YaDeau said “Recognizing, then, that the triune being [the human] is composed of a physical entity, a psycho-social entity, and a spiritual entity, curing becomes that

³² John Piper & Justin Taylor, *Suffering and the Sovereignty of God* (Wheaton, IL: Crossway Books, 2006), 18.

³³ Michael Gemignani, *Making Your Church A House Of Healing* (Valley Forge, PA: Judson Press, 2008), 20.

endeavor which rectifies a disease or a disorder in one component of the triune being, while healing addresses the integration of these three components into a single entity, and is independent of the extent to which an individual's physical body is cured.”³⁴

Many people think that healing is simply defined as the absence of disease. And disease, sickness, pain and suffering are things to be avoided instead of seeing them as messages to embrace. In this line of thinking death is seen as the final defeat. However, healing is more about relationships with oneself, with others, and with God.

Holistic healing is the process of being restored to bodily wholeness, emotional well-being, mental functioning, and spiritual vitality. Holistic healing may also refer to the process of reconciling broken human relationships and to the development of a just social and political order among races and nations.

Holistic healing is also the process of gaining holistic health. According to the World Health Organization (WHO), “health is a dynamic state of complete physical, mental, spiritual and social well-being and not merely the absence of disease or infirmity”³⁵. In this definition, social well-being is included for human health; thus, in order to gain holistic health, the health condition of society is also crucial.

Holistic healing is a lifestyle approach, taking a holistic approach when seeking treatment for imbalances and choosing to live a more balanced lifestyle. Holistic healing focuses on all parts of the individual, not just the physical aspect of a person where manifested illnesses are most apparent. Physical illnesses are the symptoms of a greater imbalance that may or may not

³⁴ Richard E. YaDeau, *Healing*, WW2, no4 (1982), 317.

³⁵ Bernard J. Healey, Robert S. Zimmerman Jr., *The New World of Health Promotion* (Sudbury, MA: Jones and Bartlett Publishers, 2010), 330.

have a root cause in the physical. Physical symptoms can be alleviated by taking medication; however, unless the whole person is treated, the actual problem still exists. Holistic healing goes beyond merely treating symptoms, and instead, uses them as a guide to address the root cause of the problem.

The Ultimate Purpose of HHM

Holistic Healing Ministry allows congregations to recover holistically from the prevalence of pain, doubt, weakness, and brokenness, teaching them to make the healing choices that will help them become Christ-like in character, equipping them to be holistic healers who perform HHM in their fields.

Therefore, the procedure of HHM is as follows.

- To help hurting people *recover* from past sins, hurts, and wrong habits.
- To *teach* them to make the healing choices that will help them become Christ-like in character
- To *equip* them to be holistic healers who perform HHM in their fields.

The ultimate goal of HHM is the *establishment of God's kingdom* (Rev. 21:1-4). Therefore, the expansion of HHM is the expansion of God's kingdom.

The Statement of Methodology

This thesis will include the following information, chapter by chapter: The first chapter is the introduction, including the statement of problems, limitations, and biblical and theological basis. The second chapter will examine the historical basis of a holistic healing by analyzing the human as a whole being and a healing ministry both in the Christian church and in South Korea. The third chapter will survey and evaluate a case study about HHM of KPCs. This study will

examine the current understandings and attitudes of the clergy and laities of KPCs on HHM. The fourth chapter will analyze the healing ministries of the local churches in South Korea on the basis of four problems: 1) healing ministry without considering the correlation between physical, emotional, spiritual healing, 2) the absence of theology of healing, 3) healing ministry as a tool of church growth, and 4) the absence of a concrete role model for HHM of local churches. The fifth chapter will suggest practical methods for HHM of the Korean local churches and incorporate Korean local churches with Korean hospitals. The sixth chapter will make a summary and conclusion.

The Review of the Literature

This thesis will refer to theoretical and practical books on HHM for local churches, whether preparing for HHM or simply interested in HHM. Particularly, these books will concretely guide many Korean churches that are eager to integrate holistic healing and reveal that HHM is essential to become a well-being church, which is the sincere request of not only many Christians, but also non-believers who have suffered from many diseases. The following are some of the main sources of the thesis:

The Review of the Literature Reference

Baker, John. *Life's Healing Choices*. New York, NY: Howard Books, 2007.

The author states that readers live in an imperfect world. They have been hurt by other people, they have hurt themselves, and they have hurt other people. He believes the Bible teaches that all of them have some form of addiction. Sin is addicting and “all have sinned.” That means all have created ungodly and unhealthy methods for handling life. The purpose of this book is

not simply to help hurting people recover from past sins and hurts, but to teach readers to make the healing choices that will help them become Christlike in character.

Crabb, Larry. *Understanding People*. Grand Rapids, MI: Zondervan Publishing, 1987.

The author, a well-known psychologist, seminar speaker, Bible teacher, author, and founder/director of NewWay Ministries, emphasizes a biblical model of *the imago Dei* through this book. For holistic healing he asserts that readers should move into the confusing realm of a darkened mind and learn what it means to let the Spirit of God renew them in their essential thinking. This book helps readers come to grips with their brokenness as God's image-bearers, and shows how they can reclaim their ability to reflect them in their growth toward maturity and healed relationships.

Evans, Abigail Rian. *The Healing Church*. Cleveland, Ohio: United Church Press, 1999.

This book, by showing how the Christian faith and the church can offer concrete solutions, encourages pastors, church members, health care professionals, and church and hospital personnel to join in partnership to revolutionize the health care system and reposition the church in its historic healing ministry. This book focuses on God's calling that health should be the agenda of the church.

Gemignani, Michael. *Making Your Church a House of Healing*. Valley Forge, PA: Judson Press, 2008.

This book brings the reader to a deeper appreciation of the central role of spiritual healing in the ministry of the church and provides some practical suggestions in identifying and removing obstacles to healing and in implementing ways to make a church a more effective house of healing.

Gibok, Kim. *The theory and practice of clinical ministry*. Seoul, Korea: Handel press, 2003.

This book is based on the firm conviction that the ultimate purpose of Holistic Healing is salvation. The author says that salvation means health and whole being in the New Testament. Salvation through Jesus Christ means no longer merely healing physical or emotional disease. Rather it means the relief of men from the sin and death. The fundamental need of humanity is not physical healing, but a spiritual relationship with God through relief from a damned condition.

Grudem, Wayne. *Bible Doctrine*. Grand Rapids, MI: Zondervan Publishing, 1999.

The author says that in the atonement Christ has purchased for us not only complete freedom from sin but also complete freedom from physical weakness and infirmity in his work of redemption. And he emphasizes that this physical healing and redemption is from the physical sickness that came as a result of the curse in Genesis 3. He concludes that the believer's complete possession of redemption from physical illness will not be complete until Christ returns and believers receive resurrection bodies.

Ogilvie, Lloyd John. *Why Not? Accept Christ's Healing and Wholeness*. Old Tappan, NJ: Fleming H. Revell Company, 1985.

This book is based on the firm conviction that Christ is the healing power of the world. What He did to provide healing, wholeness, and health in the bodies, minds, and spirits of people, during His incarnate ministry, He continues to offer through His Spirit today. He is the source of healing through medical science and through the prayers of His people. The thrust of this book is how to pray for healing for ourselves and others.

Thomas, Zach. *Healing Touch*. Louisville, Kentucky: Westminster/John Knox Press, 1994.

This book shows how clergy, friends, and congregations can reclaim the ancient practice of healing touch. The author presents biblical principles that encourage wholesome behavior and protect against unhealthy touch. This book is a welcome and much-needed guide to a body-affirming, incarnational ministry by and in the church. He is convinced that touch and anointing are part of the Scripture's attention to holistic health and cites the emphasis of Hebrew prophets and New Testament personalities on holistic health, shalom.

Tournier, Paul. *A Doctor's Casebook in the Light of the Bible*. New York, NY: Harper & Row, 1960.

The author says that medicine is a dispensation of the grace of God, who in His goodness takes pity on men and provides remedies for the evil consequences of their sin. Through this book, he not only diagnoses the symptoms of modern man's sickness, but also points out the way to the method of treatment.

Towns, Elmer. *The Daniel Fast*. Ventura, California: Regal, 2010.

The author, vice president and dean of the School of Religion at Liberty University, coaches readers through a ten-day or twenty-one-day period of renewal by means of the Daniel Fast. Through this book, the author encourages readers to consider a fast as a means for drawing closer to the Lord. He emphasizes that many people who participate in a Daniel Fast testify that they were closer to God when they fasted than any other time in their lives. This book can help many people recover holistically.

Rogers, Joyce. *The Bible's Seven Secrets to Healthy Eating*. Wheaton, Illinois: Crossway Books, 2001.

The author, the wife of Adrian Rogers who was a pastor of one of the world's largest churches, introduces readers to the world of natural foods, a world where nutrition not only provides the basic elements for life, but also becomes the basis for many of the images within the Christian life to encourage proper stewardship of God's gifts of health and life. In addition, she explains the nutritional value of natural foods and their effect upon readers' bodies.

Yancey, Philip. *Where is God When it Hurts?* Grand Rapids, MI: Zondervan Publishing House, 1990.

Through this book, the author puts readers' questions into perspective, helping them find out exactly where God really is when they hurt. This book is not an abstract speculative treatise, but a practical and helpful companion as they ask why there is such a thing as pain, is pain a message from God, how do people respond to suffering, how can they cope with pain, and how does religious faith help.

The Review of the Scripture Reference

Isiah 53:4-5

"Surely he took up our pain and bore our suffering, yet we considered him punished by God, stricken by him, and afflicted. But he was pierced for our transgressions, he was crushed for our iniquities; the punishment that brought us peace was on him, and by his wounds we are healed."

This passage refers to both the physical and spiritual healing that Christ purchased for humanity. Therefore, Christ has purchased for human beings not only complete freedom from sin but also complete freedom from physical weakness and infirmity in his work of redemption.

Isaiah 61:1-2

“The Spirit of the Sovereign Lord is on me, because the Lord has anointed me to proclaim good news to the poor. He has sent me to bind up the brokenhearted, to proclaim freedom for the captives and release from darkness for the prisoners, to proclaim the year of the Lord’s favor and the day of vengeance of our God, to comfort all who mourn.”

This passage clearly shows that the ministry of Jesus Christ is a holistic healing ministry, which encompasses both physical and spiritual healings, including deliverance from evil spirits.

2 Kings 5:1-14

Spiritual diseases and emotional diseases can bring about physical diseases and vice versa. In the Bible, Naaman did not receive his physical healing until he gave up his pride. Nothing indicates that Naaman’s physical diseases were related to his previous sins, but his physical disease could not be healed until his present sin of pride was surrendered. Sins such as pride, anger, and hatred can sometimes cause physical and emotional disease.

Daniel 1:8; 10:3

“But Daniel resolved not to defile himself with the royal food and wine, and he asked the chief official for permission not to defile himself this way” (1:8).

“I ate no choice food; no meat or wine touched my lips; and I used no lotions at all until the three weeks were over” (10:3).

The Daniel Fast is not only to cleanse the body and improve digestion, but also to consecrate a specific period of time to draw closer to God to hear from Him. Therefore, the Daniel Fast affects the participants holistically.

Acts 10:38

“How God anointed Jesus of Nazareth with the Holy Spirit and power, and how he went around doing good and healing all who were under the power of the devil, because God was with him.”

Those with the gifts of healing should realize that gifts of healing could include ministry not only in terms of physical healing, but also in terms of emotional healing. It may at times include the ability to set people free from demonic attack, for this is also called “healing” sometimes in Scripture.

Romans 5:1-5

“Therefore, since we have been justified through faith, we have peace with God through our Lord Jesus Christ, through whom we have gained access by faith into this grace in which we now stand. And we boast in the hope of the glory of God. Not only so, but we also glory in our sufferings, because we know that suffering produces perseverance; perseverance, character; and character, hope. And hope does not put us to shame, because God’s love has been poured out into our hearts through the Holy Spirit, who has been given to us.”

This passage teaches us, rightly accepted, that pain and suffering cleanses the believer from self-centeredness and gives insight into the nature of this fallen world, encouraging the follower to remember the sufferings of Christ and of others.

Romans 8:22-23

“We know that the whole creation has been groaning as in the pains of childbirth right up to the present time. Not only so, but we ourselves, who have the firstfruits of the Spirit, groan inwardly as we wait eagerly for our adoption to sonship, the redemption of our bodies.”

Jesus ministered to the whole individual. He healed people physically, emotionally, spiritually, and socially. Jesus was concerned about the whole of creation. Jesus was not the only one to consider creation as a whole. Paul revealed his view of the interconnectedness of humanity and creation in this passage.

Romans 12:1-2

“Therefore, I urge you, brothers and sisters, in view of God’s mercy, to offer your bodies as a living sacrifice, holy and pleasing to God—this is your true and proper worship. Do not conform to the pattern of this world, but be transformed by the renewing of your mind. Then you will be able to test and approve what God’s will is—his good, pleasing and perfect will.”

For holistic healing believers should move into the confusing realm of a darkened mind and learn what it means to let the Spirit of God renew them in their essential thinking, as they are admonished in this passage.

1 Thessalonians 5:23

“May God himself, the God of peace, sanctify you through and through. May your whole spirit, soul and body be kept blameless at the coming of our Lord Jesus Christ.”

This verse is a crucial text that describes holistic healing and teaches that God desires to make people whole. The terms *spirit* and *soul* and *body* read in a collective sense signify the totality of personhood.

1 Timothy 4:8

“For physical training is of some value, but godliness has value for all things, holding promise for both the present life and the life to come.”

This verse does not deny the need for exercise. Rather, it states that exercise is valuable, but it prioritizes exercise correctly by saying that godliness is of greater value.

James 1:2-4

“Consider it pure joy, my brothers and sisters, whenever you face trials of many kinds, because you know that the testing of your faith produces perseverance. Let perseverance finish its work so that you may be mature and complete, not lacking anything.”

This passage indicates that God can use sickness to draw believers closer to himself and increase in them obedience to his will. The process of healing is sovereignly controlled by Him at every point.

James 4:2

“You desire but do not have, so you kill. You covet but you cannot get what you want, so you quarrel and fight. You do not have because you do not ask God.”

Certainly, it is right to ask God for healing, and Christians should go to him with the simple request that he give physical healing in time of need. James warns that simple unbelief can lead to prayerlessness and failure to receive answers from God. But when believers pray for healing they should remember that they must pray for God to be glorified in the situation, whether he chooses to heal or not. And Christians also ought to pray out of the same compassion of heart that Jesus felt for those whom he healed.

1 Peter 2:24

“He himself bore our sins” in his body on the cross, so that we might die to sins and live for righteousness; “by his wounds you have been healed.”

This passage refers to both physical and spiritual healing that Christ purchased for believers, for Peter quotes it to refer to our salvation.

1 Jn. 1:9

“If we confess our sins, he is faithful and just and will forgive us our sins and purify us from all unrighteousness.”

Through the prayer for confession of sin, many people who suffered from problem of sin experience the forgiveness of God by His unchanging promise in this verse. Without a doubt, the healing of the spirit is the centerpiece around which all other areas of healing revolve.

Questionnaire and Interview Questions

To examine the reality of holistic healing ministries of the KPCs through the participants' perspectives and evaluations, and to measure the degree of holistic health, consisting of four categories such as physical, emotional, spiritual, and social health of the congregations of the KPCs, a thirty-five question interview survey (Appendix A) was carried out by 263 participants, including pastors, elders, deacons, and deaconesses.

Summary

There is a growing interest in Korean local churches today concerning HHM. Without a clear theory and practice for a healing ministry, some Korean churches perform in an odd way, and, conversely, other Korean churches avoid healing ministries altogether.

Korean local churches should function as holistic healing churches and a healing community by basing their ministries on a broader definition of health as wholeness, sickness as brokenness, and healers as those persons who assist the diseased toward health.

The healing ministry of Jesus Christ shows believers that it was based on the love of the wholeness of personality and was recognized as a sign of the kingdom of God. His healing ministry deals with not only their bodies but also their spirits and souls by the power of atonement and the restoration of God's kingdom. Jesus commissioned His church to continue His healing ministry under the guidance of the Holy Spirit. The church's involvement in a healing ministry is based on its historic healing ministry. Therefore, HHM is not optional but essential for both their congregations and their non-believing neighbors, as it forms an integral part of the whole life of the church.

CHAPTER TWO

HISTORICAL BASIS OF A HEALING MINISTRY

This chapter will investigate a holistic constitution of mankind historically, and through historical consideration prove that healing ministries were essential to Christian churches and should be focused on all aspects of the human including the body, mind, and soul. Likewise, this chapter will examine that historically healing ministries in South Korea were essential components of Korean local churches and were crucial to church growth.

History of a Healing Ministry in the Christian Church

Historically speaking, the early churches regarded a healing ministry as essential to the life and work of the church. Justin Martyr spoke of the gift of healing as one of the charismata still received in the church and refers to the early Christians' responsibility to care for the sick at their own expense.³⁶ Irenaeus of Lyons referred to such works of healing as "giving sight to the blind and hearing to the deaf; casting out demons; curing the lame, the paralytic and all physical ills; and raising the dead."³⁷

During the patristic period there was a strong belief in healing, although the more traditional Protestant view would refute this by contending that miraculous healing ceased with the apostolic age. Charles Harris remarks that in early times the Christian churches were referred to as "temples of healing."³⁸

³⁶ Justin Martyr, "Dialogue w/ Trypho," 39, in *The Ante-Nicene Fathers; Translations of the Writings of the Fathers Down to AD 325*, vol. 1, ed. Alexander Roberts and James Donaldson (Christian Classics Ethereal Library, on-line www.ccel.wheaton.edu).

³⁷ Irenaeus, "Against Heresies," 2.31.2, in *The Ante-Nicene Fathers; Translations of the Writings of the Fathers Down to AD 325*, vol. 1.

³⁸ Charles Gusmer, *The Ministry of Healing in the Church of England as Ecumenical-Liturgical Study* (London: Heron and Co., 1974), 39.

Deacons were designated to serve the sick and to inform the bishops to pray over them. Healing took place by prayer, invocation of God's name, signing of the cross, exorcism, laying on of hands, anointing with oil, and a visit from the bishop to a sick person's house.³⁹ In fact, the *Canons of Hippolytus* mentions the charism of healing as a qualification for being a candidate for ordination.⁴⁰

Though it is too early in the history of the church to consider this unction, most scholars agree that the earliest liturgical source for the consecration of oil for the sick is from the early third century. The oil was thought to have power to strengthen the body, the soul, and the mind.⁴¹

Although during the 300s the Church became an official healing place through the use of the charisms of the Holy Spirit, since then, healing through baptism of the Holy Spirit was often no longer expected. Healing stories were used to prove the divine origin of Christianity, but they got separated from their context and the essence of healing.

The influence of Gnostic and Manichean philosophies (300-400) taught that the material world and body was either evil or unspiritual and that the soul was essentially spiritual and good.⁴² This caused Christians to doubt the validity of a healing ministry.

Augustine, one of the great leaders of the early church, was not taught to pray for healing. Later in his *Retractions* he talked of how he experienced healing and affirmed its validity. Not

³⁹ Ibid., canon 5, 21, 24, pp. 14, 26, 27.

⁴⁰ Ibid., canon 8, p. 16.

⁴¹ Paul Bradshaw, ed., *The Canons of Hippolytus* (Bramcote, Eng.: Grove Books Limited, 1987), 14.

⁴² Bettenson & Maunder, *Documents of the Christian Church*. 3rd ed. (New York: Oxford University Press 1999), 38-41; Burns, *Theological Anthropology* (Philadelphia, PA: Fortress Press. 1981), 2; Bynum, *The Resurrection of the Body in Western Christianity, 200-1336* (New York: Columbia University Press. 1995), 26.

everyone read *Retractions*. John Cassian warned the church about the dangers of using the gift of healing, lest one lose his very soul by too much attention to healing people's bodies.

By A.D. 400, physical healing was no longer understood as an invitation to eternal wholeness, but as a distraction from it.

In the *Book of Pastoral Rule* written in Rome about A.D. 600 by Pope Gregory the Great, bodily illness is described as one more way in which God chastised his children, an idea Jesus had clearly dispelled. That is, God sent sickness and used it for His own purposes. If a person thinks his or her sickness is “sent by God,” he or she will not pray for healing. These influences undercut the Christian healing ministry.

During the Dark Ages occurring from A.D. 500 to 800, there are many fascinating stories about the use of relics and amulets of saints’ bones and fabled pieces of the cross as well as pilgrimages to the Holy Land, which underscored the profound desire to be in the presence of Christ. This shift from God to holy relics was also due to the church’s emphasis on the soul rather than the body. Since the church no longer had a principal interest in the body, the common folk turned to magic and superstition for physical healing.⁴³

During the Carolingian Renaissance in the ninth century, the sacrament became more clearly defined as its application narrowed. The first change was that the emphasis was more on the sacrament itself and less on the consecration of the oil. Anointing with oil was no longer allowed to be done by lay people. Only Bishops and priests were allowed to anoint, and only for the “healing of the soul.” The sacrament became strongly affiliated with a penitential rite and with nearness of death.

⁴³ Abigail Rian Evans, *The Healing Church*, 8.

During this period, healing ministries were replaced by elaborate rites for the dying.⁴⁴ The majority of Anglican scholars believe that the James passage does not support the late medieval theory that unction was primarily ordained for the remission of sins; rather, they believe that it was for the healing of the whole person.⁴⁵

In the later middle ages, Thomastic theology, which emphasized a hierarchy of soul, mind, and body, destroyed the sense of the unity of human nature that had hitherto existed. There occurred a divorce between salvation and health. Thomistic theology was influenced by Aristotle's closed view of the universe where the transcendent and healing miracles did not belong. Abigail said that "Duns Scotus and Thomas Aquinas were the main interpreters of anointing as the removal of the last vestiges of sin, hence "extreme" unction. Aquinas taught that extreme unction was to prepare one for immediate entrance into heaven."⁴⁶

By the Council of Trent in 1551 the church regarded the needs of the soul in conflict with those of the body, and the gulf between science and religion, medicine and the church, widened. The centrality of the sacraments continued, but the total spiritualization of unction reflected the disinterest in the body. The Council of Trent stated that it is expedient not only for the health of the soul, but also to restore the health of the body. Overall, the council adapted the spiritual sense of *sozo* rather than the physical sense, though bodily health might result from strengthening of the soul.⁴⁷ And at the Council of Trent, the Roman Catholic Church proclaimed that only

⁴⁴ Ibid., 11.

⁴⁵ Charles Gusmer, *The Ministry of Healing in the Church of England as Ecumenical Liturgical Study*, the Alcuin Club Collections, no. 56 (London: Herom and Co., 1974), 32.

⁴⁶ Abigail Rian Evans, *The Healing Church*, 12.

⁴⁷ H. J. Schroeder, trans., *The Canons and Decrees of the Council of Trent*, 14.3 (Rockford, Ill.: Tan Books and Publishers, 1978), 101.

someone in danger of death could be anointed with oil. During this century Reformers questioned the anointing of the sick for death as being unscriptural, but they offered no more effective occasion for healing.

Another interesting fact is that in 1566 doctors were required to swear that they would stop seeing a patient on the third day unless he or she had confessed their sins and had a statement signed by their confessor. Again, sickness was viewed as a punishment from God for sins, a view contrary to the message of Jesus.

The Protestant reformers' perspective on extreme unction was in sharp contrast to that of the Roman Catholic Church. The reformers associated anointing and laying on of hands with the Roman Catholic Church's practice of the sacrament of extreme unction. Since the reformers wished to separate themselves from many of Rome's practices, the rite fell into disuse.

John Calvin, the Swiss reformer, taught Cessationism, which holds that supernatural healing ended with the death of the last apostle. Calvin wrote, "The heavenly physician treats some more gently but cleanses others by harsher remedies."⁴⁸ He recognized creation as good but emphasized some separation between body and spirit. This view about Christian healing had a great influence on most evangelicals, including Baptists, and Presbyterians, and caused unbelief in the power of Christian healing prayer.⁴⁹

Since the beginning of the Renaissance, the Christian church has been heavily influenced by the philosophical ideas of Renes Descartes and his dualistic anthropology of humans.⁵⁰ As a

⁴⁸ John Calvin, *Institutes of the Christian Religion*, 2 vols., ed. John T. McNeill, trans. Ford Lewis Battle (Philadelphia: Westminster Press, 1960), 1:706.

⁴⁹ *Ibid.*, 1:35-39.

⁵⁰ Fancher, R.E., *Pioneers of Psychology* (London: W.W. Norton & Company Ltd, 1996), 22-32.

result of Descartes' dualistic anthropology, the Christian church began to view man as composed of two separate parts—a body and a soul—that had limited interaction with one another.⁵¹ As the centuries progressed and Descartes' ideas influenced society, the western world reflected a dualistic anthropology and became segmented accordingly.⁵² Most notably, society became divided between the disciplines and professions that focused on the material body, generally medicine and the sciences, and those that focused on the soul, historically the church and spiritual institutions.⁵³ Illustrating this is the Renaissance belief that the mind, or soul, influencing the body began to be regarded as unscientific.⁵⁴ In combination with Cartesian dualism, other influences impacted the western departure from the holistic model of human beings. John Locke's empiricism put emphasis on concrete verifiable sensory experience as necessary for knowledge and thus provided a foundation for truth centered on observation.⁵⁵ Locke affirmed that no knowledge can exist outside of sensory experience. His ideas were combined with earlier experimental practices to form an observational method that dominated the scientific disciplines, which informed the theory and practice of medicine. The sciences experimented with and researched topics that could be observed and confirmed by others. As a result, empirical science and Western medicine became increasingly reductionistic, naturalistic and materialistic. Therefore, healing by the Christian church fell into disuse as the church yielded

⁵¹ Baum, A., GatcheL R.J., Krantz, D.S., *An Introduction to Health Psychology* (Third ed.) (New York, NY: McGraw Hill, 1997), 5; Bernard & Krupat, *Health Psychology: Biopsychosocial Factors in Health and Illness* (New York: Harcourt Brace College Publishers, 1994), 1-7.

⁵² *Ibid.*, 3-7.

⁵³ *Ibid.*, 5.

⁵⁴ *Ibid.*, 5.

⁵⁵ Fancher, R.E., *Pioneers of Psychology*, 34-53.

healing to the medical profession. In addition to the medicine/religion split, the breakup of the monasteries as a result of the Reformation ultimately shattered the caring system for the sick.

In the eighteenth century, a number of voluntary hospitals were set up in London and some of the outlying cities. The line of demarcation between the church's care of the soul and science's responsibility for physical health was firmly drawn in the seventeenth and eighteenth centuries and continued into modern times.⁵⁶

The materialistic focus of medicine and the sciences was further validated and stimulated in the mid 1800's by Charles Darwin's theory of evolution. Darwin's theory asserted that humans and animals shared one common ancestor which was the origin of all species.⁵⁷ Darwin hypothesized that as the ages passed species evolved from this ancestor based on the principle of natural selection, which is described by Fancher, "different environments inevitably and constantly impose a natural selection on their inhabitants, disproportionately favoring certain kinds of individuals to survive and propagate their kind."⁵⁸ Thus, natural selection is based on the idea that nature propagates traits or features that are most adaptive given the environment.

Darwin's ideas helped to further separate the chasm between the body and the soul in the west. The implications of his theory directly contradicted the widely held Scriptural view of creation as set forth in the book of Genesis. The scientific disciplines then began to be regarded not only as naturalistic but also as contradictory to Scripture and the teachings of the church. Prior to Darwin, science and the church had been rarely in conflict with one another. In fact

⁵⁶ Morton Kelsey, *Healing and Christianity* (New York: Harper & Row, 1973), quoted in Parsons, *The Challenge of Christian Healing*, 148-49.

⁵⁷ *Ibid.*, 202-205.

⁵⁸ *Ibid.*, 201.

many western philosophers and scientists throughout the ages had affiliated themselves with the church including Darwin, Descartes and Locke. Furthermore, most academic institutions were also affiliated with the church.

Yet, as a result of the scientific communities' acceptance of Darwin's theory, many in the church became increasingly separated from and antagonistic towards science. The main reason for this change was likely due to science's seemingly incompatible view of humanity's commonality with animals, which seemed to draw a contrast to Christian Dualistic teaching and a Substantial view of the *imago Dei*.

The split between the body and the soul in the western world and the material reductionism of humanity remained until the 1900s.

However, at the beginning of the 20th century, the new Pentecostal movement, called the "First Wave," drew participants from the Holiness movement and other movements in America that already believed in divine healing. The first Pentecostals in the modern sense appeared in Topeka, Kansas, in a Bible school conducted by Charles Fox Parham, a Holiness teacher and former Methodist pastor. Pentecostalism achieved worldwide attention in 1906 through the Azusa Street Revival in Los Angeles, led by William Joseph Seymour.⁵⁹ According to witnesses who wrote about them, all kinds of sick people were healed during the Azusa Street meetings. Some of the participants would eventually minister extensively in this area. By the year 2000, this wave had grown into 65 million Pentecostals in 740 Pentecostal denominations, including the Assemblies of God and the Church of God in Christ.

⁵⁹ Synan, Vinson, *The Origins of the Pentecostal Movement* Holy Spirit Research Center, Oral Roberts University. 14 Jun. 2009.

The charismatic renewal wave, called the “Second Wave,” was larger than the first wave, with 175 million people in all the major denominations—Catholic and Protestant. Agnes Sanford, a key figure in the Charismatic Movement in the United States during the 1960s through to about 1980, is considered to be one of the preeminent spiritual healers of the twentieth century. These Christians who have had a charismatic experience have mostly stayed (75 percent) within the parent churches to form organizations that host annual conventions; however, some 25 percent have left to join other “Spirit-filled” churches or to found independent charismatic churches. These now number around 100,000, loosely organized into 3,700 denominations or other groupings.⁶⁰

John Wimber founded Vineyard Christian Fellowship, which now numbers hundreds of churches, and has had a major impact on many parts of the Christian world—England, in particular.⁶¹ Wimber discovered the key relationship between the ministry of healing and evangelism in his restless search for truth and wrote an influential book, *Power Healing*.⁶² Also in this era, Jack Coe and A. A. Allen, the frontiers of the Third Wave—the first two waves being the Pentecostal renewal, which started new denominations, and the charismatic renewal, which touched the mainline denominations, were faith healers who traveled with large tents for large, open-air crusades.

Another extraordinary phenomenon in this Third Wave is the great success of the Toronto Airport Christian Fellowship, which in the late 1990s became the number one tourist

⁶⁰ Francis MacNutt, *The Nearly Perfect Crime* (Grand Rapids, MI: Chosen, 2005), 204.

⁶¹ *Ibid.*, 201.

⁶² *Ibid.*, 201.

attraction in Toronto, Canada. Thousands of visitors, including many pastors, came to see and experience healing, basking in the intense presence of God.⁶³

Oral Roberts, who was one of the most famous people in spiritual gifts movement after 1960s,⁶⁴ continued with faith healing until the 1980s. For more than thirty years, he held more than three-hundred major healing crusades, and he laid hands on more than one million people.⁶⁵ Oral Roberts was a pioneer televangelist who attracted a vast viewership. His successful use of television as a medium to gain a wider audience led others to follow suit. His ministry had a worldwide impact second only to Billy Graham. His divine healing ministry called for prayer to heal the whole person — body, mind and spirit.

History of a Healing Ministry in South Korea

Ironically, the first healing ministry conducted in Presbyterian churches was founded by “cessationist” Western missionaries who believed miracles had ended. The first Presbyterian missionaries in Korea, who arrived in the late nineteenth century, held to the Calvinist doctrine of cessationism and believed that the period of miracles had ended with the apostolic age. Yet from the beginning of missionary activity, a healing ministry was widely conducted and was an integral part of spreading the new faith. One of the main reasons for this discrepancy was that the missionaries in Korea emphasized native initiatives to propagate Christianity. Because of this policy, the Koreans quickly took over the work of converting and church building. And they began to challenge the doctrine of cessationism.

⁶³ Ibid., 201.

⁶⁴ Vinson Synan, *In the Latter Days, Trans.*, International Theology Research Center (Seoul: Yein, 1995), 144.

⁶⁵ Inn Suk Jung, *Recommendation for Expanding Pentecostal Movement in 21st Century Korea* (Daejeon: Korea Pentecostal Church, 2001), 39-40

Horace G. Underwood, the first official Presbyterian missionary to Korea, was also a believer in healing. He recounted an experience of healing through prayer while he was out in the field. After sending away the shaman who had been unsuccessful in healing a dying patient, Underwood and two other believers prayed and fasted for three days and three nights, and the life was saved.⁶⁶ The entire family converted as a result, and the shamanistic ritual objects around the house were destroyed. Underwood reported that afterward there were “many instances where the power of the Spirit and Word has freed the poor people from demon worship.”⁶⁷

Healing ministry was common in the early years of the Korea mission and was crucial to church growth. Richard Baird, a missionary, wrote: “In the days when Christianity was in the ‘cutting edge’ stage of its penetration of Korean society, exorcism was an important church activity. Instances almost identical with New Testament casting out of demons accompanied the starting of many—perhaps most churches in the early days.”⁶⁸

Whatever the personal views of the missionaries may have been on the issue of healing, they recognized its power as an instrument of conversion. In spite of the official doctrine of cessationism, few were the voices that protested the phenomenon.

A healing ministry in early Korean Protestantism reached its peak under a dynamic revivalist Presbyterian preacher named Kim Ik-tu. Part of a group of Korean ministers who fanned the flames of revival in the 1920s and 1930s, Kim established his fame based on “praying

⁶⁶ Candy Gunther Brown, *Global Pentecostal and Charismatic Healing* (USA: Oxford University Press, 2011), 272.

⁶⁷ Horace G. Underwood, *Prayer Cure* (Korea: Korea Mission Field 3.5, 1907), 68–69.

⁶⁸ Martha Huntley, *Caring, Growing, Changing: A History of the Protestant Mission in Korea* (New York: Friendship Press, 1984), 123-24.

for the sick and demon-possessed.”⁶⁹ One hagiography lists his accomplishments as follows: “He led 776 revival meetings, preached 28,000 times, and healed 10,000 persons. Under the influence of Kim’s preaching, about 288,000 persons became Christians, 185,000 Korean Won was offered, and 200 became ministers. He built 150 new churches and 120 preschools while he enlarged 140 churches and 100 schools.”⁷⁰

The healing ministry of Kim Ik-tu is noteworthy not only for its role in spreading the Christian faith in Korea but also its doctrinal impact. At the height of his popularity, a group called the Miracle Verification Association launched an investigation into the healings and concluded that the miracles were authentic.⁷¹ Subsequently, they submitted a report to the presbytery, leading to debate over the provision on cessationism in the church constitution. In 1923, the Korean Presbyterian Church officially abandoned the doctrine—which is today still recognized by most non-Korean North American Presbyterians. A healing ministry represented a powerful common ground between the old and the new for the Korean converts.

Following the Korean War (1950–1953), Christianity was virtually eradicated in Communist North Korea. However, in South Korea it began a new period of growth and development. Numerous revivalist healers attracted large followings. The postwar decades provided fertile ground for the growth of Christianity and new religions. It was in this context that Pentecostalism also started to take off in Korea.

⁶⁹ Harry A. Rhodes, ed., *History of the Korea Mission, Presbyterian Church, U.S.A.* (Seoul: Chosen Mission Presbyterian Church, U.S.A., 1934), 1:289, 235, 290

⁷⁰ Yong Gyu Park, *Biography of Ik Du Kim* (Seoul: Life Book, 1991), 84-117. Trans by Moontak Oh, *The Impact of Korean Revival Movement on Church Growth of Korean Evangelical Christianity in 1903–1963* (Ph.D. diss., Southwestern Baptist Theological Seminary, 2000), 126–127

⁷¹ Min Kyong-bae, *History of the Christian Church in Korea* (Seoul: Taehan Kidokkyo Ch’ulp’ansa, 1991), 354.

Finally in the 1960s, Pentacostalism was able to gain a significant following, and its growth in South Korea has become almost synonymous with David Yonggi Cho and his Yoido Full Gospel Church. Pastor David Cho is a prototypical leader of the Korean charismatic pastors in the modern era. His church, the Yoido Full Gospel Church, which was started in a poverty-stricken area in 1958, has explosively grown at the same pace as the Korean economy. Pastor Cho, who was strongly influenced by Sam Todd, an American Pentecostal healing minister, appealed with prosperity theology to the Korean people, who were struggling with economic and political hardship. Through services at the church and revivals that attracted people from far beyond the confines of the church, claims of cures from various diseases and illnesses spread throughout the city. Today main healing ministries conducting the Korean local churches are as follows:

Divine Healing Ministry Focusing on Physical Healing

Divine healing ministry constitutes an integral part of the worship experience for members of Yoido Church and for Korean pentecostals in general. In a typical Sunday service at a Pentecostal church, the minister leads the congregation in praying aloud over individual requests for healing. The prayers are usually highly emotional and often involve weeping and flailing of arms. The cacophony of voices is punctuated by the minister's repeated shouts of "Hallelujah!" or "O Lord!" The minister and deacons may approach and pray with individual members. As they do so, they may perform a laying on of hands or clap one hand on the back or shoulder of the person for whom they are praying. At times, they may also directly address the spirits of disease and illness and command them to leave the afflicted. The services often produce immediate claims of healing. The ranks of healers are not restricted to the clergy but are

open to anyone who has received the gift of healing. Such persons are often invited into private homes to pray for the sick and carry out healing.

Divine healing is also practiced in secluded mountain prayer retreats designed for extended periods of prayer and fasting. Scattered throughout the country and interdenominational in character, the retreats are often advertised with personal testimonials of healing that have occurred on the premises.

Since the 1980s, the Pentecostal influence has manifested itself more broadly in the Charismatic movement that has swept both Protestant and Catholic congregations alike. As a result, divine healing, speaking in tongues, prophecy, and other Pentecostal practices have spread far beyond traditional denominational boundaries.

However, excessive emphasis on divine healing can neglect holistic change, the more important ministry guided by the Holy Spirit, of mankind as a whole being and focus on only physical disease without caring for emotional disease, and spiritual disease.

Inner Healing Ministry Focusing on Emotional Healing

In South Korea, from the early 1980s, inner healing⁷² ministry was introduced through Youth With A Mission (YWAM). Some foreign speakers, such as Jack Winter, began to talk about inner healing ministry, particularly to Korean young people. It drew big interest from people who had emotional and spiritual problems caused by historical, cultural, and social factors because the traditional healing ministry widely practiced in Korean churches deals only with surface-level problems.

⁷² The idea of inner healing is simply that we can ask Jesus Christ to walk back to the time we were hurt and to free us from the effects of that wound in the present.

This methodology, developed for a para-church setting did not work well for the established Korean church. Confession in public is the main methodology of the inner healing ministry of YWAM. However, confession in public sometimes caused a lot of criticism.

Inner healing ministry is absolutely necessary for the Korean church, and the theory and the method of inner healing ministry should be shared in order to deal with emotional problems. However, many Korean local churches have conducted inner healing ministry, focusing only on emotional healing for their healing ministries and sometimes using unbiblical methods for inducing inner healing.

Summary

The historical Christian church has traditionally embraced a holistic doctrine of human beings which affirms the importance and interconnectedness of all aspects of the human beings including the body and soul. However, Gnostic and Manichean philosophies, which taught dualism, caused Christians to doubt the validity of the healing ministry and many churches to emphasize the soul rather than the body. As a result, the Christian church has increasingly focused on what was defined as the soul and spiritual matters and left the body and physical matters to be dominated by medicine and the scientific disciplines. However, throughout the twentieth century, the Pentecostal, charismatic, and Third Wave movements encouraged evangelical churches to take interest in the ministry of holistic healing.

The history of healing in South Korea reveals that healing ministries were common in the early years of the Korea mission and were crucial to church growth. Healing in early Korean Protestantism reached its peak under a dynamic revivalist Presbyterian preacher named Kim Ik-tu. David Cho, Kim's successor, is a prototypical leader of the Korean charismatic pastors in the

modern era. Therefore, as Stanger says, Christian history proves that healing should be “an authentic ministry of the church.”⁷³ Historically speaking, a healing ministry was one of the major reasons for the dramatic growth in South Korea.

⁷³ Frank B. Stanger, *God's Healing Community* (Nashville, TN: Abindon Press, 1978), 115.

CHAPTER THREE
A SURVEY OF HEALING MINISTRIES OF
THE PRESBYTERIAN CHURCHES IN SOUTH KOREA

This chapter will investigate the current reality of HHM ministered to the KPCs, examine holistic health conditions of the congregations of the KPCs, and identify which domain of health – physical, emotional, or spiritual – KPCs are currently interested in.

The Purpose of This Survey

The purpose of this survey is as follows.

- To examine the reality of a holistic healing ministries in the KPCs by means of the participants' perspective and evaluation.
- To measure the degree of holistic health consisting of four categories, such as physical, emotional, spiritual, and social health of the congregations of the KPCs.
- To examine the congregations' recognition about essential issues in relation to HHM such as correlation between physical, emotional, and spiritual healing, healing and God's sovereignty, healing prayer, healing and medicine, divine healing, and team ministry with hospitals as an effective method of HHM.

Research Questions

In order to fulfill the purpose of this study, four sets of research questions were raised.

Set 1

Questions in this section consists of general contents, such as gender, age, church position, years practicing the faith, denomination, location of the church, and number of church participants.

This section is very important as an evaluation basis for analyzing the data.

Set 2

Questions in this section deal with opinions of the congregations of the Korean Presbyterian churches for their churches' HHM. Through this section, the researcher can recognize 1) the current understandings and attitudes of the Korean Presbyterian churches' clergy and laity in relation to HHM, 2) the comparison between a church needed ministry and a congregation needed ministry, 3) the degree of interest in a healing ministry of their churches, and 4) the opinions for a team ministry with a hospital chaplain.

Set 3

Questions in this section deal with a self-evaluation of the congregations of the KPCs for their holistic health condition. Through this section, the researcher can recognize 1) a holistic health condition of the congregations of the KPCs through a holistic health score divided into physical, emotional, spiritual, and social health, and 2) their interest areas and weak points among each of the holistic health divisions.

Set 4

Questions in this section deal with the congregations' recognition about healing and their opinions about healing ministries of the Korean Presbyterian churches in South Korea. Through this section, we can acknowledge their recognition regarding 1) the origin of disease, 2) correlation between physical, emotional, physical healing, 3) healing prayer, 4) healing and medicine, 5) the problem of a healing ministry for Korean Presbyterian churches, and 6) a team ministry with a hospital.

Population and Sample (Subjects)

Pastors, elders, deacons/deaconesses, and laypersons of the KPCs are the population for

this study. In order to select samples, the researcher contacted many pastors of the KPCs, students of theological seminaries, and a hospital chaplain of Sam Hospital, either by e-mail or by phone, and later sent the questionnaire to them.

This survey selected the congregations of the KPCs in both big and small cities out of congregations from several denominations as samples. Many sample churches were selected from Seoul city and neighboring areas of South Korea. Pastors attending the Presbyterian Theological Seminary in Kwangnaroo and Korean pastors attending Liberty Theological Seminary in Virginia participated in this survey.

Data Collection

I contacted the senior pastors and assistant pastors of the KPCs either via e-mail or by phone to explain the purpose of the questionnaire. They checked the content and asked for the meaning of the survey and the anticipated results. I then sent the questionnaire to the pastors for approval.

I suggested that each church administer this questionnaire either Sunday, 21 August 2011 or Sunday, 28 August 2011. I suggested that my uncle, a professor of the Presbyterian Theological Seminary in Kwangnaroo, administer this questionnaire between Monday, 22 August 2011 and Friday, 26 August 2011.

I asked them to distribute the questionnaire with the following instructions: The questionnaire must be distributed to the congregation immediately after Sunday worship and must be completed immediately after being distributed. Due to their situation, however, some churches distributed the questionnaires on different occasions, such as the midweek Bible study or prayer meeting. Pastors of these churches wanted their congregations to reflect on the worship

service after worship, so they considered administering the questionnaire immediately after the Sunday worship service inappropriately.

I visited classrooms of Liberty Theological Seminary between Monday, 15 August 2011 and Friday, 26 August 2011 to ask the Korean pastors personally to answer the questionnaires, so I collected all the data there myself. My father, who lives in Seoul, Korea collected all the data, and sent them by express mail.

The clergy and laity of the KPCs were the subjects of this study. The 350 questionnaires were distributed by my pastor friends ministering to KPCs. Of the 350 questionnaires distributed, 292 were returned. Some of them were not answered completely; therefore, I decided that the questionnaires that had less than thirty questions answered out of forty were invalid. I excluded the questionnaires of participants attending different denominations. Using this standard, of the 292 responses, 238 copies were considered valid. Twenty-five copies collected from Korean Presbyterian pastors attending Liberty Theological Seminary in Virginia were added to the existing 238 copies, totaling 263.

Analyzing the Data

The questionnaire data was processed by use of statistics. The agreement/frequency of surveyed laypeople revealed current practices of healing ministry. The results allowed me to compare the current degree of interest in a healing ministry of the KPCs with their congregations. Details will be further examined in chapter 4.

General Contents of Participants

General contents of 263 participants attending the KPCs are as follows.

DIVISION	CONTENTS	NUMBER OF RESPONSES	PERCENT (%)
Gender	Male	142	54.0
	Female	121	46.0
Age	Below 30	59	22.4
	30-39	95	36.1
	40-49	67	25.5
	Over 50	42	16.0
Church Position	The clergy	106	40.3
	Elder, Decon/Deconess	100	38.0
	The laity	57	21.7
Years Practicing the faith	Below 10	15	5.7
	10-19	45	17.1
	20-29	86	32.7
	Over 30	117	44.5
	denomination	Presbyterian	263
Location of church	Big city	220	83.7
	Middle & small city	43	16.3
Number of church	Below 300	71	27.0
	300 - 1000	61	23.2
	1000 - 3000	91	34.6
	Over 3000	40	15.2
Total		263	100.0

Table 3.1 General contents of participants

As shown in table 3.1, the general contents of the participants are as follows: the gender of the 263 participants consisted of men 54.0% (142) and women 46.0% (121). An age range of participants was between 30-49 (61.6%). The position of the participants was the clergy (40.3%), lay-leader including elders, deacons, deaconesses, senior deacons (38.0%), and lay-people (21.7%). The majority of the participants have practiced the faith over 20 years (77.2%). The denomination of all the participants was Presbyterian. The locations of their churches were big cities (83.7%), and smaller cities (16.3%) in South Korea. The size of participants' churches is 1000 – 3000 (34.6%), below 300 (27.0%), 300-1000 (23.2%), over 3000 (15.2%).

The Reality of HHM of the KPCs

Lack of interest in healing ministry of the KPCs

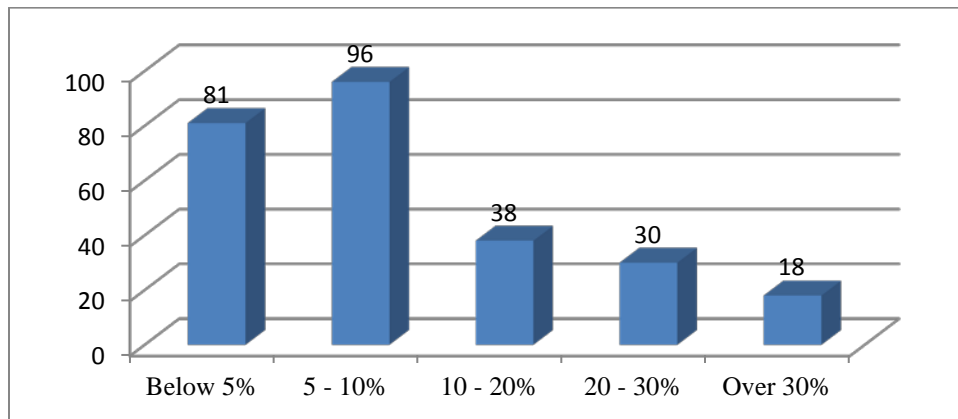


Figure 3.1 How often did you hear sermons on holistic healing throughout the past year?

67.3% of the 263 participants responded that the frequency of their pastors' sermon about healing for one year was below 10%. Through the results of the survey, the writer confirmed that pastors of the KPCs are rarely interested in healing for their wounded congregations.

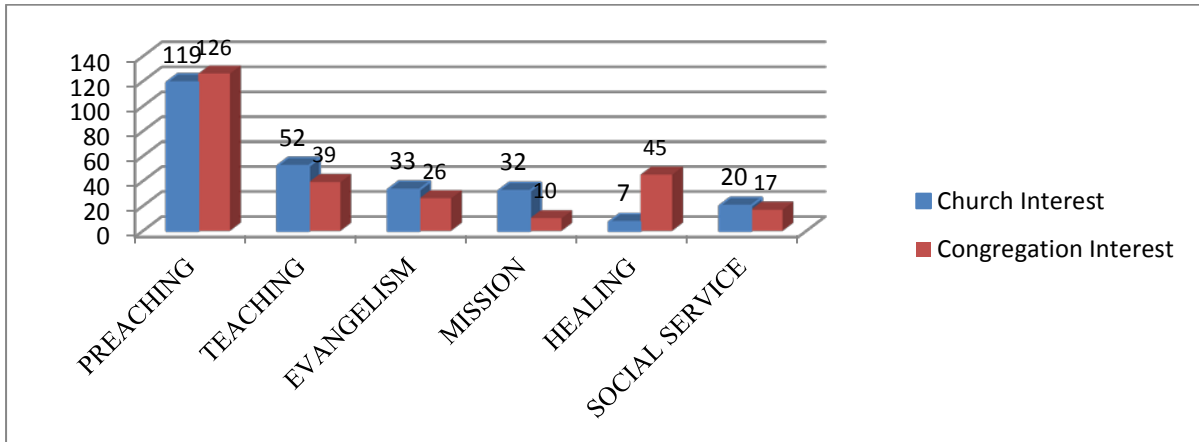


Figure 3.2 A comparative analysis of the interest level of a healing ministry of the Korean Presbyterian churches and their congregations

As shown in figure 3.2, the rank of the most needed ministry of the KPCs shows that the preaching ministry gained the highest interest at 45.2%, followed by the teaching ministry at 19.8%. But the healing ministry gained only 2.7%.

However, the rank of the most needed ministry of their congregations shows that preaching ministry gained the highest interest at 47.9%; second, the healing ministry gained 17.1%. Through a comparison of the interest level of a healing ministry of the KPCs (2.7%) and their congregation (17.1%), we can recognize that in spite of the need and demand for a healing ministry by their congregations, the KPCs are rarely interested in healing ministry.

Evaluation about Holistic health level of the congregations of the KPCs

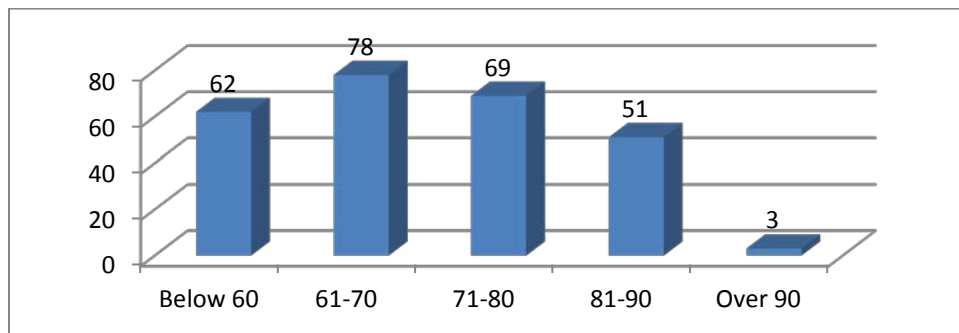


Figure 3.3 Holistic health score of the congregations in basis on participants' opinion

Figure 3.3 shows that 53.3% of 263 participants graded D about the holistic health condition. The result of the survey concludes that the holistic health level of the congregations of the KPCs is very low.

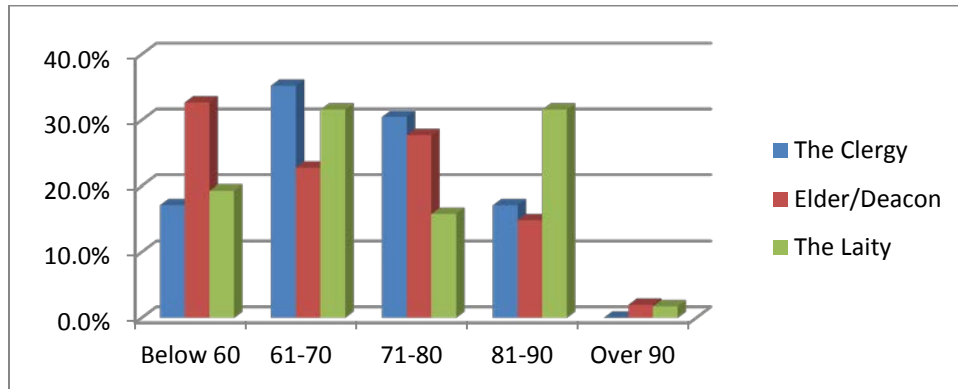


Figure 3.4 Holistic health score of the congregations by evaluation of the clergy, elders, deacons, and the laity

As shown in figure 3.4, 52.4% of the clergy evaluated the holistic health score of their congregations as below 70, while 56.5% of elders, deacons/deaconesses rated a holistic health score below 70. However, the laity rated holistic health score higher than the other two groups.

The Manager of Holistic Health of the Congregations of the KPCs

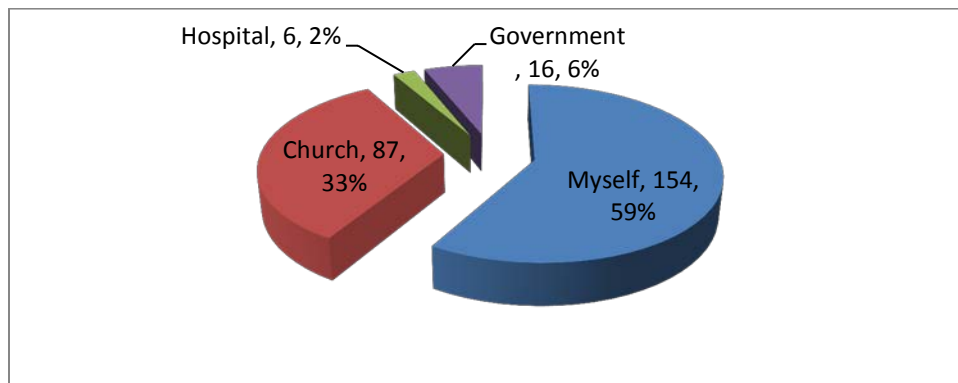


Figure 3.5 Who takes charge of holistic health in the congregations of the KPCs?

About the responsibility for holistic health, 59% of 263 participants responded that participants themselves take responsibility for holistic health. Particularly noticeable was that 33%

of 263 participants responded that churches take responsibility for holistic health.

The Responses of the KPCs about a Physical, Emotional, Spiritual Health

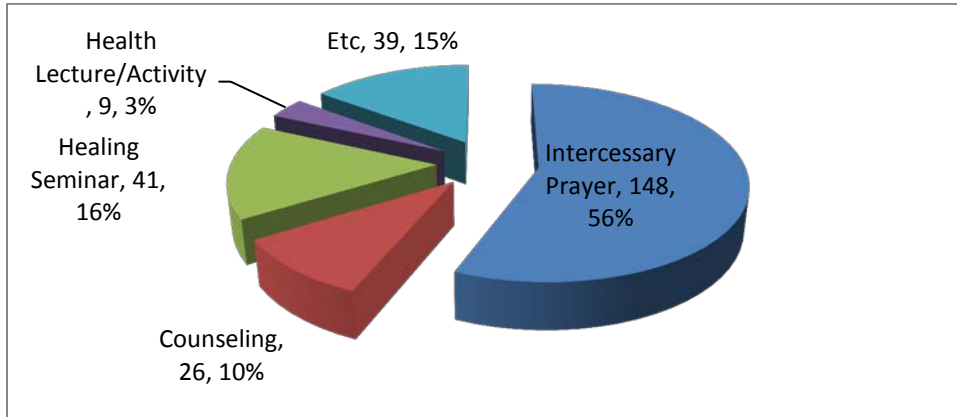


Figure 3.6 Which programs is focusing on attending churches for a holistic health?

As shown in figure 3.6, 148 (56%) of 216 participants responded that their churches have been focusing on intercessory prayer for the holistic healing of their congregations. However, most churches rarely emphasize a program for the physical health of their congregations, such as a health lecture or activity.

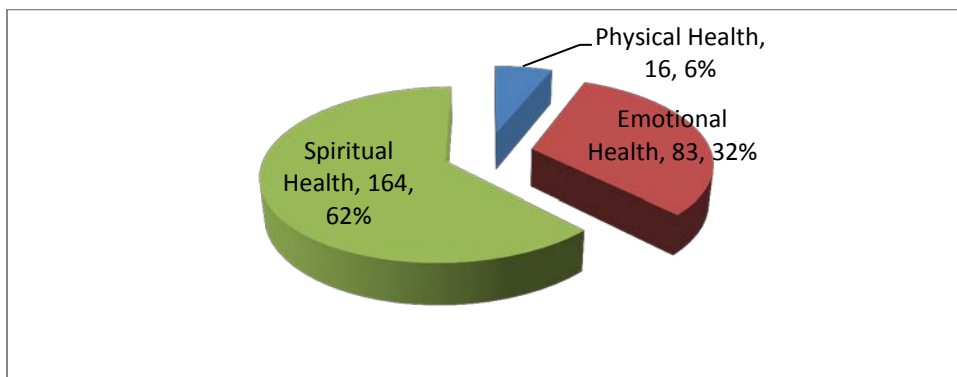


Figure 3.7 What is the weakest part of the congregations among physical, emotional, and spiritual health?

Sixty two percent of the participants answered that they are not healthy spiritually. This response was related to the response of the next figure about interest in emotional health.

The relationship between the KPCs and the Hospital Chaplains

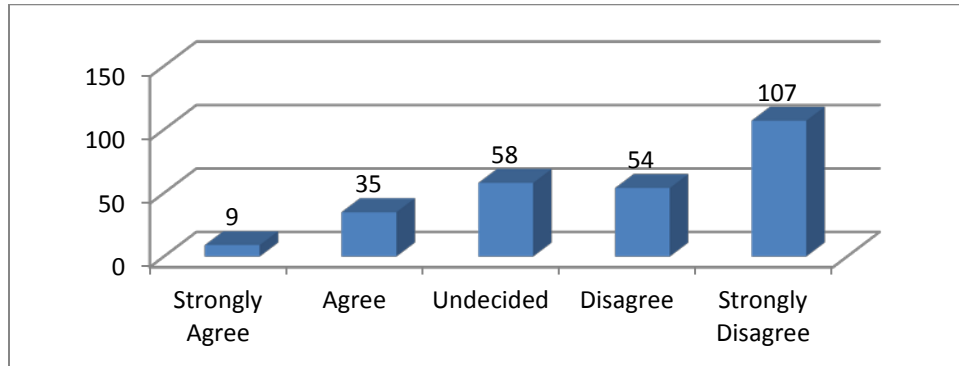


Figure 3.8 Do you agree that your church has a relationship with the hospital chaplain?

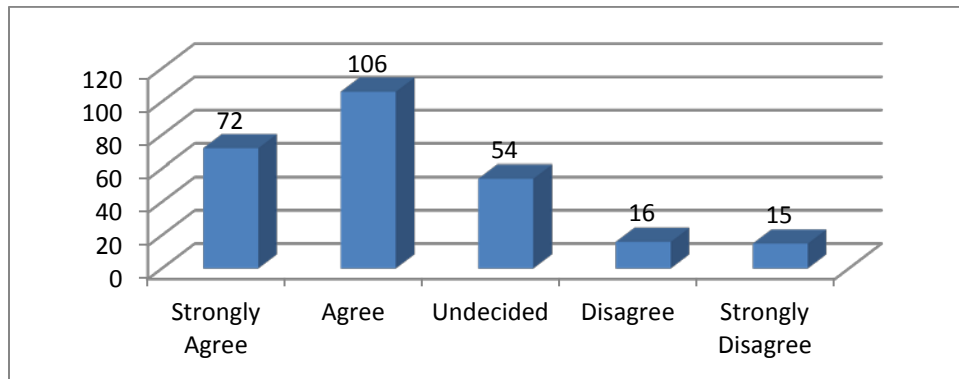


Figure 3.9 Do you agree that your church should have a relationship with the hospital chaplains in a neighborhood for caring for their congregations holistically?

Figure 3.8 shows that 67.7% of the participants responded that their churches did not have a relationship with the hospital chaplains in a neighborhood. This means that many of the KPCs have not conducted an effective healing ministry for their hospitalized congregants.

Figure 3.9 shows that although most of the congregations of the KPCs needed cooperation with the hospital chaplains in a neighborhood for holistic healing, most of the KPCs were rarely interested in this cooperation system. Details will be further examined in chapter 5.

The KPCs as a hospital

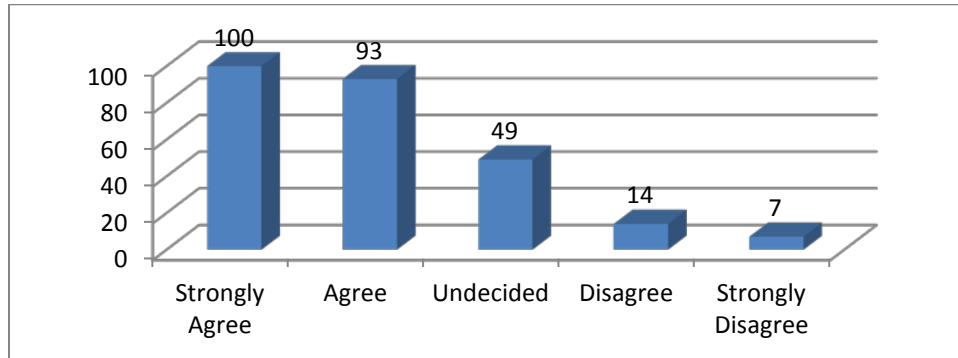


Figure 3.10 Do you agree that your church should be the role of a hospital for your ailing church members?

As shown in figure 3.10, 73.4% of the participants agreed that local churches should partner with a hospital and chaplains for healing their congregations. Disagreements were only 21%.

Self-evaluation of the Congregations of the KPCs about Holistic Health Condition

Holistic Health Condition of the KPCs' Congregations

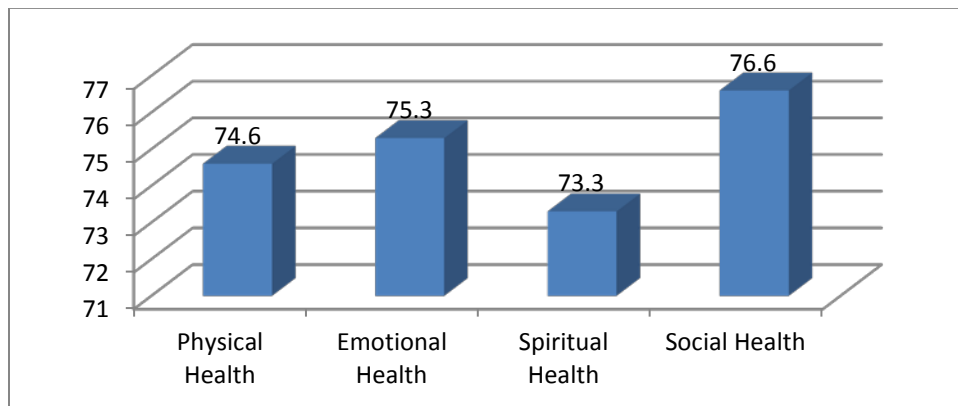


Figure 3.11 The average holistic health score of the participants

Figure 3.11 shows that the holistic health score of the congregations of the KPCs was low in general. The average score of holistic health was 75. The scores of both physical health and emotional health were almost similar. The score of spiritual health was 73.3, the lowest point.

The point of social health is 76.6, the highest point. However, the gap between the highest and the lowest was not wide.

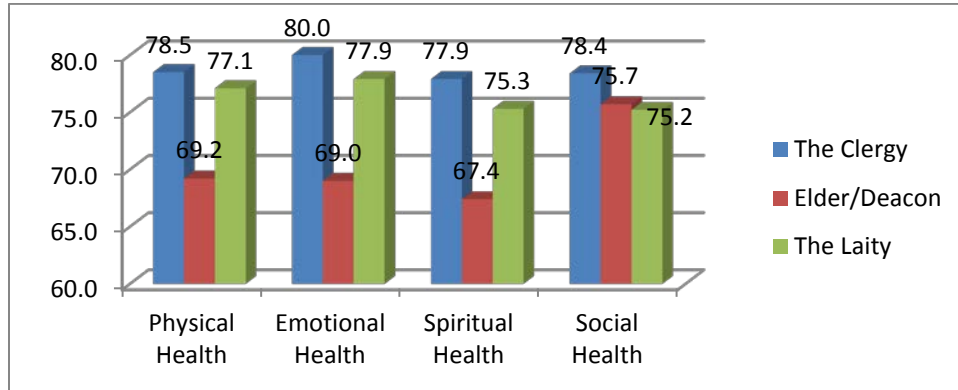


Figure 3.12 The average of a holistic health score of the clergy, elder, deacon, and laity

Figure 3.12 shows that the holistic scores of the clergy were higher than the average score (physical health 74.6, emotional health 75.3, spiritual health 73.3, and social health 76.6) of all participants. On the other hand, unexpectedly, the scores of elders & deacons were lower than the average score of all participants. Considering that the faith period of 75 percent of elders & deacons is more than 20 years, such a low score is a very serious problem.

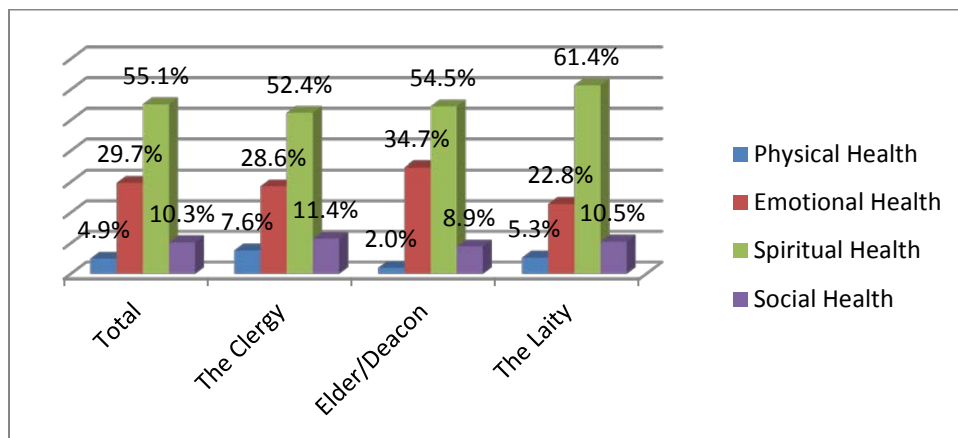


Figure 3.13 Which are you mainly interested in for your holistic health?

As shown in figure 3.13, the order of interest of the participants for holistic health is spiritual health, emotional health, social health, and physical health. In particular, the degrees of

interest in emotional health of elders and deacons were higher than those of the clergy and the laity. Considering their lowest emotional health score, this is a natural result. Unfortunately, all participants were rarely interested in physical health.

The KPCs' Emotional Diseases

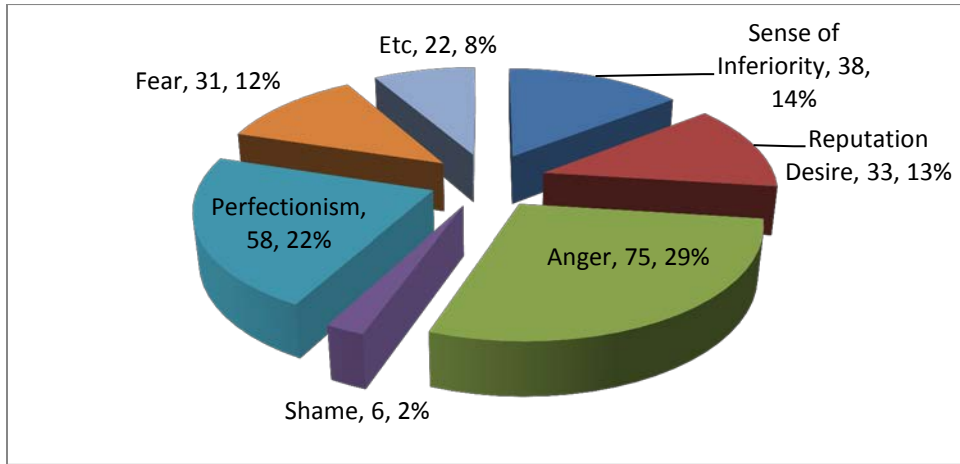


Figure 3.14 Which of the following is the most serious emotional disease?

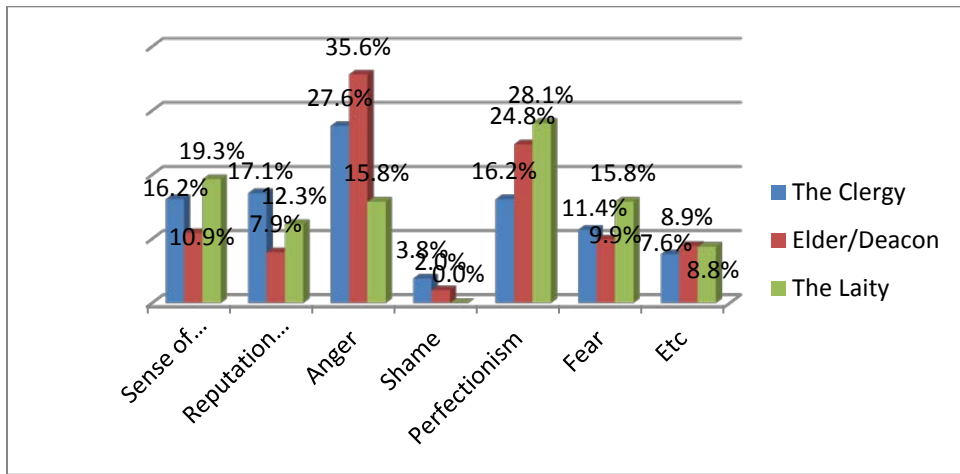


Figure 3.15 Which of the following is the most serious emotional disease? (Position)

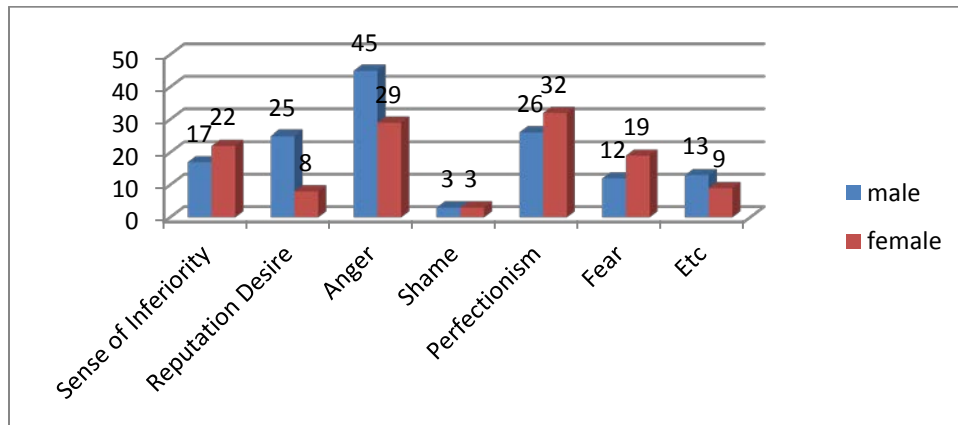


Figure 3.16 Which of the following is the most serious emotional disease? (Gender)

As shown in figure 3.14, the participants responded that the most serious matter among emotional diseases was anger. The next thing was perfectionism. Figure 3.15 points out two important results as follows: First, elders and deacons were suffering more from anger than the clergy, and the laity. Second, while the most serious emotional disease of the clergy, elders, and deacon/deaconess was anger, the most serious emotional disease of the laity was perfectionism.

Particularly noticeable is that 27.6% of the clergy who should be taking care of the congregation suffering from anger also have been suffering from anger. Many clergy of the KPCs are angry because they are being abused by unhappy and mean-spirited parishioners. They also feel angry because they are often not supported by their congregations, are not being trained in seminaries to manage the real world of the parish, are being accused and sued, sometimes unjustly, for moral malfeasance, and are expected to run the church as a small business. Furthermore, they feel the loss of respect and authority which once accompanied the pastoring role. And they resent the double standard which allows laity to have the rewards of success, while pastors are typically not rewarded for faithful pastoring. Accompanying this anger is a despairing belief that such conditions are not likely to change, for the church is not listening to

its pastors anymore. Therefore, the clergy are not only healing ministers, but also a target of HHM.

As shown in figure 3.16, male participants suffered the most from anger (31.9%). On the other hand, female participants suffered the most from perfectionism (26.2%).

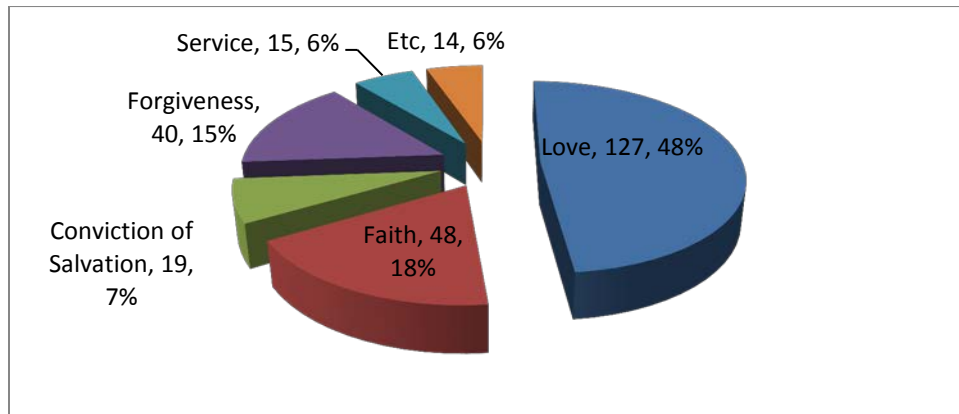


Figure 3.17 What is most needed for emotional health?

Figure 3.17 showed that the biggest need for emotional and spiritual health was love, and next was faith. It is the quest for what might be called a well-ordered heart. The balance paradigm assumes that the church’s problem is external—a disorder in peoples’ schedules, jobs, seasons of life. However, the truly significant disorder is internal. Augustine suggested that to have a well ordered-heart is to love.⁷⁴ In particular, every believer should have love toward men as well as God: “Love is the active care for others,” manifested in Jesus own life.⁷⁵

The Congregations’ Recognition and Opinion about Healing Ministries of the KPCs

Correlation among Physical, Emotional, and Spiritual Healing

⁷⁴ Augustine, *The City of God*, Great Books, vol. 18 (Chicago: Encyclopedia Britannica, 1952), 416.

⁷⁵ Bill Donahue, “It Has To Be a Ministry Which Builds up a Community: An Interview with Ministry and Theology,” *Ministry and Theology*, (Feb, 2003), 62.

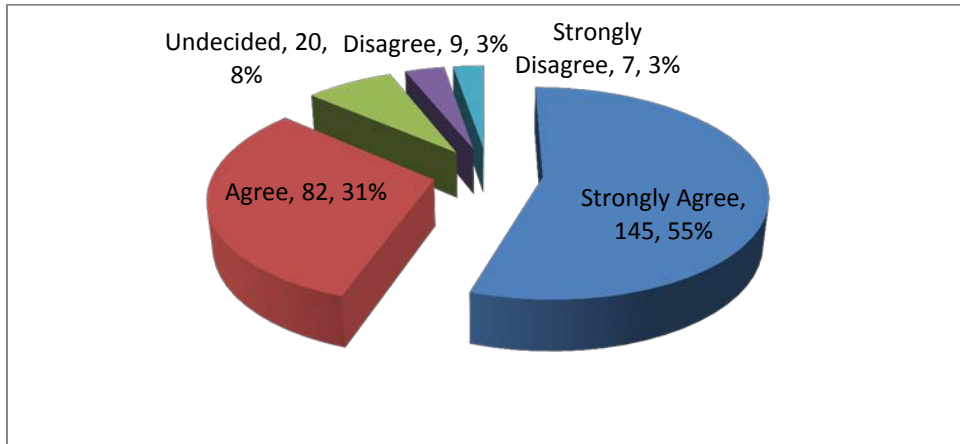


Figure 3.18 Do you agree that physical health is related to emotional health and spiritual health?

As shown figure 3.18, 86% of the participants agreed that physical health is related to emotional and spiritual health. Nevertheless most congregations of local churches rarely focus on physical health. Details will be further examined in chapter 4.

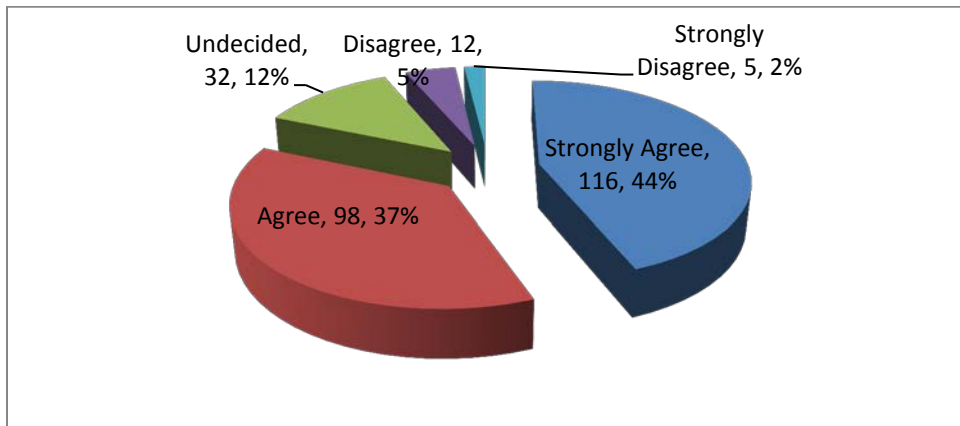


Figure 3.19 Do you agree that healing prayer is related to physical healing?

As shown in figure 3.19, 81% of the participants agreed that healing prayer is related to physical healing. Therefore, most KPCs have been focusing on healing prayer, particularly intercessory prayer, for physical healing as shown in figure 3.6.

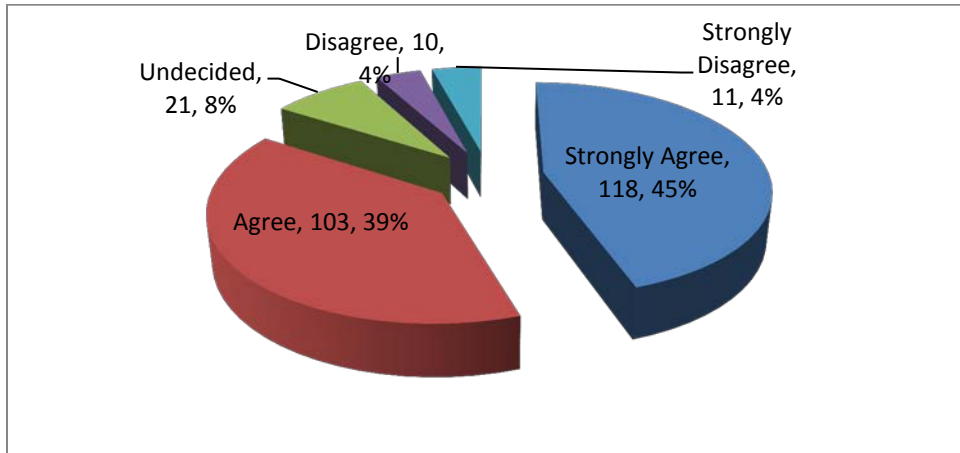


Figure 3.20 Do you agree that despite faithful healing prayer, physical healing does not happen?

As shown in figure 3.20, surprisingly, 84% of the participants agreed that despite faithful healing prayer, healing cannot happen. This question has to do with God’s sovereignty. The plain fact is that God does not always say yes to every prayer (though everyone usually expects Him to do so). Paul prayed repeatedly that his “thorn in the flesh” might be removed, however, God said no (2 Cor. 12:7-9). Instead, He promised compensating grace. Believers should be sensible enough and humble enough to recognize His sovereignty in the realm of prayer for healing. Details will be further examined in chapter 4.

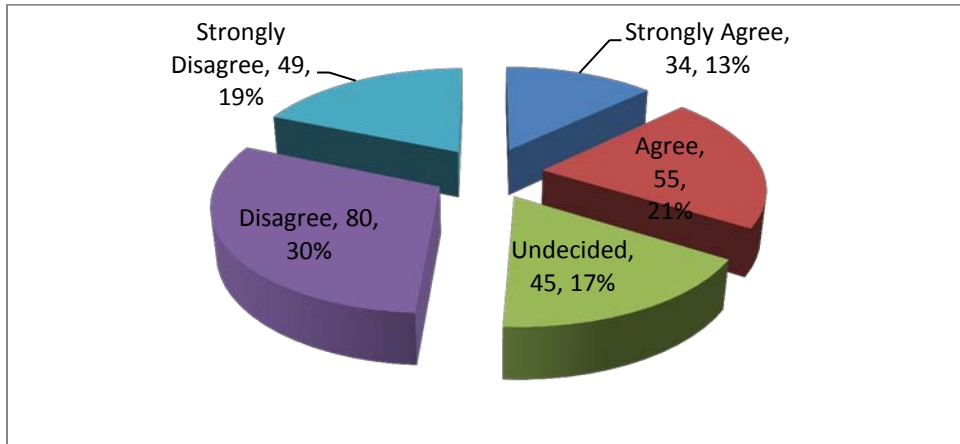


Figure 3.21 Do you agree that spiritual health guarantees emotional and physical health?

Only 34% of the participants agreed with this question. Although spiritual health is related to physical and emotional health, spiritual health cannot guarantee physical and emotional health. Therefore, the KPCs should emphasize not only spiritual health, but also physical and emotional health. Details will be further examined in chapter 4.

The Cause of Physical Disease

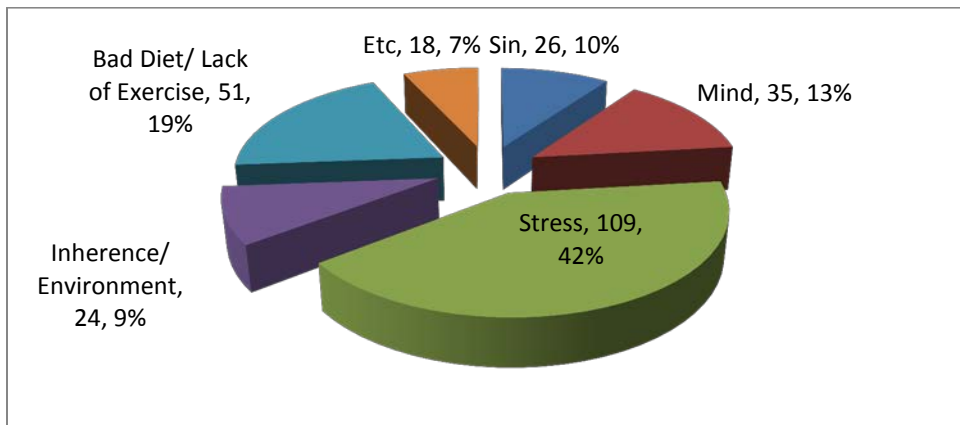


Figure 3.22 What do you think is the cause of physical disease?

As shown in figure 3.22, 42% of the participants answered that the cause of physical disease was likely a result of stress. Many congregants of the KPCs encounter stress on a daily basis because their circumstances are not always ideal. Emotional health and stability are

interrelated with physical health. In particular, the emotional wounds and unforgiving hearts that cause their mental illness can also cause physical sicknesses. With the demand of today's world, many congregants of the KPCs face increased pressure, which leads to an imbalanced lifestyle, dehumanization, and physical and emotional problems. In such a situation, they often lose purpose in their lives.

The Solution for Emotional Disease

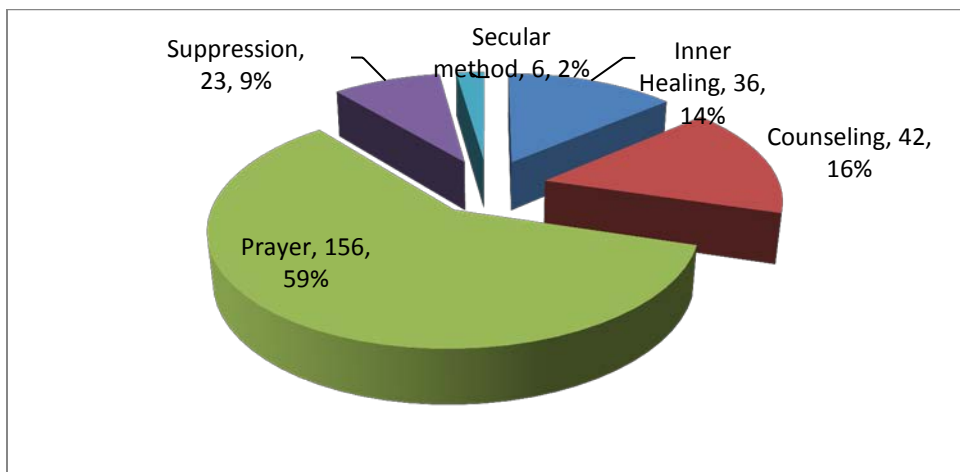


Figure 3.23 What is your solution for emotional disease?

Figure 3.23 showed that 59% of the participants responded that the solution of emotional disease was prayer.

Correlation between Healing and Medicine

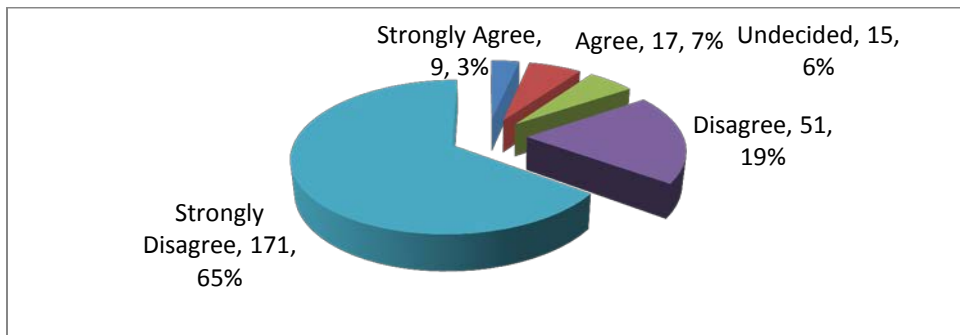


Figure 3.24 Do you agree that you should quit to medicine for effective result of healing prayer?

Figure 3.24 showed that 84% of the participants disagreed that they must quit using medicine for healing prayer.

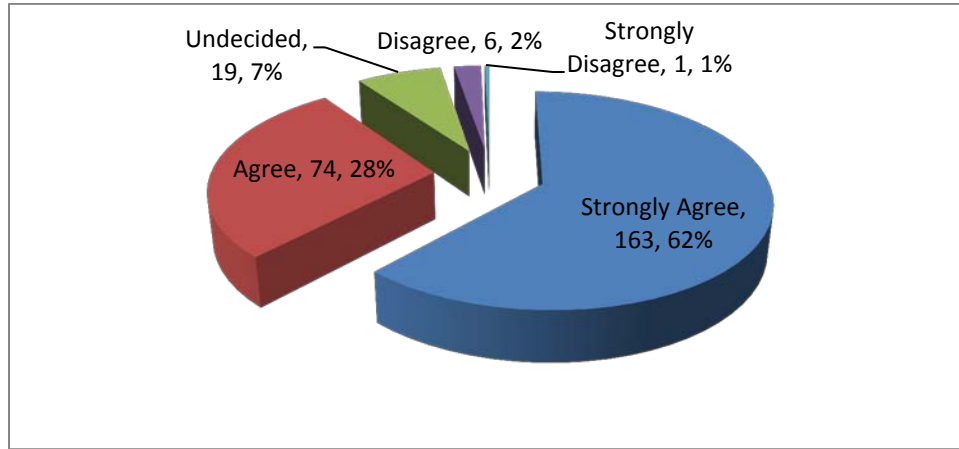


Figure 3.25 Do you agree that we should respect medicine as a general grace of God?

As shown in figure 3.25, surprisingly, 90% of the participants responded that they should respect medicine as a general grace of God. This question is a very debatable theological topic. Details will be further examined in chapter 4.

The Problems of Healing Ministries of Local Churches in South Korea

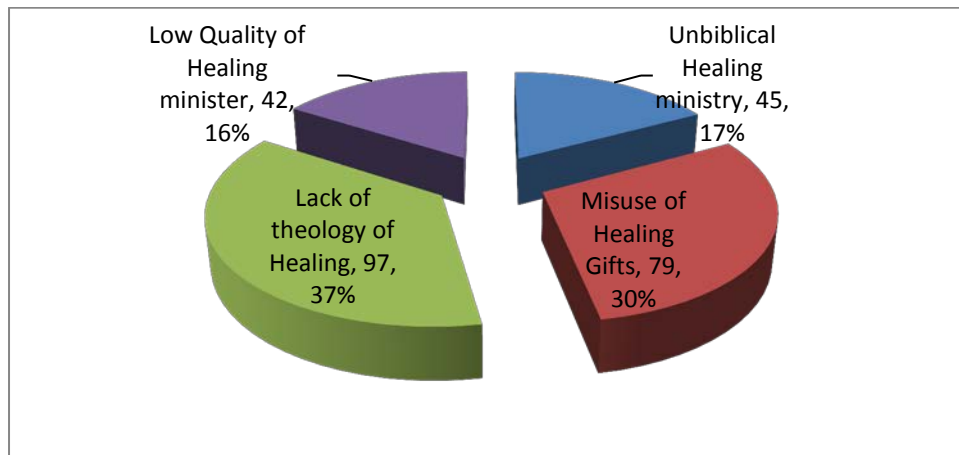


Figure 3.26 What is the biggest problem of healing ministries of local churches in South Korea?

As shown in figure 3.26, 37% of the participants responded that the biggest problem of healing ministries of local churches in South Korea is lack of theology of healing. The second

biggest problem is the misuse of healing gifts. Because an unbiblical healing ministry results from a lack of theology of healing, this survey concludes that 54% of the participants regard a lack of theology of healing as the biggest problem of healing ministries of the KPCs. Details will be further examined in chapter 4.

Summary

This chapter disclosed the current understandings and attitudes of the clergy and laity of KPCs toward holistic healing ministry. The results of the survey confirmed that in spite of much need for healing ministry of their congregations, the KPCs are rarely interested in healing ministry; and as a result, the holistic health level of the congregations of the KPCs is very low. And healing ministries of many KPCs has been totally spiritualized and its physical dimension has been lost. The next chapter will reveal an evaluation of the major findings of the study, summarizing the problems of KPCs' healing ministries as four categories.

CHAPTER FOUR
AN ANALYSIS OF HEALING MINISTRIES OF
THE PRESBYTERIAN CHURCHES IN SOUTH KOREA

An analysis of the survey for HHM of the KPCs present four major problems about healing ministries for the KPCs as follows: 1) A lack of interest in healing ministry, 2) a healing ministry without considering the correlation among physical, emotional, and spiritual healing, 3) the absence of theology of healing, and 4) the absence of concrete role model for HHM.

Lack of Interest in Healing Ministry

Today many of the KPCs rarely regard the healing ministry as their main ministry. They keep focusing on preaching, teaching, and evangelism ministries. As shown in figure 3.2, only 2.7% of the KPCs regard a healing ministry as their most needed ministry. The degree of interest of the KPCs for healing ministry was much lower than any other ministries such as preaching (45.2%), teaching (19.8%), evangelism (12.5%), mission (12.2%), and social service (7.6%).

Moreover, many pastors of the KPCs rarely preach about healing to their congregations. According to figure 3.1, the frequency of their pastors' sermons about healing for one year was below 10%. Such a low percentage of sermons about healing indicates that most pastors did not touch their congregations' heart emotionally. If their pastors' sermon touched the congregations' heart, then the congregations might feel the pastors' sermon as one about healing.

The reasons why many of the KPCs are rarely interested in healing ministry are as follows.

Firstly, many of the KPCs are focusing not on the qualitative well-being of their congregations, but quantitative, numerical church growth. Although church growth is accompanied by a maturity of their congregations, many of the KPCs have focused on

quantitative church growth through preaching, teaching ministries, and evangelism. Unfortunately, even though the KPCs accomplished quantitative growth, they failed to take care of the holistic health of their congregations. As shown in figure 3.11, low holistic health score such as physical health scores (74.6), emotional health scores (75.3), spiritual health scores (73.3), and social health scores (76.6) of the congregations of the KPCs proves this truth.

Secondly, many of the KPCs are feeling uncomfortable about integrating a healing ministry because many senior pastors of the KPCs regard a healing ministry as divine healing focusing on physical healing through the laying of hands, and spiritual healing through prayer for deliverance. However, they do not consider themselves healers who have such healing gifts. They think that only special people who have healing gifts from God can provide a healing ministry. Some of them look enviously at healing ministers because they believe that they do not have healing gifts from God. They dare not begin a healing ministry. As a result, a healing ministry cannot be the primary focus of ministry in churches. In spite of the needs of the majority of the congregants in their churches, the negative attitude of senior pastors can be a barrier for healing ministry.

Finally, many of the KPCs are avoiding healing ministry because they fear abuse or misuse of healing ministries. The reason for abuse or misuse of the healing ministry is the healing ministers' poor knowledge about biblical healing. The reason for a pastor's fear of the KPCs is that they did not learn biblical healing which can discriminate a sound healing ministry on the basis of the Bible or not. Unfortunately, only a few theological seminaries teach students who will be pastors and leaders healing based on the Bible. This causes many pastors of the KPCs to ignore their responsibilities and privileges for healing ministry. On the contrary, a

biblically unprepared healing ministry easily proceeds to an unbiblical healing ministry, such as psychological, hypnotic, mystical methods without sound biblical basis. Therefore, pastors of the KPCs should have clear knowledge about biblical healing and perform Christ's charge to heal his churches.

Healing Ministry without Considering the Correlation

Among Physical, Emotional, and Spiritual Healing

KPCs as a part of the body of Christ should provide holistic healing ministry for the diseased who are suffering physically, emotionally, and spiritually. However, many of the KPCs have not conducted a well balanced and synchronous healing ministry for the body, mind, and soul as a whole being. Presently, believers who belong to KPCs attend charismatic meetings and are influenced by them. Some of them became interested in the movement and left their churches to join charismatic churches. On the other hand, many pastors of KPCs still tend to present spiritual healing, the sanctification of people's souls, and try to settle all problems spiritually by evaluating their congregations through a measure of faith. In contrast, other KPCs often neglect emotional, spiritual, and social disease, which are related to physical disease, by focusing on only the physical disease. These overemphases on the physical alone are not desirable for the holistic healing of their congregations. Therefore, considering mankind as a whole being, the KPCs should care for their congregations holistically.

Figure 3.22 showed that a half of the participants agreed that spiritual health does not always guarantee emotional and physical health. This response means that not only spiritual health, but also emotional and physical health are needed for holistic health. Therefore, the leaders and congregations of the KLPCs should make a constant effort to support and encourage physical, emotional health, and spiritual health for themselves and their communities at large.

Today many non-Christians in South Korea need to receive healing for their emotional wounds. Their broken relationships with family members, friends, and others make their lives more difficult than ever. These broken relationships cause not only emotional wounds, but also physical disease. For instance, if someone is worried, his or her stomach ties up in knots, his or her muscles tense, and he or she bites his or her fingernails. Mental or spiritual perceptions create emotional responses, which in turn encourage bodily reactions.

In many cases, KPCs think that people with physical and emotional problems are beyond their ability and send them to doctors or professional counselors. Because many of the KPCs fail to embrace peoples' problems holistically and deal with their needs, some of their congregations are attracted to charismatic churches, which stress divine healing. In response to this situation, the KPCs must proclaim that the Church is the place where people, non-Christians as well as Christians, are able to experience true healing. The KPCs, as a part of the body of Christ, should respond to these situations and provide the healing power needed for peoples' souls, minds, and bodies.

David Seamands advises that many preachers do not recognize the reason some people continue to struggle with their emotional problems:

We preachers have often given people the mistaken idea that the new birth and being "filled with the Spirit" are going to automatically take care of emotional hang-ups. A great crisis experience of Jesus Christ, as important and eternally valuable as this is, is not a shortcut to emotional health. It is not a quickie cure for personality problems.⁷⁶

⁷⁶ David Seamands, *Healing for Damaged Emotions* (Colorado Springs, Colorado: Cook Communications Ministries, 1981), 12

Because many people suffer from emotional wounds due to dysfunctional relationships with others, they need to receive special healing for emotional wounds for their further spiritual growth. In short, wounded hearts and wicked hearts need to be addressed separately.

Emotional diseases often affect a relationship with God. For instance, emotionally wounded people often hold anger towards those who have hurt them. They tend to repay evil with evil.⁷⁷ As a result, they not only increase evil but also allow themselves to be controlled by it. They allow the sins of others against them to cause them to sin through unforgiveness too. Moreover, their sins disturb their relationship with God. Thus, a close association between people's emotional wounds and their relationship with God exists.

Even though the congregations think that physical health is closely related to emotional health and spiritual health, the ministries of the KPCs for physical health are insignificant. The result of Figure 3.6, which indicates that “only 3% of the KPCs have physical health programs such as health lectures or health activities for their congregations,” proves the truth. Many of the KPCs do not teach their congregations principles for physical health such as diet, exercise, rest, hygiene, and encourage them to take care of their bodies. Such neglect for physical health causes illness as the natural result. Paul said, “For physical training is of some value, but godliness has value for all things, holding promise for both the present life and the life to come.”⁷⁸ The verse does not deny the need for exercise. Rather, it states that exercise is valuable, but it prioritizes exercise correctly by saying that godliness is of greater value. Approximately 9.5% of the U.S.

⁷⁷ David Seamands, *Wounds That Heal* (Downers Grove, IL: InterVarsity, 2003), 96.

⁷⁸ See 1 Timothy 4:8

population has a diagnosable mood disorder in a given year.⁷⁹ There is a vast body of literature which describes the positive effects of physical activity on the depressive symptomology of mood disorders.⁸⁰ In a recent literature review investigating the effectiveness of physical activity as an alternative treatment for antidepressant medication, the authors reported that although there is a need for additional research with greater methodological strength, the current research is generally supportive of the positive effects of exercise on depression in adults with depressive symptomology.⁸¹ A recent study found that an exercise routine was comparable to the antidepressant medication “sertraline” in treating depression.⁸² Exercise has been shown to provide a significant therapeutic benefit for major depressive disorders, in particular, when the exercise routine is continued over time.⁸³ A longitudinal study revealed that individuals who were not depressed at baseline and reported a low activity level were at a significantly greater risk for depression at follow-up than were those who reported high levels of activity at baseline. This remained true after adjustments for physical health, socioeconomic status, life events, social

⁷⁹ Kessler R.C, Chiu W.T., Dernier O., Walters E.E. (2005). *Prevalence, severity, and comorbidity of twelve-month DSM-IV disorders in the National Comorbidity Survey Replication (NCS-R)*. *Archives of General Psychiatry*, 62, 617-27.

⁸⁰ Brosse, A. L., Sheets, E. S., Lett, H. S., & Blumenthal, J. A. (2002). *Exercise and the treatment of clinical depression in adults: Recent findings and future directions*. *Sports Medicine*, 32, 741-760.

⁸¹ Phillips, W.T., Kiernan, M., & King, A.C. (2003). *Physical Activity as a Nonpharmacological Treatment for Depression: A Review*. *Complementary Health Practice Review*, 8, 139-152.

⁸² Blumenthal, J.A., Babyak, M.A., Doraiswamy, P.M., Watkins, L., Hoffman, B.M, Barbour, K.A, Herman, S., Craighead, W.E, Brosse, A.L., Waugh, R., Hinderliter, A. & Sherwood, A. (2007). *Exercise and Pharmacotherapy in the Treatment of Major Depressive Disorder*. Department of Psychiatry and Behavioral Sciences, Duke University Medical Center.

⁸³ Babyak, M., Blumenthal, J.A., Herman, S., Khatri, P., Doraiswamy, M., Moore, K., Craighead, E.W., Baldewicz, T.T., & Krishnan, K.R. (2000). *Exercise treatment for Major Depression: Maintenance of Therapeutic Benefit at 10 Months*. *Psychosomatic Medicine*, 62, 633-638.

supports, and other health habits.⁸⁴ Research has shown a negative correlation between physical activity and risk for depression as a low amount of physical activity is associated with a greater likelihood of depression.⁸⁵

Spiritual diseases and emotional diseases can bring about physical diseases and vice versa. In the Bible, Naaman did not receive his physical healing until he gave up his pride (2 Kings 5). Nothing indicates that Naaman's physical diseases were related to his previous sins, but his physical disease could not be healed until his present sin of pride was surrendered. Sins such as pride, anger, and hatred can sometimes cause physical and emotional disease.

The Absence of a Theology of Healing

Through an interview with Kookminilbo, a Christian daily newspaper, On You Kim (the director of the International Institute for holistic healing counseling) pointed out that healing gifts which took place mainly in the house of prayer bring about not only healing in the absence of the theology of healing, but also inappropriate beliefs such as mysticism, shamanism, rather than holistic healing. This causes the faith and gospel to deteriorate.⁸⁶

The most serious issue of the problems of healing ministries in South Korea is the absence of a theology of healing. Figure 3.26 show that 54% of the participants believe that the absence of a theology of healing is a major problem. It is difficult to find a theology of healing, which is established on the basis of the Bible. The reason why many pastors hardly preach about healing is that they barely know what biblical healing is. This is not just a personal problem for

⁸⁴ T.C. Camacho et al., "Physical Activity and Depression: Evidence from the Alameda County Study," *American Journal of Epidemiology* 134 (1991): 220-231.

⁸⁵ M.E. Farmer et al., "Physical Activity and Depressive Symptoms: The NHANES I Epidemiologic Follow-up Stud," *American Journal of Epidemiology* 128 (1988): 1340-1351.

⁸⁶ See www.kukinews.com/ Feb, 24, 2009 (accessed by November, 2, 2011)

pastors but is caused by a lack of research from theologians about Bible based, sound healing. Therefore, they are busy trying to shift the responsibility to others or criticize unconditionally without correcting unbiblical and abnormal healing methods under the direct or indirect influence of false healings that come from sources other than the biblical source, such as psychological, hypnotic, mystical methods.

Overemphasis on a healing ministry without making a church healthy, intellectually, emotionally, and spiritually brings about many conflicts and disputes among healing ministers. Therefore, when churches begin a healing ministry, having enough prayer time and building resolute biblical foundations are an essential, conditional precedent.

Otherwise, a healing ministry causes not only conflict and hurt, but also division between congregants, in the worst-case-scenario. Moreover, those who have not experienced healing feel frustration, caused by a sense of alienation and exclusion from God's love. Pastors' overemphasis on a healing ministry diverges from the essence of ministry, emphasizing material and commercial faith, and alienating the poor and powerless from their churches.

Theologians should establish the biblical base about healing not through criticism, but through biblical research. Today, in the view of non-believers, absurd things under the veil of healing sometimes happen in big churches and houses of prayer. The KPCs desperately need a sound theology of biblical healing that can diagnose this phenomenon.

In many cases, the starting point of healers' healing ministries is their own experiences of healing. Most healers emphasize their subjective experiences. They rarely accept different opinions. However, the Christian experience should be in the framework of Christian theology that is based on the Bible. In other words, the healing ministry is interpreted not by their own

interpretation on the basis of their subjective experiences, but in the light of the Bible and Christian tradition. Building the theological framework is the responsibility of the theologians. In particular, the absence of a theology of healing causes a deterioration of healing ministries as a means for their own interests by misunderstanding the ultimate goal of a healing ministry. This is not only a personal issue, but further social issue, introducing anti-Christianity.

Gi Seok Yeom points out that the essence of the problem of a healing ministry is healing ministers. He asserts that the corruption of healing ministers results from the fact that they do not obey and give glory to God, the true healer, but reign over their followers with charismatic absolute power. In addition, when their denominations make this an issue, they easily create a new denomination and continue to their healing ministries.⁸⁷ Important topics in relation the theology of healing are discussed below.

Prayer and Medicine

According to the result of the survey about the relationship between medicine and healing prayer, as shown in figure 3.25, 84% of the participants believe that taking medicine does not stand in contradiction to divine healing. As shown in figure 3.25, surprisingly, 90% of the participants responded that they should respect medicine as a general grace of God. They believe that taking medicine is not against the will of God because God created medicine for human goodness. They have no prejudice toward medicine. When they get sick, they see doctors and take medicine if necessary. They recognize medical science as a means of healing grace.

The relationship between prayer for healing and the use of medicine and the skill of a physician has been a very controversial and sensitive topic. About this important and sensitive

⁸⁷ Gi Seok Yeom, *What is Healing* (Seoul, Korea: Kuran Publisher, 2002), 176-177.

problem Wayne Grudem suggests his opinion as such: “Certainly we should use medicine if it is available, because God has also created substances in the earth that can be made into medicine with healing properties. Medicines thus should be considered part of the whole creation that God considered ‘very good’ (Gen. 1:31). We should willingly use medicine with thankfulness to the Lord, for ‘The earth is the Lord’s and the fulness thereof’ (Ps. 24:1).”⁸⁸

In addition, he says that “there may be many times when an illness is not putting us or others in immediate danger, and we decide to ask God to heal our sickness without the use of medicine simply because we wish for another opportunity to exercise our faith and give him glory.”⁸⁹

He emphasizes that in fact, when medicine is available and we refuse to use it, then it seems that we are wrongly “forcing a test” on the Lord our God. This is similar to the case of Satan tempting Jesus to jump from the temple rather than walking down the steps. Where ordinary means of getting down from the temple (the steps) are available, it is “forcing a test” on God to jump and thereby demand that he perform a miracle at that exact moment. To refuse the use of effective medicine, insisting that God perform a miracle of healing instead of healing through the medicine, is very similar to this.⁹⁰

God is against us when we depend only on physicians, but if our primary dependence remains on God, we may seek medical help in peace, knowing that we are in God’s hands and that he will rightly direct the physicians. Medicine and physicians are not the object of faith, but

⁸⁸ Wayne Grudem, *Systematic Theology*, 1064.

⁸⁹ *Ibid.*, 1065-1066.

⁹⁰ *Ibid.*, 1065-1066.

the instruments of healing. No matter what the means, God is the source of all healing. God uses all means for our healing—prayer, medication, surgery— and our faith in God can work as a means in itself.⁹¹

Paul Tournier said that “the vocation of medicine is a service to which those are called who through their studies and the natural gifts with which the Creator has endowed them. Therefore, medicine is a dispensation of the grace of God, who in His goodness takes pity on men and provides remedies for the evil consequences of their sin.”⁹²

God’s Sovereignty about Healing

God frequently heals the diseased today, and it is very possible that they will be healed; however, they are still living in an age when the kingdom of God is “already” here but “not yet” fully consummated. Therefore, in the midst of physical healing, God may, in his compassion, respond instantly with complete healing because he is the Lord. At other times he may heal gradually. Still, he is the Lord. Sometimes in his sovereign will, he does not heal.

In each individual case, it is God’s sovereign wisdom that decides the outcome, and the role of the diseased is simply to ask him and to wait for an answer, whether “yes” or “no” or “keep praying and wait.”⁹³ When people are in the middle of prayer for healing, they might resent any suggestion that God wants them to obey; however, as they continue to attach to him, they gain insight into his heart, and they learn to obey out of profound gratitude.⁹⁴

⁹¹ Leslie D. Weatherhead, C.B.E., “Present-Day Non-Medical Methods of Healing,” in *Religion and Medicine*, 57-58.

⁹² Tournier Paul, *A Doctor’s Casebook in the Light of the Bible* (New York: Harper & Row, 1960), 215.

⁹³ Wayne Grudem, *Bible Doctrine*, 418-419.

⁹⁴ Tim Clinton & Joshua Straub, *God Attachment* (New York: Howard Books, 2010), 216.

In particular, they must realize that not all prayers for healing will be answered in this age. Sometimes God will not grant the special “faith” (Jas. 5:15) that healing will occur, and at times God will choose not to heal because of his own sovereign purposes. In these cases, people must remember that although believers experience the “sufferings of this present time” and although they “groan inwardly as we wait for... the redemption of our bodies” (Rom. 8:18, 23); nonetheless, “we know that in everything God works for good with those who love him, who are called according to his purpose” (Rom. 8:28). This includes working in their circumstances of suffering and illness as well. When God chooses not to heal, even though they ask him for it, then it is right that they “give thanks in all circumstances” (1 Thess. 5:18; cf. Jas. 1:2-4) and realize that God can use sickness to draw believers closer to himself and increase in them obedience to his will.⁹⁵

God still heals the diseased today in accordance with his absolute sovereignty. This means that He heals whom He wishes and when He wishes. He often grants faith to Christians to pray for their own healing or other people’s healing, and these prayers form the occasions upon which He is often pleased to perform healing on the sick. Thus, the process of healing is sovereignly controlled by Him at every point.

Gifts of Healings

Those with “gifts of healings” will be those people who find that their prayers for healing are answered more frequently and more thoroughly than others. When that becomes evident, a church would be wise to encourage them in this ministry and give them more opportunities to pray for others who are ill. They should also realize that gifts of healing could include ministry

⁹⁵ Wayne Grudem, *Bible Doctrine*, 419.

not only in terms of physical healing, but also in terms of emotional healing. And it may at times include the ability to set people free from demonic attack, for this is also called “healing” sometimes in Scripture (Lk. 6:18; Acts 10:38).⁹⁶

God still endows some individuals with the gifts of healing. Thus those endowed will often have more frequent, complete, and spectacular answers to their prayers for healing. People endowed with such gifts may find themselves more effective in ministering to those with specific types of sicknesses so that one may find greater success when praying for those with cancer, while another may be more effective when praying for the handicapped. However, whether or not they have been given the gifts of healing, or whatever gifts of healing they have, they can still pray for people with all types of sicknesses, just as any Christian may pray to God about any need.

Absence of a Concrete Role Model for HHM

Unfortunately, there is no concrete role model for HHM that has proved to be an exemplary ministry in KPCs. There are some Korean churches which run well-designed healing programs. Some Korean churches run well-designed inner healing programs. For example, All Nations Church in Korea has the advantage of an inner healing ministry consisting of an eight-week program. Yoido Full Gospel Church has the advantage of a divine healing ministry and also runs special sessions for inner healing programs. Some churches are famous for healing meetings where many people experience miracles, whereas some churches go to retreats only for healing. Other churches are developing their own style of special sessions for a healing ministry. However, it is inappropriate for their ministries to be called holistic healing ministries because their ministries are not focusing on the whole being of mankind.

⁹⁶ Ibid, 419.

Fortunately, some hospitals and healing centers in South Korea are conducting HHM effectively. However, it can be a little difficult for their systems to apply to local churches directly because circumstances between hospitals and local churches can be different. Nevertheless, it is meaningful to introduce the HHM of Sam hospital because the essence and purpose of a hospital based HHM is not differentiated from that of a church-based HHM.

HHM of Sam Hospital

The motto of Sam hospital is to deliver the best medical service and to practice God's love for the neighborhood. The vision of Sam hospital is as such: love of life, holistic recovery, and medical missionary work.⁹⁷

The CEO of Sam hospital, Daehee Lee, always emphasizes that he knows that all the miraculous changes made at the hospital are from the Creator's passion who made the body, mind, and spirit. And he confesses that Sam hospital cannot come without God's help. He really thanks God with all of his heart and decides to study and think more deeply for the caring of each patient's situation and offer the right treatment to each patient.⁹⁸

The medical team, including medical doctors, nurses, and therapists, were open to a close working relationship with chaplains in efforts to combine the use of their skills with their prayers for their patients. They saw that their task was to remove obstructions to healing and provide needed medicines to aid in healing, but realized that healing, when it took place, was a mysterious miracle. As the years went by they discovered the power of prayer in the healing process, which led them to begin to pray specifically in Jesus' name for the healing of their patients. Patients got well sooner than expected by a medical team. The assurance of the

⁹⁷ See [http:// www.samhospital.com](http://www.samhospital.com) (accessed by September, 11, 2011)

⁹⁸ See <http://www.newsis.com/> July, 26, 2010 (accessed by September, 12, 2011)

intervening touch of Jesus on patients' lives provided a positive mental attitude and maximized the healing process.

Through HHM, Christ released His power and pressed them on in a growing discovery of His desire to use both medical science and the prayers of a holistic healing team in the ministry of making patients whole.

The Holistic Healing Institute (HHI) of Sam hospital gathers and studies domestic and international data regarding holistic healing, set medical ethics, problems of diseases and pains, and a biblical understanding of humans. HHI pursues recovery based on faithful hope in the life to come—in addition to medical hope—and also tries to help the family members of the patients by transforming their time of nursing to that of a meaningful time of learning genuine love.

HHI programs challenge patients to change their lifestyles, including an acting radius, social abilities, eating habits, and so on. HHI also boldly makes practical applications of high-tech, medical treatments regarding cancer diagnoses and treatments while paying careful attention to how the patients react and respecting the patients and their family members' autonomy in faith. HHI offers a training experience through which the patients are able to practice socializing and to apply the principles of “Integrated Cancer Center + Living SAM (a physical care center, which takes care of patients through various programs designed for nutrition, exercise, natural healing therapy, psychological treatment as well as spiritual treatment.) + family + faith.”⁹⁹

HHI divides a human into three parts: body, mind and spirit and helps them to be harmonized. HHI moves around the SEODA—support, empathy, opportunity, decision,

⁹⁹ See <http://english.samhospital.com> (accessed by September, 11, 2011)

acceptance—movement, encouraging patients' autonomy and recovery. Holistic healing and Living SAM programs need to be extended in their solidarity and work.

The capacity of holistic recovery programs to offer various experiences of complimentary alternative treatments and natural healing therapies differentiates HHI from other medical institutions. HHI plays a key role in assisting patients' recovery in elements of the Kingdom of God by communicating and cooperating with other organizations that share the same values and are headed in the same direction as HHI. Although training of medical specialists in the field of holistic recovery is crucial, HHI also operates a clinical counseling program, training future pastors who will specialize in hospital ministry.

Summary

Even though KPCs offer many kinds of healing ministries to their congregations, and some of them run well-designed healing programs, they have not been caring for their congregations on the basis of mankind as a whole being. Although HHM has been carried out in some hospitals and healing centers, the KPCs rarely recognize the necessity of HHM. Otherwise, they have used a healing ministry as only a church growth method.

Fortunately, through several Christian hospitals, including Sam hospital, HHM has spread through Korean local churches in conjunction with the local churches and Christian hospitals.

In the next chapter, the alternative proposal of problems of the KPCs' healing ministries will be suggested with a concrete and practical method.

CHAPTER FIVE

PRACTICAL PROPOSAL FOR HHM

As an alternative proposal to the problems of the KPCs' healing ministries, this chapter will suggest practical methods for a church based HHM, which is classified as the physical, emotional, and spiritual part, for the church that hopes to become a holistic healing church through the concrete procedure. In addition, it will be suggested that the ultimate goal of HHM is to have an expansion of God's kingdom, which will establish an outreach ministry through HHM with the cooperation of hospitals.

Class Offerings for HHM in Seminary

Today in South Korea there are many private centers for HHM. However, the areas of interest that they deal with are mainly one or two parts of physical, emotional, and spiritual healing. For example, the Gilead Healing Center¹⁰⁰ and the Christian Home Healing Center¹⁰¹ focus on inner healing programs for emotional healing. Many private hospitals and centers which conduct HHM concentrate their attention on cancer patients. However, their holistic healing ministries sometimes do not treat the correlation between body, mind, and spirit, which constitutes of mankind as a whole being, but the total sum among them separately. Many Korean Christian and mission hospitals and medical centers which take care of cancer patients sometimes fall into a dilemma because of lack of theology of healing. They need serious consideration about holistic healing on the basis of the Bible. Actually, many medical teams are worrying about this difficult decision. However, many hospital chaplains do not answer to them because they rarely have studied about the theology of healing in seminary. Their lack of

¹⁰⁰ See <http://igojesus.or.kr/> (accessed by October, 3, 2011)

¹⁰¹ See <http://www.homhealing.hompee.com/> (accessed by October, 3, 2011)

theology of healing is natural because many seminaries in South Korea have not taught holistic healing. Although a few seminaries have a curriculum about holistic healing ministries, their curriculums do not cover all areas of physical, emotional, and spiritual healing.

Curriculum Focusing on Spiritual Healing

3/8	What is a holistic healing ministry?
3/15	The basis of a holistic healing ministry
3/22	Understanding human beings and disease
3/29	Type of healing ministry of a local church
4/5	Holistic healing as a healing ministry
4/12	Biblical healing : healing ministry through Bible study
4/19	The principle of Bible study for holistic healing
4/26	The contents of Bible study for holistic healing
5/3	Church organization for a holistic healing ministry
5/10	Programs for holistic healing and case study
5/17	Practice of Bible study for holistic healing
5/24	Final Examination

Table 5.1 Chongshin Theological Seminary 2011 spring semester class schedule

As shown in Table 5.1, this curriculum is a typical Korean curriculum for HHM. This curriculum is theoretical and focuses on spiritual healing such as Bible study. Considering mankind as a whole being, this curriculum needs to focus on not only spiritual healing, but also emotional and physical healing.

Curriculum without Physical Healing Education

6/13	Healing Missiology Block the path of demons Precious blood and pastoral counseling
6/20	healing of Man-child healing of heart/ healing of anger recovery of fatherhood
7/04	Healing Missiology shame /healing and spirituality identity of premason
7/18	Healing of guilty feelings Korean idol worship Healing of husband and wife/ expulsion of idol
8/08	Healing Missiology Healing of rejection feelings Healing of addiction/Han of women
8/22	Healing of suicidal feeling Expelling Jezebel Healing of pornography, New age movement
8/29	MT / Group healing

Table 5.2 Daeshin University 2011 summer semester class schedule

Although Table 3 seems like a curriculum for HHM, this curriculum mainly focuses on emotional healing in relation to inner healing and spiritual warfare such as blocking the path of demons and Expelling Jezebel. This curriculum is neglecting physical healing in areas many Christians are neglecting including basic health principles such as diet, exercise, rest, hygiene in the name of faith. Physical healing is essential to holistic healing because violations of God's natural laws naturally result in illness.

Curriculum for Holistic Healing, Focusing on Physical Therapy

The Korea Whole Person Healing Theological Seminary was founded in 2001 and asserts that it emphasizes spirituality, counseling, and alternative medicine. However, unfortunately, many classes of this seminary focus on physical therapy, such as chiropractic, acupuncture, and massage for healing. HHM is not the sum of body, mind, and spirit, but a correlation of them as a whole being.¹⁰²

The Curriculum for HHM

The curriculum for HHM the author suggests is as follows:

1	Introduction of a holistic healing ministry
2	Understanding mankind as a whole being and disease
3	Jesus the Holistic Healer in the Four Gospels
4	History of a healing ministry
5	Healing ministries of local churches
6	Physical healing
7	Emotional healing
8	Spiritual healing
9	Church organization for a holistic healing ministry
10	Programs and case studies of a holistic healing ministry
11	Outreach of a holistic healing ministry
12	Field work for a holistic healing ministry
13	Final examination

Table 5.3 Holistic healing ministry curriculum for theological seminary class

¹⁰² see <http://www.wph.or.kr/> (accessed by October, 4, 2011)

As shown in Table 5.3, this curriculum consists of thirteen classes to help students acquire a theoretical foundation for holistic healing on the basis of the Bible and experience a practical HHM through a holistic approach to man as a whole being. In particular, this curriculum is for church-based healing ministry and includes field work for HHM.

Program for the Holistic Healing Ministry of the Korean Local Church

Physical Healing Program

The Christians' body is the temple of the Holy Spirit. They should serve to "glorify God in their bodies," not merely to look and feel good. These benefits will be by-products as they seek to please God and keep their bodies clean and fit as temples of the Holy Spirit.

Paul says, "Or do you not know that your body is a temple of the Holy Spirit in you, whom you have of God? And you are not your own. For you were bought at a price; therefore, glorify God in your body and in your spirit, which are God's."¹⁰³ Therefore, Christians must take good care of their bodies. Many common diseases are easily prevented with good nutrition and exercise.

Daniel Fast Program

Many Korean Christians are accustomed to a fast because fasting brings clear perspective and insight as Christians make crucial decisions.¹⁰⁴ Particularly, some of them experienced a fast for forty days for their special reasons. Because the original Korean fast allows only water, many Korean Christians who have never fasted before get nervous about the prospects of abstaining from food, specifically fasting for forty days. Korean Christians often hear of someone who has finished a fast for forty days. However, after a forty day fast, many of them suffered from

¹⁰³ See 1 Cor. 6:19-20.

¹⁰⁴ Elmer L. Towns, *Fasting for Spiritual Breakthrough* (Ventura, CA: Regal Books, 1996), 111.

physical weakness and illness, caused by a failure of a very difficult and complicated recovery procedure.

Although the purpose of fasting is not to make an outward show of their religious dedication to God, but rather to make a personal commitment between them and God, some Korean Christians boast of their success of fasting because many Korean Christians regard them as very faithful people.

Considering these problems, the Daniel Fast Program is very useful and unique to Korean Christians who fast for their spiritual focus. This program provides not only such a spiritual growth, but also physical health.

The Daniel Fast Program is not exactly the same as original Daniel's Fast. The Daniel Fast Program is a biblically based partial fast. Although Daniel and his friends ate only vegetables and drank only water, this program allow for more eating than they did for various reasons. However, the original Daniel's Fast is recommended. It is a method of fasting that not only men and women, but also young people are using as they enter into the spiritual discipline of prayer and fasting.

There are two anchoring scriptures for the Daniel Fast. In Daniel 1:12, Daniel ate only vegetables (that would have included fruits) and drank only water. This scripture presents two guidelines for the fast. One is eating only fruits and vegetables, and the other is only drinking water.

The health-giving benefits of fruits and vegetables have been emphasized for many years in the health food world. However, recently the claims for these good foods have made it into popular magazines and other media. The National Cancer Institute in United States says that

about one-third of all cancers are linked to diet; other experts put the figure as high as 60 percent. The most recent research provides consistent findings that what we eat may prevent some of the most widespread cancers, including those of the breast, lungs, and colon, as well as the most intractable, such as pancreatic.¹⁰⁵

John Calvin made a comment about God's great goodness in creating fruits and vegetables as follows:

When God says, "Let the earth bring forth the herb which may produce seed, the tree whose seed is in itself," He signifies not only that herbs and trees were then created, however, that, at the same time, both were endued with the power of propagation, in order that their several species might be perpetuated. Since, therefore, we daily see the earth pouring forth to us such riches from its lap, since we see the herbs producing seed, and this seed received and cherished in the bosom of the earth till it springs forth, and since we see trees shooting from other trees; all this flows from the same Word. If therefore, we inquire, how it happen that the earth is fruitful, that the germ is produced from the seed, that fruits come to maturity, and their various kinds are annually reproduced; no other cause will be found, but that God has once spoken, that is, has issued His eternal decree; and that the earth, and all things proceeding from it, yield obedience to the command of God, which they always hear.¹⁰⁶

Water is a necessity for life. Drinking sufficient water is one of the easiest and most important ways people can improve their health. Water has many critical benefits, including helping keep us free from infections. It is necessary for all digestive, absorption, circulatory, and excretory functions, as well as for the utilization of the water-soluble vitamins.¹⁰⁷

Then in Daniel 10:3, Daniel ate no meat and he drank no wine for 21 days. This scripture presents a third guideline: no sweeteners and no breads.

¹⁰⁵ Jean Carper, *Food, Your Miracle Medicine* (New York, NY: HarperCollins, 1993), as quoted in Ladies Home Journal, August 1993, 82.

¹⁰⁶ John Calvin, *Calvin's Commentaries: Genesis*, Christian Classics Ethereal Library at Calvin College; <http://www.ccel.org>.

¹⁰⁷ James F. Balch, M.D., Phyllis A. Balch, C.N.C., *Prescription for Nutritional Healing* (Garden City Park, NY: Avery Publishing, 1997), 3.

The Daniel Fast affects the participants holistically as follows:

- The Body - Certainly our bodies are affected as our diet is changed, for some in very dramatic ways, during the Daniel Fast. Most people lose weight during the Daniel Fast. And many report healings from diabetes, allergies, arthritis and cancer. Elmer Towns says that many people who participate in a Daniel Fast testified that they were closer to God when they fasted than any other time in their lives.¹⁰⁸
- The Soul - The soul is also greatly impacted during the Daniel Fast. The soul is the seat of our emotions, intellect, personality and will.
- The Spirit - During the Daniel Fast, they want to put their spirit in charge of the other two parts. When their flesh is acting out with a craving, they take control of it with their spirit just as a parent takes control of a rebellious child.¹⁰⁹

As mentioned above, the Daniel Fast is a plant-based eating plan with the only beverage being water. The high fiber in the fruit, vegetables and whole grains cleanses the body and improves digestion. It is not uncommon for cholesterol levels to drop, for blood sugar levels to balance, for weight to be lost and for a general feeling of well-being to be experienced. A powerful side benefit of the Daniel Fast is the improvement in health that most people experience. However, the ultimate purpose of the Daniel Fast is to consecrate a specific period of

¹⁰⁸ Elmer L. Towns, *The Daniel Fast* (Ventura, California: Regal, 2010), 22.

¹⁰⁹ See <http://daniel-fast.com/about.html> (accessed by Nov. 22. 2011)

time to draw closer to God to hear from Him. Daniel proposed in his heart that he would not defile himself.¹¹⁰

The effect of the Daniel Fast is as follows:

- 1) The participants evaluate their lives in light of God's perspective, and
- 2) They break some bad eating habits, which will begin to restore them to better health.

Therefore, if the congregations join with the Daniel Fast of their church, they not only recover their spiritual health through prayer for a spiritual goal, but also build up their self-control because the Daniel Fast is an expression of abstinence for purposes of self-discipline.

Daniel Fast is normally linked to many of these factors:

- 1) Food choices
- 2) Spiritual commitment, reflected in constant prayer during the diet of Daniel and his friends
- 3) Time commitment: The Daniel Fast is usually done for 21 days; however, that is not a required time period. If the congregants determine to fast for a certain time, they should keep it. For example, if they determine to fast ten days, they should not stop on day nine.
- 4) Testimony commitment: Their fast is a statement of faith in God. They want God to heal their body. Faith is foundational to the Daniel Fast.

¹¹⁰ See Dan. 1:8.

As the congregations enter the Daniel Fast, they may choose to eat only vegetables for a fixed period. At that time, the senior pastor of the congregations should encourage them to decide what they will have on their personal Daniel Fast food lists. Their food lists of foods to eat or avoid do not need to be the exactly the same as someone else's food list. The senior pastor emphasizes the congregation that the Daniel Fast is not about getting things from God, but to experience God more intimately.

Parish Nursing Ministry

Rev. Granger Westberg was a visionary who recognized the connection between physical well-being and spiritual health and began his quest for holistic healthcare dating back to the 1940s. He saw how congregational programs could positively impact the health of the faith community and was the primary leader in the establishment of the first recognized parish nursing program in the 1980s.¹¹¹

Today, there are hundreds of parish nursing ministries serving congregations in many denominations of faith in America. By collaborating with other community health resources, parish nursing ministries can foster relationships to help build programs to help the faith community, such as local churches, achieve healthy lives.

Parish nursing ministries can foster the relationship between spirituality and health, helping congregations find methods to achieve key improvements in high risk behaviors and lifestyle choices, such as nutrition, physical activity and smoking.¹¹² The church congregations

¹¹¹ Theresa Lee Trivette, *Congregational Health and Wellness Ministry Using Locus of Control to Develop Teaching Methods* (Degree of Master. dissertation, Gardner-Webb University School of Nursing at Boiling Springs, 2010), 4.

¹¹² Ibid., 8.

can serve as a vessel for health in all aspects of the whole self—mind, body, and spirit. Parish nursing ministries can facilitate the congregation’s access to health education, support for targeted needs (community resources, support groups, etc), and overall health promotion. Additional healing opportunities within the congregational setting include worship, special services for emotional and spiritual needs, prayer, education, fellowship and service.¹¹³

Parish nurses help prevent illness by teaching how to maintain health through education, counseling and support groups. They integrate spirituality and holistic health into modern wellness techniques, and are becoming increasingly popular in faith communities to help *bridge the gap* between churches and modern health care. Their roles are as follows:¹¹⁴

- H – Health advisor
- E – Educator on health issues
- A – Advocate/resource person
- L – Liaison to faith & community resources
- T – Teacher of volunteers & developer of support groups.
- H – Healer of body, mind, spirit, and community.

The parish nursing ministries emphasize a dynamic process of working with parishioners and families in the community toward wholeness of body, mind, and spirit.¹¹⁵

¹¹³ See Minor, M., *Congregational health ministry guide 2010. Mississippi Faith-Based Health and Wellness Network*. Retrieved from http://midsouthchurches.org/yahoo_site_admin/assets/docs/Congregational_Health_Guide_2010.152170951.pdf; (accessed by November, 29, 2011), 9.

¹¹⁴ See The Canadian Association for Parish Nursing Ministry (2005) http://www.capnm.ca/historical_overview.htm (accessed by November, 9, 2011)

¹¹⁵ Deborah L. Patterson, *The Essential Parish Nurse: ABCs for Congregational Health Ministry* (Cleveland, Ohio: The Pilgrim Press, 2003), 7.

If the churches have the resource for organizing a holistic healing team, including pastors, physicians, nurses, and social workers, they can provide a team approach to both health and illness care in local congregations. Otherwise, if the church has no resource for parish nursing ministry, several churches may organize a parish nursing ministry team. In particular, a Christian hospital can launch parish nursing ministry for congregations in the area to provide “parish nurses” who would reach out into the community to build bridges of healing and hope.

Through the parish nurse, congregations are transformed into dynamic agents demonstrating God’s love for both the congregation and the community at large. Following the example of Christ’s ministry of healing, and understanding the principles of Holistic Healing, congregations develop vibrant ministries for Holistic Healing. In partnership with a local hospital or healthcare center, congregations can apply holistic health promotion and disease prevention across the age span of the congregation and reach out to care for those in need.

The spiritual dimension is central to parish nursing ministry. Personal spiritual formation is essential for the parish nurse. The parish nurse understands health to be a dynamic process, which embodies the spiritual, psychological, physical, and social dimensions of the person. Spiritual health is central to well being and influences a person’s whole being.

Kim, Chungnam, a professor of Keimyung University College of Nursing and director of Institute for Nursing Science, plays a leading part in parish nursing ministry in South Korea. Institute for Nursing Science of Keimyung University held an international conference as a title of ‘spirituality and health’ in 2010. In the conference many guest speakers and participants discussed the importance of spiritual health and how the local churches help neighbors become

healthy. Through fruits of her and her staffs' effort, recognition about the need for parish nursing is spread through the KPCs.

The responsibilities of a parish nurse are as follows: 1) Providing a comprehensive health survey to help identify the physical, emotional, and spiritual needs of the congregations, 2) Providing HHM Team' training session, 3) Providing periodic HHM Team Partnership Meetings, and 4) Providing resources for holistic healing programs (i.e. speakers, information)

The steps to partnering with a congregation and teaching it its responsibilities are as follows: 1) Committing to develop HHM Team, 2) Participating in the Holistic Healing Team training session, 3) Administering the comprehensive health survey to the congregations, 4) Considering the administration of a health ministry interest survey, 5) Developing and implementing a health ministry action plan specific to identified needs, 6) Attending the quarterly HHM Team Group Meetings, and 7) Sharing information from meetings and activities with parish nurse staff

Emotional Healing Program

Shinobu Yamazaki says that "in today's world, many people in and out of the Church are suffering from damaged relationships with others. These people look to the Church to find healing for their emotional wounds. Because the Church is the body of Christ and Christians relate to his body, each local church can convey God's healing grace to hurting people."¹¹⁶

¹¹⁶ Shinobu Yamazaki, *Holistic Healing Ministry: The Current Understanding and Attitudes of Clergy and Laity of Wesleyan Holiness Churches in Japan* (D.Min. dissertation, Asbury Theological Seminary, 2004), 31.

Emotional healing is certainly possible; however, it happens far more like rehabilitation from a tragic car accident than instantaneously turning on a light,¹¹⁷ far more like the slow-turning rheostat bringing light incrementally than a light switch. Therefore, an emotional healing program needs long periods for fundamental change and deep insight in order to cope with the complicated human problems.

Counseling Ministry

Martyn Lloyd Jones emphasizes that “everyone’s background involves painful experiences. It is only a matter of extent, great or small. They like to have somebody who is prepared to listen. Those in trouble are greatly helped by just being allowed to talk, and the minister is generally prepared to listen. More than that, he may be able to give some advice or what is now called counseling.”¹¹⁸

Some hurts may be healed naturally. However, other hurts require specific help. Particularly past hurts can sometimes be healed through one’s personal prayer, but other hurts require someone else’s help. Therefore, the church needs skilled, holistic, and biblical counseling ministry in order to cope with the complicated human problems of its members.

Kraft says,

Emotional illness is often signaled by a fear of facing the past. Our brains record everything that happens in our lives. However, they also hide and suppress the recall of the heavy stuff. This is helpful for immediate survival, but if it is kept buried, it infects the present. Many of us, however, have suppressed hurt for so long and know so little of what to expect if we let it surface that we respond with fear at the very suggestion of dealing with the past. And the enemy is very active in encouraging such fear.¹¹⁹

¹¹⁷ Tim Clinton & Joshua Straub, *God Attachment* (New York: Howard Books, 2010), 181-2.

¹¹⁸ Martyn Lloyd Jones, *Healing and the Scriptures* (Nashville, TN: Oliver-Nelson Books, 1988), 57.

¹¹⁹ Charles H. Kraft, *Defeating Dark Angels: Breaking Demonic Oppression in the Believer’s Life* (Ann Arbor, MI: Vine Books, Servant Publication, 1992), 144.

Counseling ministry in the church has the distinct advantage of serving within the context of a particular congregation's ministry and resources. In the church context, various gifts and talents of church members can be mobilized. And consistent caring and counseling is possible within the local church context.

Another advantage is that counselors in the local church focus on God and solutions. Kollar explains that "church counselors can encourage rather than hinder the change that the Spirit is planning. The church counselor has God's Spirit to assist in regard to empathy, genuineness, and hearing the counselee's concerns."¹²⁰ When church counselors speak with their clients, they must know that they are dealing with an image-bearer, a person who cannot be truly alive and happy unless he is in relationship with God and is actively and deeply committed to carrying out God's purposes. Every "personal problem" has its ultimate roots in a broken relationship with God and a commitment to a higher priority than simply knowing God.¹²¹

The contemporary church needs to develop "skilled service" that can respond to the complicated problems of modern people. However, this task is not simple. It requires a holistic approach to the cognitive, the behavioral and the relational-emotive. In the local church, counseling ministry does not necessarily need to be professional. The general and mutual care of lay people can be a good resource for counseling.

Counseling does not belong only to the professionals and pastors.¹²² In the Korean churches pastors do not have enough time and energy of continuing care for many of the people

¹²⁰ Charles Allen Kollar, *Solution-Focused Pastoral Counseling* (Grand Rapids, MI: Zondervan Publishing House, 1997), 64.

¹²¹ Larry Crabb, *Understanding People* (Grand Rapids, MI: Zondervan Publishing House, 1987), 123.

¹²² Garry R. Collins, *Christian Counseling: A Comprehensive Guide* (Waco, TX: Word Books, 1980), vii.

who come through the doors because the Korean pastors are so busy preparing many sermons, Bible teaching, and attending denominational events. Lay counseling accomplishes many things: it involves members in the work of the church, it provides a fulfilling ministry for lay persons, it takes a load off the pastor. It also solves people's problems. The proper exercise of a lay person's spiritual gifts and resources are essential to the church as a caring community.¹²³

Inner Healing Ministry through Forgiveness

One of the subtle ways Satan hinders Christians today is by playing unpleasant tape recordings in their minds repeatedly.¹²⁴ They lie in bed at night watching old videos on the inner screen of their hearts. Hurtful words said by others are heard again and again.

To bring about wholeness, inner healing is necessary, which includes the need for forgiveness and reconciliation in a broken relationship. Inner healing is a wholistic in approach and understands people as a unity of body, mind, and spirit. Inner healing means healing of the intellectual, volitional, and affective makeup of a person—healing past memories and emotional hurts. For example, concealed anger may kill the spirit and hurt the body. A purely medical approach to illness that does not address the underlying causes of the illness has limited effectiveness.

Restoring relationships, which is necessary for inner healing, is linked to forgiveness. The results of forgiveness are reconciliation and freedom, which is health giving. Forgiveness shows that the world is destined to move not toward greater disorder and darkness but toward

¹²³ Siang-Yang Tan, *Lay Counseling: Equipping Christians for a Helping Ministry* (Grand Rapids, TX: Zondervan Publishing House, 1991), 28.

¹²⁴ Jim Cymbala, *Fresh Faith* (Grand Rapids, MI: Zondervan Publishing House, 1999), 61.

redemption. Above all, God's forgiveness enables us to forgive others. Forgiveness is not some interesting sidelight of the Christian life but is at the heart of what it means to be a Christian.

Often our inability to accept forgiveness is rooted in the self: self-abasement, self-
abhorrence, self-accusation, self-defeat, self-disparagement, self-hatred, self-pity, and self-
torture are fertile ground for the unforgiving spirit. Accepting God's forgiveness can transform
hatred of self. God's incomprehensible love and salvation are at the heart of the church's
message of health.

Spiritual Healing Program

Christians find that their spirituality helps them maintain healthy lives, cope with illnesses, traumas, losses, and life transitions by integrating body, mind and spirit. When facing a crisis, Christians often turn to their spirituality as a means of coping.¹²⁵ Many believe in its capacity to aid in the recovery from disease,¹²⁶ and 82 percent of Americans believe in the healing power of personal prayer,¹²⁷ using it or other spiritual practices during illness. Therefore, although a spiritual healing program focuses primarily on spiritual healing, this program is not for spiritual healing itself, but for holistic healing.

Bible Study

Bible study is very useful way to approach HHM in the local church. The Bible is a wonderful textbook for any kind of healing and deliverance ministry because the Bible is full of stories which are relevant to the lives of contemporary people. Wagner recommends Bible study

¹²⁵ Kenneth Pargament, *The Psychology of Religion and Coping: Theory, Research, Practice* (New York: Guilford Publications, 1997).

¹²⁶ McNichol, T. (1996). "The New Faith in Medicine," *USA Today*, April 7, p.4.

¹²⁷ Marty Kaplan, "Ambushed by Spirituality," *Time Magazine*, 24 June, 1996, 62.

for teaching, introducing, and setting up a healing ministry in a congregation.¹²⁸ This can be done in Sunday school, small groups, and special sessions. Bible study should go beyond just discussing Bible passages to applying its message to daily life.¹²⁹ Members of HHM and the congregation should be encouraged to attend Bible study sessions that foster reflection on HHM and how it relates to the local community.

Relevant subjects in the area of physical, emotional, spiritual, and relational problems should be discussed thoroughly and deeply enough to reach deep-level human problems. Practical ways of experiencing healing should also be discussed.

Therapeutic Preaching

Therapeutic Preaching in the perspective of healing is very much accepted by Korean Christians. Due to the influence of Confucianism,¹³⁰ Koreans are preaching oriented. They are very responsive and sensitive to the preaching.

Therapeutic Preaching should deal with relevant subjects of the human problem. The pastor should preach about the connection between spirituality and health. As Miller says, sermons should take into consideration “healthy lifestyles involving choices about how much exercise to get; how to eat a nourishing diet; how to handle anger; how to handle stress; how to

¹²⁸ Peter C. Wagner, *Your Spiritual Gifts Can Help Your Church Grow* (Ventura, CA : Regal Books, 1979), 223.

¹²⁹ Christian A. Schwarz, *Natural Church Development*. 6th ed. (St. Charles, IL: ChurchSmart Resources, 2003), 32.

¹³⁰ Confucianism has been the center of Korean culture for at least the last five hundred years. The key of Confucianism highly respects the importance of learning and education.

nourish the spiritual aspects of our life.”¹³¹ Oden says that the main subject of Therapeutic Preaching should be God’s unconditional acceptance.¹³²

Above all, in therapeutic preaching, pastors must make the congregation aware that God is the ultimate healer, and that He is healing today. The focus should not be on the healing of the spirit alone, but on the mind, emotions, and body as well.

The most important and essential topic of therapeutic preaching is God’s unconditional acceptance through God’s incarnation, which led to the cross. No longer is the greatest good to be preserved from pain and suffering but rather to enter into the lives of others, even, if need be, laying down one’s life for them. This changes everything. Now, God does not stay safely distant and zap illness from afar; God enters the scene, sharing and bearing in Christ every illness, every disease, and every consequence of every sin.

Today many therapeutic preachers sometimes ignore repentance, the believer’s responsibility for experiencing God’s unconditional acceptance. They emphasize on God’s unconditional love and acceptance for the wounded people who suffered from sinful problems. However, their major error involves a deficient and shallow understanding of sin. Many therapeutic preachers preach an “iceberg view” of sin. The result is external conformity that masquerades as spiritual health, and internal emptiness and corruption that block the deep enjoyment of God and involvement with others. For holistic healing we should move into the

¹³¹ Kent C. Miller, June Begany, Harold Clark, and John Sharick, *The Staywell Program Handbook: A Health Enhancement Program for Church Professionals* (Louisville, Ky.: Presbyterian Church [USA], N.D.), 6-7.

¹³² Thomas Oden, *Kerygma and Counseling*, 26.

confusing realm of a darkened mind and learn what it means to let the Spirit of God renew us in our essential thinking, as we are admonished in Rom. 12:1-2.¹³³

In addition to therapeutic preaching, all preaching is preaching healing because genuine preaching proclaims the kingdom of God and works to usher in that kingdom. The word of God does that, and that is why gifted Christians preach and what they preach. Healing happens when the kingdom is proclaimed because in the presence of God, sin, death, and the devil can not abide.

Healing Prayer

In healing prayer there are three different types of prayers, such as prayer for spiritual healing, emotional healing, and physical healing, to fit the different needs that might arise. Concerning prayer for spiritual healing, John Wimber and Kevin Springer state, “The healing of our spirit, in which our relationship with God is renewed and restored, is the most fundamental area of healing. Without doubt, the healing of the spirit is the cornerstone around which all other areas of healing revolve.”¹³⁴ Through the prayer for confession of sin, many people who suffered from the problems of sin experience forgiveness of God by His unchanging promise in Scripture (1 Jn. 1:9). At this time, the weight on the person’s heart should be released. But if there is still discomfort, pastors should ask Jesus to lead them to see anything that might still be unconfessed and then continue to confess and receive his forgiveness.

¹³³ Larry Crabb, *Understanding People*, 129.

¹³⁴ Wimber, John, and Kevin Springer, *Power Healing* (San Francisco, CA: Harper & Row Publishers, 1987), 66.

If there is a need for emotional healing or healing for past hurts, this is the time at which pastors can ask Jesus to come and help him or her deal with the past hurt by taking him or her back through the past situations. Like a flesh wound, if believers do not treat their emotional wounds well, they will become infected on the inside. Emotions such as bitterness, hatred, envy, and slander are openings for evil spirits.

For physical healing, it is important to be actively cooperative in the healing prayer. In particular, in South Korea the congregations who suffered from disease sometimes visit their senior pastor for healing prayer. At this time skilled pastors follow Wimber's five steps as follows.¹³⁵

- The interview:

Pastors have the congregations sit in a chair and converse a little to relax them. The questions in the interview will vary; however, the main purpose is to find out specifically their needs. Pastors ask where it hurts, how long they have had it, how and when it started, what others have said about it, what treatment they have received and other similar questions.

- The diagnostic decision:

While the interview is taking place, pastors try to discern what the underlying causes of the symptoms are. Sometimes physical symptoms have their roots in emotional or spiritual problems.

- The prayer selection:

¹³⁵ Peter Wagner, *How To Have A Healing Ministry*, 224-230.

Once pastors know what they are going to pray for, pastors need to decide how they will pray. The most common type of prayer is intercession, in which they simply ask God specifically to heal whatever is wrong. Another is command, in which they speak directly to the body part, pain, swelling or tumor and tell it to leave or die or be dissolved, or whatever is necessary.

- The prayer engagement:

An active prayer is more effective than a passive prayer. The basic principle is sound, namely, that the person wants nothing other than God's will be done. At this time many pastors lay hands on a person and ask Jesus to touch him or her. There are theological and psychological roots behind the practice of the laying on of hands. Theologically, it is an act of adoption, so it has become the outward sign of commissioning people to ministry. In the healing ministry, it draws us into the body of Christ so that we may receive Christ's healing power. Psychologically, love is expressed by touch. Touch has deep spiritual significance. It is God's hand that touches the person through another.¹³⁶ Many consider touch an integral part of patient care. It can be of benefit physically, psychologically, and socially; hence using touch in Christ's healing ministry is a natural way to minister to others.¹³⁷ The methods used by Jesus and the disciples to bring healing varied from case to case, however, most frequently they included laying on of hands. Jesus no doubt could have spoken a powerful word of command and healed everyone in the large crowd instantly, but instead, "he laid his hands on every one of them and healed

¹³⁶ Morris Maddocks, *The Christian Healing Ministry* (London: SPCK, 1981), 121.

¹³⁷ Carolyn Headley, *The Laying On of Hands in the Parish Healing Ministry* (Bramcote, Eng.: Grove Books, 1988), 3.

them” (Luke 4:40). Laying on of hands seems to have been the primary means Jesus used to heal, because when people came and asked him for healing they did not simply ask for prayer but said, for example, “come and lay your hand on her, and she will live” (Matt. 9:18).¹³⁸ Pastors can assume any posture that is most comfortable for them—sitting, kneeling, or standing—where they can best forget themselves and relax and concentrate on the presence of God.

- Post-prayer direction:

After pastors ask the congregations how they feel. Pastors assure them that they don’t have to feel anything in order to receive healing; however, sometimes they do. If the symptoms are gone, they can rejoice together and praise God. If the symptoms are still there, pastors sometimes pray again or advise them to not only obey God’s will and timing, but also retrospect their past lives and beliefs. MacNutt explains eleven reasons why people are not healed as follows: 1) lack of faith (Matt. 17:14-20), 2) redemptive suffering (at times God uses sickness for a higher purpose), 3) a false value attached to suffering (God has sent the sickness), 4) sin, 5) not praying specifically, 6) faulty diagnosis (medicine doctors fail in diagnosing diseases), 7) refusal to see medicine as a way God heals, 8) not using the natural means of preserving health (neglect the ordinary means of keeping balance in our lives), 9) now is not the time, 10) a different person is to be the instrument of healing (I am not the one who has the discernment to pray for this particular person), 11) the social environment prevents healing from taking place.¹³⁹

¹³⁸ Wayne Grudem, *Bible Doctrine*, 416.

¹³⁹ Francis MacNutt, *Healing* (Notre Dame, IN: Ave Maria Press, 1985), 248-261.

Becoming a Soul Friend

There is a Celtic tradition of an *anam kara*, a soul friend. A soul friend is someone to whom a Christian can unburden his or her heart and know that the soul friend will respond honestly, compassionately, and in Christian love. At times, the soul friend will simply listen quietly and prayerfully to the Christian. At the heart of the *anam kara* relationship is trust: trust that the soul friend will not reveal to others what the Christian tells her, trust that the soul friend will not be judgmental, trust that the soul friend will pray with and for the Christian.¹⁴⁰

One of the most effective ways to get the congregation involved in HHM is to be the soul friend of the wounded. In such a relationship there is shared prayer and a partnership in faith that helps the wounded better explore how God is acting in his or her life and what God might be asking that person to do.

HHM is not accomplished by pulpit announcements or notices. It happens through person-to-person contact while praying for God's guidance; getting to know the needs of people in the congregation is crucial.¹⁴¹ Relating the person in need to healing relationship is the most crucial part of HHM. When God works with healing power, He does not require superstars as His agents. He can and does work through ordinary, obedient Christians who understand and live the life style of the kingdom of God.¹⁴² Like this, God uses the ordinary as a tool for healing when connected well with each other. According to Crabb, soul care requires two special relationships: spiritual friends and a spiritual director in the community. Spiritual friends are

¹⁴⁰ Michael Gemignani, *Making Your Church A House Of Healing*, 96.

¹⁴¹ Morris Maddocks, *The Christian Healing Ministry* (London: SPCK, 1981), 148-150.

¹⁴² Peter Wagner, *How To Have A Healing Ministry*, 213.

spiritually minded peers who share their lives. Spiritual directors are those who agree to listen, pray, think, and guide.¹⁴³

Outreach Ministry for HHM

In order to allow congregations to experience holistic healing, four things should be emphasized. First, pastors need to preach on the nature of the whole person, including the mental, emotional, spiritual, and physical aspects. Second, Christians need to get more serious about diet, rest, exercise, and spiritual health. Third, medical doctors need to practice psychosomatic or holistic medicine. Fourth, pastors, medical doctors, nurses, psychiatrists, and social workers need to work as a team to make the sick whole.

The Church as a Hospital

Stress, burnout, hypertension, addiction, depression, and other health-defeating behaviors plague many individuals. Today, many people, including congregations, are concerned about the management of the total lifestyle, general health, and spiritual growth and development because problems arise in a variety of areas, including stress reactions, nutrition, use of addictive substances, interpersonal relationships, human sexuality, work, and personal and professional goals.

Therefore, the Church should be a hospital which takes sick, fallen, and confused human beings who suffer from all sorts of destructive illnesses and offers very tangible therapeutic methods to help them attain real health. The church historically has been a strong force in urging health-enhancing lifestyles.

¹⁴³ Lawrence Jr. Crabb, *The Safest Place on Earth* (Nashville, TN: Word Publishing, 1999), 9-10.

Paul depicts the church as a body, with members that must carry out their intended functions for the health of the whole. It reminds us that a church, a microcosm of the church universal itself, is a body whose health depends on the well-being of its congregants, its bodily members. Whether believers like it or not, they are all in this together, and what each member does affects the other members either positively or negatively.¹⁴⁴

The Church is a hospital, healing them and leading them into a living relationship with the Lord. The Church's purpose for existence, when living out its calling as the Body of Christ, is purely therapeutic—to not only show the way to heal the split and separation between humanity and God, but to actually offer medicines, directions, and therapy.

Through the medicine of the holy sacraments—particularly Holy Communion and Confession—believers find healing. Through the wise guidance and teachings of the Faith, believers find healing. Through the therapy of prayer, fasting, almsgiving, and other spiritual disciplines, believers find healing.

People should comprehend that whether they are healed through means such as surgery, medicine, a wholesome environment, or through the direct operation of the Spirit of God, God heals them. And they should also realize that without any connection with the Church, these means of healing grace are not as effective.

With the cooperation of others, such as medical doctors and psychiatrists, if the Church uses the means of healing fully, it is able to provide an effective HHM to people who are sick physically, mentally, and emotionally in today's world.

The Church with a Recovery Ministry

¹⁴⁴ Michael Gemignani, *Making Your Church A House Of Healing*, 58.

Today the concept of “side-doors” develops rapidly as an essential new disciple-making strategy for churches in the twenty-first century. The traditional “front doors” of many congregations (visitors to worship) are closing, while the “back doors” (death, transfer, reversion) remain open. Many experts insist that the alternative of the twenty-first century evangelical strategy, as well as healing ministry strategy, is a side-door ministry through recovery ministry.

Side-Door groups have many benefits: 1) they provide more places for church members to invite friends, 2) they involve more members in starting activities that they really care about, and 3) they keep the overall church focused outward on the people and needs in their community.

As the explosive Freedom in the Christ ministry of Neil Anderson, author of such best-sellers as *The Bondage Breaker*, illustrates, addiction issues point to a huge cancer—not just in society, but also within the church. Recovery ministry is no longer a second-class, hide-them-in-the-basement affair. It has been steadily validated by a progression of Christian psychologists such as Clyde Narramore, clinics such as Fapha and Minerth-Meier, pastors such as David Seamands, author of *Healing for Damaged Emotions*, and high-visibility churches such as Saddleback Church.¹⁴⁵

Since 2004 in United States, Bible publishers have been promoting recovery Bibles containing verse highlights and testimonies of Christians struggling with various recovery-related issues.¹⁴⁶ In Korea, the translation version of the Recovery Bible was also published in 2011.

¹⁴⁵ Elmer Towns, Ed Stetzer, & Warren Bird, *11 Innovations in the Local Church* (Ventura, California: Regal, 2007), 55.

¹⁴⁶ *Ibid.*, 55.

Saddleback church launched a transferable curriculum called “Celebrate Recovery,” the brainchild of John Baker who is a staff pastor at Saddleback, with forty-three people in 1991. As it grew, some 70 percent of its members came from outside the church. Eighty-five percent of the people who go through the program stay with the church and nearly half serve as church volunteers. It became the most tremendous evangelical and outreach ministry of the church to the wounded unchurched people.¹⁴⁷

Holistic Healing Movement

For congregations accustomed to conservative preaching and teaching ministries, the senior pastor should bring about holistic healing movement as a purpose driven ministry. The best way to impress on the congregations is making the church a holistic healing church through conference, seminar, or establishing holistic healing centers all year around.

The Daniel Plan of Saddleback church has something to do with it. This movement is a thought-provoking guide for the program and partnership of HHM.

Rick Warren, the senior pastor of Saddleback church, continues to work at “fulfilling people’s needs.” His latest endeavor is “The Daniel Plan,” a fifty-two week health and fitness program. He insisted that all of the church’s small groups, more than 5,000, would go through “The Daniel Plan,” which is part of Saddleback’s “Decade of Destiny,” to help individuals succeed and be who God designed them to be in every aspect in life.

¹⁴⁷ Ibid., 56-59.

On January 15, 2011, over six-thousand people flocked to Saddleback's main campus while thousands more watched online at the other Saddleback campuses. It would appear that Pastor Warren has good intentions and that he genuinely wants his congregants to be the picture of health. He said that Christians should honor God with their bodies and he draws from Scripture to prove his point, 1 Cor. 6:19 and Rom. 12:1.

When Rick Warren decided to implement his health plan, his intention to equip his congregation by being physically healthy people in Jesus Christ was very good and biblical. However, in spite of his good intentions, many Christians are deeply concerned about The Daniel Plan. Their concern can be summarized by three points.

First, many argue that unlike the original purpose of the plan, "The Daniel Plan" is off the point. However, the Daniel Plan is not primarily a dietary choice; it is a *spiritual vow* to God. People may lose weight during their restricted diet, or people may lower their blood pressure or cholesterol, and while these results are good, they are not the primary focus of the diet. Instead, the Daniel Plan is for a *spiritual focus*. Improved health is always a *secondary* result of doing the Daniel Plan.¹⁴⁸

Second, many also argue that the origin of partnership of The Daniel Plan is unbiblical. The partnership of The Daniel Plan is three doctors named Daniel Amen, Mark Hyman and Mehmet OZ, with an unbiblical concept. Although they are internationally distinguished health experts, all three of the medical doctors are practitioners of various forms of Eastern mystical meditation and occultism, which they promote in their well-being programs of body, mind, and spirit. However, the real Daniel's "health plan" did not include compromise and participation in

¹⁴⁸ Elmer L. Towns, *The Daniel Fast*, 21.

the religion of Babylon into which he was immersed – instead, he and his friends stood alone on their convictions in the strength of God against the religious system of Babylon. Therefore, Warren and Saddleback church follow the principles of the latter.

Third, the congregations can experience spiritual confusion by paganism such as the New Age. No doubt their medical science education gives them valuable insights into the workings of their patients' bodies, but what of mind and spirit? The mind is not the brain; it is part of man's unphysical makeup. There is no objective science of mind. There is only the metaphysical kind. There is no objective science of the spirit. There are no scientific instruments for evaluating a person's spirit. It is purely a subjective religious matter.

Despite such concerns, one year later, the Daniel Plan of Saddleback church is assessed positively by not only many Christians, but also non-Christians who have experienced big change through this movement. In particular, the Daniel Plan got full coverage in the New York Times on November, 10. The New York Times informed that the Holistic Healing Movement of Saddleback church gave rise to new movement for many American people, suffering from chronic disease. This positive result proves that the Daniel Plan is not just a one time event, but essential ministry of local churches.¹⁴⁹

Rick Warren asserts that there will never be enough professionals — doctors, nurses and clinics — to care for all of the health needs in the world, but there is a church in practically every village of the world, and volunteers ready and willing to be trained.

The Holistic Healing Movement, named The Daniel Plan, of Saddleback church will be spread all over the world soon. The Korean local churches, challenged by purpose driven

¹⁴⁹ See <http://opinionator.blogs.nytimes.com/2011/11/10/at-a-big-church-a-small-group-health-solution/> (accessed by January, 5, 2012).

ministry of Saddleback church also will be interested in the Holistic Healing Movement such as the Daniel Plan.

Holistic Healing Camp

A two-day holistic healing retreat involving easy travel and an overnight stay can be an ideal setting for experiencing holistic healing. The retreat can include worship services that touch the brokenness of people and point to healing as well as small group interaction to gain insight into the physical, emotional, spiritual, or social factors causing health concerns, with a commitment to solve them.¹⁵⁰ Above all, through the retreats, the participants can experience spiritual healing. Though their minds may still suffer from the turmoil of the human condition, their wills become more and more attuned to the will of God because they recognize their own weakness, their own nothingness in comparison with the infinite power and grandeur of God.¹⁵¹

Practical Method for Becoming a Holistic Healing Church

Prerequisites for Holistic Healing Church

In order to be a holistic healing church, the local churches must focus on these three points: First, the congregation must believe that holistic healing is not merely important but central to its mission. The mission of HHM requires constant attention and openness to the transforming power of the Holy Spirit. As healing for an individual is a process, so the continuing mission of healing for a church is a process, not a fixed point at which the church stagnates.¹⁵² Second, a church must be convinced that true holistic healing comes only through Jesus Christ and the power of the Holy Spirit. If a church places its faith in various programs or

¹⁵⁰ Abigail Rian Evans, *The Healing Church* (Cleveland, Ohio: United Church Press, 1999), 182.

¹⁵¹ Michael Gemignani, *Making Your Church A House Of Healing*, 2.

¹⁵² *Ibid.*, 19.

anything other than Jesus Christ and the Spirit, it is building its house on sand.¹⁵³ Third, the church that believes that a true Christian is always joyful and that anyone who prays for a physical cure with sufficient faith will be cured fails to understand the gospel. Even Jesus himself had moments of suffering and grief.¹⁵⁴

The biggest challenge for being a holistic healing church is overcoming many congregations' belief that HHM is exclusively "the pastor's job." The pastor continues to provide HHM, and becomes an "equipper," helping to inspire, train, and lead laypersons to provide substantive Christian care.

The Steps to Start HHM

Clarify the Rationale and Mission of HHM

The first step in starting a HHM is making congregations clearly recognize the rationale and mission of HHM. At first, the pastor must have a clear rationale why HHM is foundational to what a church does and be able to articulate that rationale to both the lay leadership and the congregation.

Once the ordained and lay leadership and the congregation have become convinced of the importance of HHM, then HHM must be incorporated into the church's mission statement so that the church's programs, worship, and teaching are evaluated, at least in part, according to how well they serve to make the church a holistic church.

The key areas of focus for the first year of this program will include the following: First, physical health activities will focus on education and participatory offerings related to active living, healthy eating, disease prevention, and disease management. Second, mental and social

¹⁵³ Ibid., 19.

¹⁵⁴ Ibid., 19.

health activities will be arranged with the intention of developing fulfilling relationships with others and helping the members develop skills that will enable them to adapt and cope to changes in their lives and health. Third, spiritual health activities will focus on ways to further develop their commitment and relationship with God.

Assess Congregational Health

It is wise to begin HHM by identifying the congregational health of the church so that the congregations can see a direct impact on their lives. A congregational health survey is a tool that provides the data to define the disease burden, identify populations at highest risk, determine the prevalence of health risks, and guide and evaluate disease prevention efforts. As shown in Appendix B, the congregational health survey form, which is used by the congregational health team at Lynchburg General Hospital, is very useful to evaluate the reality of congregational holistic health.

Understand the Role of the Pastor

As ministers of HHM, pastors are in need of healing. By starting with their own understanding of health, they can set an example of a healthy lifestyle for members of their congregation and the community. Unless the senior pastor is committed to HHM, there is little chance it will take root in a congregation, even if the lay leadership would like to see it happen. Wilson also says pastors need to be part of their communities, both as examples and as those who are in relationship, so the proclamation of truth is lived out in the body of believers.¹⁵⁵

¹⁵⁵ Rod Wilson, *Counseling and Community: Using Church Relationship to Reinforce Counseling* (Dallas, TX: Word Books, 1995), 115.

By refusing to be slaves to society's addiction to overworking and materialism, they can offer a healthy alternative. Pastors can assist people in rethinking ways of living that can bring wholistic health.

Consider that as one who ministers in Christ's name, the pastor is a healer. The pastor should point to God's love as reflected in all healing. The pastor should counsel individuals in order to reveal spiritual roadblocks to healing, put people in touch with their own inner resources for healing, open them to God's power of healing, and integrate them into a support and service community. In particular, all pastors must recognize that they are servants of God, not replacements for God. And as servants of God, they serve the congregations of the church. Trustworthiness and constancy are part of the counseling ministry.

Particularly the role of senior pastor is very important in the Korean church. The Korean congregation considers the senior pastor as a father figure. They want a tangible relationship with the senior pastor. The comfort, prayer, and advice from the senior pastor are very meaningful and therapeutic to the congregation in need. In a word, the role of the senior pastor is a key in the healing ministry in Korea.

Praying for God's Direction

Richard Foster said that "our problem is that we assume prayer is something to master the way we master algebra or auto mechanics. That puts us in the 'on-top' position, where we are competent and in control. However, when praying, we come 'underneath,' where we calmly and deliberately surrender control and become incompetent."¹⁵⁶

¹⁵⁶ Richard Foster, *Prayer, Finding The Heart's True Home* (San Francisco: Harper, 1992), 7

To determine HHM, a congregation should pray for guidance to discern the needs and best use of the gifts of the congregation. The congregation should expect the Holy Spirit to work amazing things as one is open to God's leading.¹⁵⁷

The congregation prays regularly for sick members of the church, invites ill persons to meet with the group for special prayer, has a visitation program for the sick, and prays before services for God's blessing. One of the most important areas of lay ministry is that of intercessory prayer.

Educate the Congregation

Since healing is an unconventional topic, the leadership may want to make special efforts initially to teach the biblical basis of healing to the congregation and lead them in practices which are in alignment with such beliefs. One of the most effective ways to carry out HHM effectively is through education. Most Christians are very limited in their understanding of the healing role of the church, let alone knowing how to do it. Many Christians do not even believe that miracles can happen in the twenty-first century, with healing being the leading need in signs and wonders. While this concept does not advocate instant healing from God on demand, God's healing work and miracles can take place quietly and according to His schedule after all.

Using health care professionals as seminar leaders is an ideal way to continue health education in the congregation. Continuing education should be a primary component to the congregation. The church should provide the congregation's educational offerings through a series of courses, lectures, and activities focused on the holistic healing in the church. The

¹⁵⁷ Tilda Norberg and Robert Webber, *Stretch Out Your Hand: Exploring Healing Prayer* (Cleveland: United Church Press, 1990), 89.

educational framework will be designed in a manner that will target congregations' current problems.

Turning Congregations into Holistic Healing Ministers

To conduct holistic healing ministries actively, the churches should make many congregations holistic healing ministers because HHM is impossible without their active and positive participation. It is impossible for all congregations to join actively in this ministry because all congregations have different spiritual gifts, and the church should respect these various spiritual gifts. Therefore, the churches should select potential holistic healing ministers and equip them for the ministry. To be a true, holistic, healing minister "SHAPE" is requested as follows.

- **S**piritual gifts
- **H**eart
- **A**bilities
- **P**ersonality
- **E**xperiences

The Bible clearly teaches that God gives each believer certain *spiritual gifts* to be used in ministry.¹⁵⁸ *Spiritual gifts* for holistic healing ministries reveal God's will. Therefore, the churches should select potential ministers who have spiritual gifts for HHM by means of in-depth evaluation.

The most important qualification of a holistic healing minister is having Jesus' *heart* for the wounded. The Bible uses the term *heart* to represent the center of motivation, desires,

¹⁵⁸ See 1 Cor. 12; Rom. 8; Eph. 4.

interests, and inclinations. Matthew said that when Jesus saw the crowds, he had compassion on them, because they were harassed and helpless, like sheep without a shepherd.¹⁵⁹ Without having Jesus' *heart* for the wounded, potential healers will be unwilling to make the sacrifices necessary to reach them, and a true HHM will be impossible.

Although *abilities* are the innate talents, through an earnest desire and a desperate effort, abilities can be developed. However, the bottom line is that God always gives *abilities* as well as spiritual gifts. Therefore, all *abilities* come from God. Paul said that I can do everything through him who gives me strength (Phil. 4:13, NIV).

There is no fixed or right *personality* for HHM because God loves variety and uses various people as wounded healers. He made some people “introverted” and others “extroverted.” He made some people “thinkers” and others “feelers.” However, *personality* affects how and where we use our spiritual gifts and abilities. Therefore, ministers should develop the merit of their *personality* and remedy their shortcomings.

God never wastes an experience. Romans 8:28 reminds that “we know that in all things God works for the good of those who love him, who have been called according to his purpose.”¹⁶⁰ In the case of holistic healing ministers, clinical experience is very important because they should care for so-called patients who are suffering from various diseases, specifically emotional, and spiritual diseases. A believer will be a true holistic healing minister when he or she uses his or her *spiritual gifts* and *abilities* for wounded people with Jesus' *heart* in a way that maximizes the merit of his or her *personality*, and *experiences*.

Making Support Groups

¹⁵⁹ See Matt. 9:36.

¹⁶⁰ Rick Warren, *The Purpose Driven Church*, 374.

Depending on the size of the church, there may be a need for a support group(s) for people with special health needs such as church members as well as outsiders, including non-Christians. Stephen Macchia stresses, “The healthy church is intentional in its effects to build loving, caring relationships within families, between members, and within the community they serve.”¹⁶¹ George Barna says, “What makes a church secure and stable is not mere friendliness but true concern, compassion and caring for others.”¹⁶²

One of the ways wounded people are attracted to the church is through biblically focused “side-door” ministries called HHM. Side-door ministries include biblically focused small groups that respond to the relevant issues such as pain and suffering, including grief and addictions.

In the church, a different dynamic is at work because of the church’s belief in the Lord Jesus Christ, and because of the work of the Holy Spirit in healing. In a support group, two of the most important things are to speak the truth in love, and to glorify the Lord in whatever is said without being self-protective or pretentious. If the church is very large, or if several churches pool their resources together, and there are many patients who are afflicted with the same diseases, leaders may want to form a group(s) for people with specific diseases or needs. Therefore, making a support group is not only to help each afflicted soul emotionally, but to help people put life in God’s healing during the sessions.

Partnership for an Effective HHM

MacNutt emphasizes the team approach for a holistic healing. He states:

¹⁶¹ Stephen A. Macchia, *Becoming A Healthy Church: 10 Characteristics* (Grand Rapids, MI: Baker Books, 1999), 95.

¹⁶² George Barna, *The Habits of Highly Effective Churches* (Ventura, CA: Regal Books, 1999), 86.

Ordinarily, God works through doctors, psychiatrists, counselors, and nurses to facilitate nature's healing process. This may seem so obvious as to go without saying, except that there are some evangelists who set up an artificial opposition between prayer and medicine—as if God's way of healing is through prayer, while the medical profession is a secular means of healing, somehow unworthy of Christians who have real faith. Consequently, they encourage people to pray and not to see their doctor. However, God works through the doctor to heal as well as through the prayer for healing—the doctor, the counselor and the nurse are all ministers of healing. All these different professions, with their different competencies, go to make up God's healing team.¹⁶³

Therefore, networking with hospitals, health departments, and other community organization provides a solid base for HHM. HHM may involve a single church or work jointly with other local congregations to satisfy a community need. This is an insightful strategy for smaller congregations that do not have the resources to have their own health team. By pooling resources, churches can form a powerful coalition, gaining the political voice to find the funds they need. Choosing partners in HHM can determine its success and longevity.

Consolidation of Relationship with Hospital for HHM

A Close Relationship with a Hospital Chaplain

Chaplains, in partnership with the pastor(s) of the local church that desire to serve through HHM, are highly effective “bridge workers” through their ministries in the hospital. While local church pastors often do not know how to deal with ill patients, chaplains have contextual understanding of sick patients and they are experts in providing them with relevant spiritual assistance.¹⁶⁴ However, many chaplains have difficulty in managing their ministries, and they are often hindered severely by local churches that desire to control the chaplains with their financial support.

¹⁶³ Francis MacNutt, *Healing*, 164.

¹⁶⁴ Young Rim Kim, “An analytical study for the Institutional Settlement of Hospital Chaplain Ministry,” (Ph.D. dissertation, Bak Seok Theological Seminary, 2006), 117.

Chaplains are the best “bridge workers” who connects the hospital patients directly to the body of a local church. As they meet the patients, love them through individual care, and provide for their spiritual and physical needs, they naturally encourage the patients to plug into a loving community of a local church.

Pastors and chaplains are not in competition with one another. Instead, they complement one another. A chaplain is a bridge between the world and the church. While a pastor’s ministry deals mainly with an existing body of believers, a chaplain’s ministry deals mainly with the lost and the sick out in the community. A chaplain is “a minister in the workplace.” Chaplains have a home church; however, their church is actually outside the walls of the church building.

Local church pastors often do not know how to deal with ill patients. However, chaplains are abiding among the sick and the weak patients, with a contextual understanding of their true needs. Chaplains are experts in providing for both the physical and spiritual needs of those who are in need of hope. Chaplains are ministers to people who never, or at least have not for quite some time, stepped a foot inside of a church building. They are missionaries living among the community.

Local churches can directly carry out HHM, not only to their congregations but also to non-Christians within their communities. To those who are suffering from various trials of life, they can plant seeds of hope through their partnership with local hospital chaplains.

However, many chaplains in South Korea are presently facing much difficulty in managing and sustaining their ministries to the sick due to insufficient funding and care from the local churches. Despite the request of their congregations for joint healing ministry with hospital chaplains (figure 3.9), many local churches in Korea express little interested in hospital

chaplains (figure 3.8). According to the following survey about the Korean hospital chaplains by Young Rim Kim,¹⁶⁵ hospital chaplains in Korea face much deficiency in financial assistance and mutual cooperation from both hospitals and the local churches.

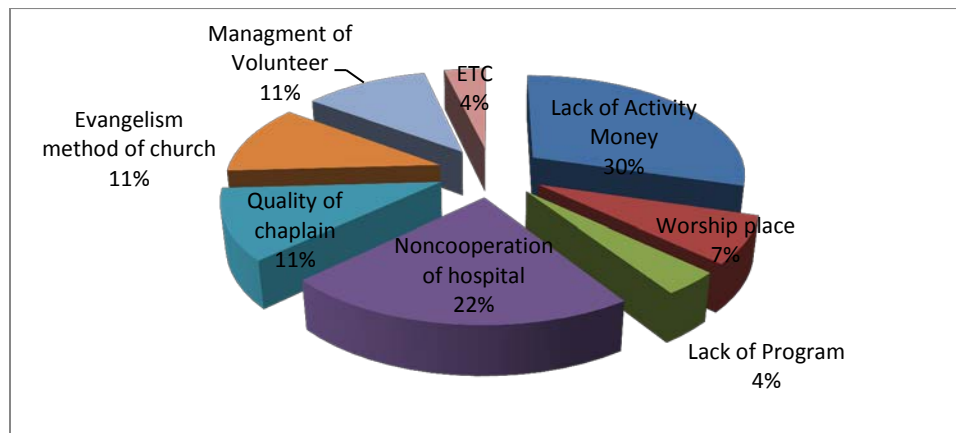


Figure 5.1 What are difficulties of hospital chaplains?

As shown in figure 3.27, many Korean hospital chaplains are suffering from 1) lack of activity money, 2) non-cooperative hospital, 3) evangelism method of the church, and 4) management of volunteers. Many local churches tend to treat hospital chaplaincy as a separate ministry and do not seek effective cooperation for conducting HHM to both the believers and the non-believing patients.

In general, a chaplain needs financial support and human resources from their local churches. However, unfortunately, many local churches supporting hospital chaplains often control, intentionally or unintentionally, the hospital chaplains for the *benefit* of their churches. And in doing so, they often obtrusively trespass into the autonomy of a hospital chaplain’s ministry.

¹⁶⁵ Ibid.

The local churches supporting hospital chaplains should take on a broad and deep perspective for HHM, empowering their chaplains to act as a *bridge* between the church and diverse medical professionals (doctors, nurses, therapists, nutritionists etc.) that are needed for true HHM. Particularly for local churches possessing wealth and man-power, they should dispatch or support hospital chaplains with their finance and human resources for enabling HHM to both believers and non-believers, rather than starting their own hospital ministry or utilizing the ministry as another program for outer numerical growth.

Clinical Pastoral Education for Holistic Healing Ministers

Clinical Pastoral Education (henceforth CPE) is a twentieth-century phenomenon and it arose in reaction to traditional theological education which was heavily dependent on theory without giving students practice in the field. It grew out of American soil and has grown up for more than sixty years.¹⁶⁶

CPE offers individuals an opportunity to develop and expand professional caring skills for addressing a person's spiritual, emotional and physical needs. Although CPE is a very powerful and effective tool for wounded people, it is not easy for the laity to take the course because CPE is quite difficult and time-consuming. In addition to the limitation of a long period, CPE is conducted at hospital based places. Therefore, it is not accessible to the laity.

For the church, as a role of hospital for healing the diseased holistically, the church-based CPE is a very effective tool to develop clinical skills for their congregants involved in HHM. Carefully selected and trained holistic healing ministers can meet the expanding pastoral care needs of hospitalized non-Christians, as well as their congregations.

¹⁶⁶ Kim Gibok, *The Theory and Practice of Clinical Ministry* (Seoul, Korea: Handel Press, 2003), 246.

The purpose of the church-based CPE is as follows:

- To encourage participants to move toward a clearer understanding of their identity – their spiritual gifts and God's will for ministry
- To explore a variety of appropriate responses and interventions within the context of the wounded people
- To change what reduces congregational anxiety and long-term issues through experiencing in-depth and a variety of clinical practices
- To develop an ability to observe the congregation with a holistic point of view

Time commitment is as follows:

- A spring unit meeting from March to May, a day per week (12 weeks)
- A summer unit meeting from June to August, a day per week (12 weeks)
- A fall unit meeting from September to November, a day per week (12 weeks)
- A winter unit meeting from December to February, a day per week (12 weeks)

The curriculum for the church-based CPE program is as follows.

- Study biblical, theological, historical healing
- Understand humans as a whole being, and their diseases
- Develop self-awareness of the minister and the relationship between the minister and the congregation.
- Case material from a congregational ministry

Instructors for the church-based CPE program are as follows.

- Physical: doctors, nurses, nutritionists, and exercise trainers
- Emotional: pastors, chaplains, Christian counselors, Christian psychiatrists

- Spiritual: the clergy, bible teachers, healing ministers etc.

Summary

This chapter suggested the HHM curriculum for Korean Presbyterian theological seminary, practical methods for a church-based HHM, classified into physical, emotional, and spiritual components, and the concrete procedure for the church that hopes to become a holistic healing church. Moreover, this chapter focused on an outreach ministry through HHM with the cooperation of hospitals. The church, with the cooperation of a hospital medical team, using the means of God's grace for healing fully, is able to provide an effective HHM to the diseased who are suffering physically, mentally, and emotionally in today's world.

CHAPTER SIX

CONCLUSION

Disappointed by local churches that focus only on numeric church growth without any differentiation from the secular world, many Christians are asking local churches for holistic healing ministry out of their hunger to live a healthy, faithful life in holistic maturity.

However, many KPCs rarely recognize the necessity and importance of HHM because they have a subconscious mindset that assumes healing ministries are not primary concerns for the church. Though they pray for the sick and make hospital calls, they usually do not invest time for studying and training on these topics. Although they have a valuable base for HHM, such as the sacraments; Scriptures; spiritual disciplines; teachings on transformation, forgiveness, and love; and the Christ model of healing, they sometimes search for healing outside of the church.

There are two serious problems of KPCs about healing ministry. First is the lack of openness for HHM. The most important and urgent thing they need is openness. G. Lloyd Rediger says that “openness is a prime ingredient for HHM: openness to reality rather than only that which fits their biases; openness to sickness and all of its occasions and consequences; openness to wholeness; openness to see the interdependence and interactions of all parts of God’s creation; openness to opportunity, creativity, and resources. Such openness is an attitude of a people whose God is doing new things.”¹⁶⁷

¹⁶⁷ G. Lloyd Rediger, *The Clergy Journal*. Inver Grove Heights: Sep 2002. Vol. 78, Iss. 9; 14-17.

Second is the absence of a theology of healing. Unfortunately, most Korean Presbyterian theological seminaries do not currently train their future pastors and leaders in the areas of HHM as a holistic prospect about human healing and disease. Although HHM is not the sum of the body, mind, and spirit, but a correlation of them as a whole being, some seminaries offer an unbalanced curriculum, not covering all areas of physical, emotional, and spiritual healing. Developing the curriculum for HHM is urgently needed in Korean seminaries.

The Korean local churches, facing stagnation since 1995, must focus not on quantitative growth, but on a healthy growth of their members through HHM. The Korean local churches must do their best to restore their congregations to health in Jesus Christ by taking care of them to recover from their pain and suffering. And as people of God with experiences of restoration and recovery, the local churches should help their congregations to reach out to others who are suffering from similar pains as “wounded healers.” Healthy congregations present a powerful witness to the gospel and a positive incentive towards health for the Korean nation.

Even though some Korean churches, particularly the mega-church, run healing ministries, it is inappropriate for these churches to be called a role church of HHM because their ministries are not focusing on the whole being of mankind. Although chapter five suggests the concrete ways and procedures to be a holistic healing church, today, the Korean local churches need to engage in steady research and development for being a holistic healing church.

With the cooperation of hospital chaplains through HHM, KPCs are able to provide an effective outreach ministry to people who are sick physically, mentally, and emotionally in today’s world. Furthermore, KPCs develop an essential, new disciple-making strategy for churches in the twenty-first century through HHM.

Though not yet common, HHM is being revived and adapted to contemporary needs and resources. The chaplaincy model is instructive, the visitation pastor model is commonly accepted, and the pastoral counseling model is established. KPCs can build on these by helping those in need see and experience the healing power of anointing, laying on of hands, prayers of faith, spiritual direction, and the supportive follow-up care of believers during recovery. Pastors, elders, and deacons were offices designed to serve the community of faith and those outside the community in times of sickness, healing, and health, with a message of salvation that is about “abundant life” (Jn. 10:10). Unfortunately, even though many KPCs own many properties, a good portion is underused and could be adapted for more healing purposes.

Now KPCs should realize how exciting and valuable it is to expand their healing ministries. One of the most interesting new developments for HHM is an informal or formal gathering of clergy, medical teams, and mental health professionals, where dialogue, study projects, shared referrals, and community health and healing projects are being initiated.

In conclusion, currently, in spite of the indifference of KPCs, some specialists on holistic healing are active in South Korea. They eagerly request that KPCs participate in HHM and make a partnership with them. Their vision for HHM will come true only through the participation of KPCs.

APPENDIX A

QUESTIONNAIRES: What is your opinion about HHM of KPCs?

Hello, I am pastor Yanghyun Park, and I am working on my thesis for the Doctor of Ministry Program at Liberty Theological Seminary. This survey is related to Holistic Healing Ministry, which allows congregations to recover holistically from the midst of pain, doubt, weakness, and brokenness, teaching them to make the healing choices that will help them become Christ-like in character, equipping them to be holistic healers who perform HHM in their fields.

In order to deepen my studies, your opinions and thoughts are precious. This survey will take approximately 15 minutes to complete. Please circle the appropriate one of the following questions. I deeply appreciate your time and help.

Question about general contents of participants

- 1) Gender : Male Female
- 2) Age : Below 30, 30 – 39, 40 – 49, 50 – 59, 60 – 69, Over 70
- 3) Church position : The clergy, Elder, Deacon/Deaconess, The laity
- 4) Years Practicing the faith : Below 10, 10 - 19, 20 – 29, Over 30
- 5) Denomination : Presbyterian, Methodist, Holiness, Baptist, Pentacost, Etc
- 6) Location of church : Big city, Middle & Small city
- 7) Number of church : Below 300, 300 – 1000, 1000 – 3000, Over 3000

Question about HHM of your attending church

- 1) How often did you hear sermons on holistic healing throughout the past year?
Below 5%, 5-10%, 10-20%, 20-30%, Over 30%
- 2) Who takes charge of holistic health in the congregations of the KPCs?
Myself, Church, Hospital, Government
- 3) What is ministry your church most interested in?
Preaching, Education, Evangelism, Mission, Healing, Social service
- 4) What is the ministry you are most interested in?
Preaching, Education, Evangelism, Mission, Healing, Social service
- 5) Which programs is focusing on attending churches for a holistic health?

Intercessory prayer, Counseling, Healing seminar, Health lecture/ activity, Etc

6) Do you experience holistic healing in your church?

Only spiritual healing, emotional and spiritual healing, holistic healing, nothing

7) What score is holistic health level of your congregations in your opinion?

Below 60, 61-70, 71-80, 81-90, Over 90

8) What is the weakest part of the congregations among physical, emotional, and spiritual health?

Physical health, Emotional health, Spiritual health

9) Do you agree that your church is interested in physical healing of your congregation?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

10) Do you agree that your church is interested in the emotional healing of your congregation?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

11) Do you agree that your church takes good care of hospitalized church members?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

12) Do you agree that your church has a relationship with the hospital chaplain?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

13) Do you agree that your church should have a relationship with the hospital chaplains in a neighborhood for caring for your congregation holistically?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

14) Do you agree that your church take responsibility for your church members who are suffering from diseases?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

15) Do you agree that your church should be the role of a hospital for your ailing church members?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

Question about self-evaluation of the congregations of the KPCs for their holistic health condition.

1) What is the level of your holistic health?

Physical health score ()

Emotional health score ()

Spiritual health score ()

Social health score ()

2) Which are you mainly interested in for your holistic health?

Physical health, Emotional health, Spiritual health, Social health

3) Which of the following is the most serious emotional disease?

Anger, Perfectionism, Fear, Reputation desire, Sense of inferiority, Shame, Etc

4) What is most needed for emotional health?

Faith, Love, Conviction of salvation, Forgiveness, Service, Etc

5) What is most needed for spiritual health?

Faith, Love, Conviction of salvation, Forgiveness, Service, Etc

Question about Holistic Healing Ministry of KPCs

1) What do you think when you hear about healing?

Physical healing, Emotional healing, Spiritual healing, Holistic healing

2) Which is your most needed component in healing?

Physical healing, Emotional healing, Spiritual healing, Social healing

3) What do you think is the cause of physical disease?

Stress, Inherence/ Environment, Bad diet/ Lack of exercise, Sin, Mind, Etc

4) Do you agree that physical health is related to emotional health and spiritual health?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

5) Do you agree that physical healing is only for a charismatic healer?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

6) Do you agree that healing prayer is related to physical healing?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

7) How often do you pray for healing of disease?

Always, Frequently, Occasionally, Almost never, Never

8) Do you agree that you should quit to medicine for effective result of healing prayer?

Strongly agree, Agree, Undecided, Disagree, Strongly disagree

9) Do you agree that in spite of faithful healing prayer, physical healing does not happen?

- Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 10) Do you agree that spiritual health guarantees emotional and physical health?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 11) Do you agree that emotional disease is, in many cases, due to our broken relationships with God?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 12) Do you agree that Satan causes emotional disease?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 13) What is your solution for emotional disease?
Prayer, Counseling, Inner healing, Suppression, Secular method
- 14) Do you agree that divine healing is also valid for today?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 15) Do you agree that the effect of divine healing meeting in South Korea is positive?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 16) Do you agree that hospital or medical center should mainly take charge of physical healing?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 17) Do you agree that we should respect medicine as a general grace of God?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree
- 18) What is the biggest problem of healing ministries of local churches in South Korea?
Misuse of healing gifts, Lack of theology of healing, Unbiblical healing ministry, Low quality of healing minister
- 19) Which hospital do you want to select if you are suffering from disease?
Hospital focusing on up-to-date facilities Hospital focusing on holistic healing
- 20) Do you agree that your church should have a partnership with the hospital for effective holistic healing ministry?
Strongly agree, Agree, Undecided, Disagree, Strongly disagree

APPENDIX B

Please answer every question by marking or checking one circle. If you are unsure about how to answer, please give the best answer you can.

SECTION I: SPIRITUAL WELL-BEING

Please rate your agreement or disagreement with each statement listed below.

	Strongly Agree	Somewhat Agree	Neither	Somewhat Disagree	Strongly Disagree
1. Prayer is important in my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I believe I have spiritual well-being	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I find meaning and purpose in my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. There is a close relationship between my spiritual beliefs and what I do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I am satisfied with my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. God has little meaning in my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Prayer does not help me in making decisions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I find it hard to forgive others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I accept my life situations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION II: ABOUT YOU

10. Are you a caregiver for an elderly parent, relative or friend?	Yes	No
	<input type="radio"/>	<input type="radio"/>
11. Are you responsible for a child 18 years of age or younger?	Yes	No
	<input type="radio"/>	<input type="radio"/>
12. About how much do you weigh?	_____ Pounds	
13. About how tall are you without shoes?	_____ Feet	_____ Inches

14. Are you male or female? Male Female
15. Your birth year: 19 _____
16. What do you consider the number one health problem in the community where you live?
17. An Advance Directive is any written instruction you give relating to the provision of health care in the event you become unable to make your own decisions. Examples of Advance Directives include: Living Wills; Durable Power of Attorney for Healthcare; or the Appointment of a Health Care surrogate. Do you currently have an Advance Directive for yourself?
Yes No

**SECTION III:
HEALTH AND DAILY ACTIVITIES**

These next questions are about your general health. Please give the best answer you can.

19. In general, would you say your health is:
- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Excellent | Very Good | Good | Fair | Poor |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
20. The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?
- | | Yes,
Limited
A Lot | Yes,
Limited
A Little | No, Not
Limited
At All |
|---|--------------------------|-----------------------------|------------------------------|
| a. Moderate activities, such as moving a table, pushing a vacuum cleaner, or playing golf | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. Climbing several flights of stairs | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
21. During the past 4 weeks, have you had any problems with your work or other regular daily activities as a result of your physical health?
- | | Yes | No |
|---|-----------------------|-----------------------|
| a. Accomplished less than you would like | <input type="radio"/> | <input type="radio"/> |
| b. Were limited in the kind of work or other activities | <input type="radio"/> | <input type="radio"/> |
22. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?
- | | Yes | No |
|---|-----------------------|-----------------------|
| a. Accomplished less than you would like | <input type="radio"/> | <input type="radio"/> |
| b. Didn't do work or other activities as carefully as usual | <input type="radio"/> | <input type="radio"/> |

**SECTION III:
HEALTH AND DAILY ACTIVITIES**

23. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Not at all | A little bit | Moderately | Quite a bit | Extremely |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes to mind closest to the way you have been feeling. How much of the time during the past 4 weeks

- | | | | | | | |
|--------------------------------------|-----------------------|-----------------------|---------------------------|-----------------------|-------------------------|-----------------------|
| | All of the
Time | Most of
the Time | A Good Bit
of the Time | Some of
the Time | A Little of
the Time | None of
the Time |
| 24. Have you felt calm and peaceful? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 25. Did you have a lot of energy? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 26. Felt downhearted and blue? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

27. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?

- | | | | | |
|-----------------------|-----------------------|-----------------------|-------------------------|-----------------------|
| All of the
Time | Most of
the Time | Some of
the Time | A little of
the Time | None of
the Time |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

28. During the past 4 weeks, how often have you visited your doctor's office, the emergency Room at the hospital (no overnight stay) or stayed overnight as an inpatient at the hospital for medical care?

- | | | | | | |
|--------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | Had No
Visits | 1-2
Visits | 3-4
Visits | 5-9
Visits | 10 or More
Visits |
| Your doctor's office | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hospital emergency room | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Overnight stay in the hospital | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**SECTION IV:
HEALTH AND DAILY ACTIVITIES**

29. Has a doctor ever told you that you had any of the following conditions?

- | | | |
|--|-----------------------|-----------------------|
| | Yes | No |
| Hypertension (high blood pressure) | <input type="radio"/> | <input type="radio"/> |
| Heart disease like angina or heart failure | <input type="radio"/> | <input type="radio"/> |

Diabetes or high blood sugar
Cancer

30. Do you now have any of the following conditions?

Arthritis or rheumatism
Chronic back problems
Trouble seeing even with glasses
Lung problems, bronchitis, asthma or emphysema
Ulcers in the stomach or heartburn

Yes No

31. Was there a time during the last 12 months when you needed to see a doctor, but could not because of cost?

Yes No

32. Was there a time during the last 12 months when you needed to buy medication prescribed for you but you chose not to buy it or continue to buy it because it cost too much?

Yes No

33. About how long has it been since you last visited a doctor for a routine check-up?

Within Past Within Past Within Past 5 or More
Year 2 Years 5 Years Years Ago Never

34. Do you smoke cigarettes everyday, some days, or not at all.

Everyday Some Days Not At All

35. In the past 12 months, has a doctor, nurse, or other health professional given you advice about your weight?

Yes, Lose Yes, Gain Yes, Maintain No
Weight Weight Weight

SECTION V: PREVENTION

36. Has a doctor or other health professional ever talked with you about your diet or eating habits?

Yes, Within Yes, Within Yes, 3 or No, Never
Past Year Past 2 Years More Years Ago

37. Has a doctor or other health professional ever talked with you about physical activity?
38. Has a doctor or other health professional ever talked with you about injury prevention, such as safety belt use or smoke detectors?
39. Has a doctor or other health professional ever talked with you about alcohol use?
40. Has a doctor or other health professional ever talked with you about medication use?

41. About how long has it been since you had your blood pressure taken by a doctor, nurse, or other health professional?

- | | | | | | |
|-----------------------|-----------------------|------------------------|------------------------|-----------------------|-----------------------|
| Within 6
Months | Within
Past Year | Within
Past 2 Years | Within
Past 5 Years | 5 or
More Years | Never |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

42. Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked?

- | | | |
|-----------------------------|----------------------------------|-----------------------|
| Yes, Within
Past 5 years | No, Not
checked
in 5 years | No, Never |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

43. Have you ever been told by a doctor, nurse, or other health professional that you have high blood cholesterol?

- | | |
|-----------------------|-----------------------|
| Yes | No |
| <input type="radio"/> | <input type="radio"/> |

**SECTION VI:
PREVENTION**

44. During the past 12 months, have you had a flu shot? Yes No
45. Have you ever had pneumonia shot? Yes No
46. How often do you use seatbelts when you drive or ride in a car?

Always Nearly Sometimes Seldom Never

Always

47. During the past month, did you participate in any physical activities or exercise such as running, golf, swimming, gardening, or walking?

Yes

No

48. In the past month, have you had at least one drink of any alcohol such as beer, wine or liquor?

Yes

No

SECTION VII:

WOMEN'S HEALTH

49. A mammogram is an X-ray of each breast that helps detect breast cancer. Have you ever had a mammogram?

Yes, Within
Past 2 Years

Yes, 2 or
more Years

Never

50. A clinical breast exam is when a doctor, nurse, or other health professional feels the breast for lumps. Have you ever had a clinical breast exam?

Yes, Within
Past Year

Yes, Within
Past 2 Years

Yes, Within
Past 3 Years

Yes, Within
Past 5 Years

Yes, 5 or
More Years

No,
Never

51. Are you now pregnant?

Yes

No

51a. If yes, have you received pre-natal care in the form of nutrition counseling, education or medical care for you and your baby from a doctor or other health professional?

Yes

No

SECTION VIII:

MEN'S HEALTH

52. A prostate-specific antigen (PSA) is a blood test to check for prostate cancer. Have you ever had this blood test?

Yes, Within
2 Years

No, Never

Holistic Healing Ministry: A Practical Guide for KPCs

Summary of Thesis

By Yang Hyun Park

The reason why I select this topic as a D.Min thesis

My experience as a hospital chaplain

Before I came to America, I worked at Sam Hospital in South Korea as a chaplain. During that time, I had an opportunity to counsel a variety of patients. Because the hospital for which I worked was a Christian hospital, most patients I met were Christians. And most of them were responsible people of faith like pastors, elders, and deacons.

At that time I encountered tremendous fear within people, the fear of not making it, which caused them to become faithless. They were diseased holistically. Their hearts were filled with deep wounds and suffering, thirst for spirituality, guilt, and with regrets about not taking care of their bodies for such a long time. From that time, I became focused on Holistic Healing Ministry.

Although I shared my attention about holistic healing ministry with my Presbyterian pastors, they were not interested in holistic healing ministry. They were focused only on numeric church growth and they were busy searching for attractive programs. Most of them were not interested in wounded congregations suffering from physical, emotional, and spiritual diseases.

Today many Korean churches impute their responsibilities for wounded congregations to hospitals. I think all churches must be actively involved in a healing ministry for their sick.

Pastor Choo opened Wellbeing Church in Seoul Korea in 2003, in order to change negative feelings people have on existing local churches. At that time this church received a big spotlight. This phenomenon represented how deep the thirst for holistic health was in many congregations at that time.

Disappointed by local churches that focus only on numeric church growth without any differentiation from the secular world, many Christians are asking local churches for holistic healing ministry out of their hunger to live a healthy, faithful life in holistic maturity.

Crucial motive to decide this topic is reading a survey on website.

This survey conducted in 2010, under a request from the Christian Ethics Movement of Korea, by GH Korea about the public social credibility of the local churches in Korea. Unfortunately, this result clearly shows that many Korean people find the local church unreliable.

However, I was shocked, not because of the opinion of the general public, but because of the unexpected opinions of existing believers who participated in the survey. More sixty percent answered that I have not credibility and reliability of the local churches in Korea.

What needs to change in the local churches to regain confidence and credibility?," the following was their response: Church leadership (28.3%), church management style (20.7%), lifestyle of the saints (18.8%), manner of evangelism (15.9%), and active social input (15.7%).

Purpose of this thesis

This thesis will attempt to lay a theoretical foundation and provide practical methods for implementing HHM inside the local churches in South Korea. It will also attempt to provide, by means of biblical data and practical examples, suitable answers to resolve problems in practicing HHM.

This thesis will urge that HHM is not optional but essential for both their congregations and their non-believing neighbors, as it forms an integral part of the whole life of the church.

The Definition of Holistic Healing and HHM

Holistic healing is not an absence of disease physically, but the process of not only recovering from disease, but also being a healthy person as a whole being through a holistic and lifestyle approach focusing on all parts of the individual.

- *Holistic healing is the process of being restored* to bodily wholeness, emotional well-being, mental functioning, and spiritual vitality. Holistic healing may also refer to the process of reconciling broken human relationships and to the development of a just social and political order among races and nations.

- *Holistic healing is a lifestyle approach*, taking a holistic approach when seeking treatment for imbalances and choosing to live a more balanced lifestyle.

HHM is an essential ministry of local churches that helps hurting people to 1) *recover* from their past sins, hurts, and wrong habits, 2) *teach* them to make the healing choices that will help them become Christ-like in character, and 3) to *equip* them to be holistic healers who perform *HHM* in their fields for the *establishment of God's kingdom* (Rev. 21:1-4).

The expansion of *HHM* is the expansion of God's kingdom because *the ultimate goal of HHM* is the *establishment of God's kingdom*.

Historical Basis of a Healing Ministry

The historical Christian church has traditionally embraced a holistic doctrine of human beings which affirms the importance and interconnectedness of all aspects of the human beings including the body and soul. However, Gnostic and Manichean philosophies, which taught dualism, caused Christians to doubt the validity of the healing ministry and many churches to emphasize the soul rather than the body. As a result, the Christian church has increasingly focused on what was defined as the soul and spiritual matters and left the body and physical matters to be dominated by medicine and the scientific disciplines. However, throughout the twentieth century, the Pentecostal, charismatic, and Third Wave movements encouraged evangelical churches to take interest in the ministry of holistic healing.

The history of healing in South Korea reveals that healing ministries were common in the early years of the Korea mission and were crucial to church growth. Historically speaking, a healing ministry was one of the major reasons for the dramatic growth in South Korea.

The survey for HHM conducted in the KPCs

1. Participants (263) : the clergy (106), elders, deacons/deaconesses (100), and laypersons (57) of the KPCs (53p)
2. Purpose of survey
 - a. To evaluate the present reality of *HHM* ministered to the KPCs
 - b. To examine holistic health conditions of the congregations of the KPCs

- c. To identify which domain of health – physical, emotional, or spiritual – KPCs are currently interested in.
 - d. To develop a team ministry, in cooperation with hospitals that share the same vision and goals of providing HHM to their congregational members and patients.
3. Method of collection of sample

I contacted many pastors of the KPCs, students of theological seminaries, and a hospital chaplain of Sam Hospital, either by e-mail or by phone, and later sent the questionnaire to them.

- 4. The meaning of evaluations of survey

These examinations and evaluations of survey will allow this thesis to provide practical and effective advice to KPCs for adapting HHM as an essential part of their ministries.

- 5. Evaluation of survey

- a. Lack of interest in healing ministry of the KPCs

I recognized that in spite of the need and demand for a healing ministry by their congregations, the KPCs are rarely interested in healing ministry.

- b. The holistic health level of the congregations of the KPCs is very low. The laity rated holistic health score higher than the other two groups.
- c. Most churches rarely emphasize a program for the physical health of their congregations, such as a health lecture or activity. Therefore all participants were rarely interested in physical health.
- d. Many of the KPCs have not conducted an effective healing ministry for their hospitalized congregants. Especially, although the participants agreed that local churches should partner with a hospital and chaplains for healing their congregations, most of the KPCs were rarely interested in this cooperation system.
- e. The holistic health score of the congregations of the KPCs was low in general.
 - All participants were rarely interested in physical health.
 - The participants responded that the most serious matter among emotional diseases was anger. The next thing was perfectionism.
- f. Many clergy of the KPCs are angry because
 - They are being abused by unhappy and mean-spirited parishioners.

- They are often not supported by their congregations, are not being trained in seminaries to manage the real world of the parish, are being accused and sued, sometimes unjustly, for moral malfeasance, and are expected to run the church as a small business.
 - They feel the loss of respect and authority which once accompanied the pastoring role.
- g. Most KPCs have been focusing on healing prayer, particularly intercessory prayer.
 - h. 84% of the participants disagreed that they must quit using medicine for healing prayer. 90% of the participants responded that they should respect medicine as a general grace of God.
 - i. The participants responded that the biggest problem of healing ministries of local churches in South Korea is lack of theology of healing.
 - j. The results of the survey confirmed that in spite of much need for healing ministry of their congregations, the KPCs are rarely interested in healing ministry; and as a result, the holistic health level of the congregations of the KPCs is very low. And healing ministries of many KPCs has been totally spiritualized and its physical dimension has been lost.

Problems of healing ministries of the KPCs

1. *A lack of interest in healing ministry*
 - a. Many of the KPCs are focusing not on the qualitative well-being of their congregations, but quantitative, numerical church growth.
 - b. Many of the KPCs are feeling uncomfortable about integrating a healing ministry because many senior pastors of the KPCs regard a healing ministry as divine healing focusing on physical healing through the laying of hands, and spiritual healing through prayer for deliverance.
 - c. Many of the KPCs are avoiding healing ministry because they fear abuse or misuse of healing ministries.
2. *A healing ministry without considering the correlation among physical, emotional, and spiritual healing*

- a. Many KPCs have not conducted a well balanced and synchronous healing ministry for the body, mind, and soul as a whole being. However, considering mankind as a whole being, the KPCs should care for their congregations holistically.

It is very important to see humans as a whole in HHM. If one part of a whole person is damaged, the damage spreads to other parts of the person. Thus, HHM needs a holistic approach to deal with the complex nature of human beings.

- b. The KPCs must proclaim that the Church is the place where people, non-Christians as well as Christians, are able to experience true healing.

3. The absence of theology of healing

- a. The reason why many pastors hardly preach about healing is that they barely know what biblical healing is. This is not just a personal problem for pastors but is caused by a lack of research from theologians about Bible based, sound healing.

- b. Theologians should establish the biblical base about healing not through criticism, but through biblical research.

- c. Wayne Grudem suggests “Certainly we should use medicine if it is available, because God has also created substances in the earth that can be made into *medicine with healing properties*.”

- d. God still heals the diseased today in accordance with *his absolute sovereignty*. This means that He heals whom He wishes and when He wishes. He often grants faith to Christians to pray for their own healing or other people's healing, and these prayers form the occasions upon which He is often pleased to perform healing on the sick.

When God chooses not to heal, even though they ask him for it, then it is right that they “give thanks in all circumstances” and realize that God can use sickness to draw believers closer to himself and increase in them *obedience to his will*.

- e. God still endows some individuals with *the gifts of healing*. Thus those endowed will often have more frequent, complete, and spectacular answers to their prayers for healing.

4. The absence of concrete role model for HHM. (expansion of HHM, relationship with hospitals conducting HHM)

- a. Even though some Korean churches, particularly the mega-church, run healing ministries, it is inappropriate for these churches to be called a role church of HHM because their ministries are not focusing on the whole being of mankind.
- b. It is very difficult to find a role model for HHM in Korean local churches. Fortunately, some hospitals and healing centers in South Korea are conducting HHM effectively. However, it can be a little difficult for their systems to apply to local churches directly because circumstances between hospitals and local churches can be different.
- c. HHM of Sam Hospital

Practical proposal for HHM as a solution

1. The solution of the problem

The solution to the problems is surprisingly simple. The solution is to return to the core value of the church. The church is the body of Christ, and every member of the body needs to be healthy. When every member of the body is healthy, the church will naturally grow as the saints mature into the image of Christ.

The Korean local churches must focus not on quantitative growth, but on the healthy growth of their members through holistic healing.

- a. The Korean local churches must do their best to restore their congregations to health in Jesus Christ by taking care of them to recover from their sufferings and pain.
- b. As the restored people of God with experiences of restoration and recovery, the local churches should help their congregations to reach out to others who are suffering from similar pains as “wounded healers.”

2. My Practical proposal for solution

- a. Class offerings for HHM in seminary

Their lack of theology of healing is natural because many seminaries in South Korea have not taught holistic healing. Although a few seminaries have a curriculum about holistic healing ministries, their curriculums do not cover all areas of physical, emotional, and spiritual healing.

- Curriculum Focusing on Spiritual Healing (87p)

- Curriculum without Physical Healing Education (88p)
- Curriculum for Holistic Healing, Focusing on Physical Therapy (89p)
- The curriculum for HHM the author suggests (89p)

This curriculum consists of thirteen classes to help students acquire a theoretical foundation for holistic healing on the basis of the Bible and experience a practical HHM through a holistic approach to man as a whole being. In particular, this curriculum is for church-based healing ministry and includes field work for HHM.

- b. Program for the Holistic Healing Ministry of the Korean Local Church (90p)
- Physical Healing Program – ***Daniel Fast Program (90p), Parish Nursing Ministry (95p)***

***Daniel Fast Program:** The Daniel Fast Program is a biblically based partial fast. The Daniel Fast is a plant-based eating plan with the only beverage being water. The Daniel Fast Program is very useful and unique to Korean Christians who fast for their spiritual focus. Therefore, if the congregations join with the Daniel Fast of their church, they not only recover their spiritual health through prayer for a spiritual goal, but also build up their self-control because the Daniel Fast is an expression of abstinence for purposes of self-discipline. The ultimate purpose of the Daniel Fast is to consecrate a specific period of time to draw closer to God to hear from Him.

***Parish Nursing Ministry:** Parish nursing ministries can foster relationships to help build programs to help the faith community, such as local churches, achieve healthy lives by collaborating with other community health resources.

The spiritual dimension is central to parish nursing ministry. Personal spiritual formation is essential for the parish nurse. The parish nurse understands health to be a dynamic process, which embodies the spiritual, psychological, physical, and social dimensions of the person. Spiritual health is central to well being and influences a person's whole being. The responsibilities of a parish nurse are as follows: 1) Providing a comprehensive health survey to help identify the physical, emotional, and spiritual needs of the congregations, 2) Providing HHM Team' training session, 3) Providing periodic HHM Team Partnership Meetings, and 4) Providing resources for holistic healing programs.

Daniel's Fast and the parish nursing ministry, which this research introduces as practical methods for HHM, are making steady progress in American churches. However, they are not yet verified as effective healing ministries for the local churches in South Korea.

- Emotional Healing Program – Counseling , Inner Healing Ministry through Forgiveness
 - ***Counseling ministry:** The contemporary church needs to develop “skilled service” that can respond to the complicated problems of modern people. However, this task is not simple. It requires a holistic approach to the cognitive, the behavioral and the relational-emotive. In the local church, counseling ministry does not necessarily need to be professional. The general and mutual care of lay people can be a good resource for counseling.
 - ***Inner Healing Ministry through Forgiveness:** God’s forgiveness enables us to forgive others. Forgiveness is not some interesting sidelight of the Christian life but is at the heart of what it means to be a Christian. Accepting God’s forgiveness can transform hatred of self.
 - Spiritual Healing Program – Bible Study, Therapeutic Preaching, Healing Prayer,
 - ***Therapeutic Preaching:** In therapeutic preaching, pastors must make the congregation aware that God is the ultimate healer, and that He is healing today. The focus should not be on the healing of the spirit alone, but on the mind, emotions, and body as well. All preaching is preaching healing because genuine preaching proclaims the kingdom of God and works to usher in that kingdom.
 - ***Becoming a Soul Friend:** There is a Celtic tradition of an *anam kara*, a soul friend. A soul friend is someone to whom a Christian can unburden his or her heart and know that the soul friend will respond honestly, compassionately, and in Christian love. One of the most effective ways to get the congregation involved in HHM is to be the soul friend of the wounded. In such a relationship there is shared prayer and a partnership in faith that helps the wounded better explore how God is acting in his or her life and what God might be asking that person to do. (108p)
- c. Outreach Ministry for HHM (109p)

In order to allow congregations to experience holistic healing, four things should be emphasized.

- Pastors need to preach on the nature of the whole person, including the mental, emotional, spiritual, and physical aspects.
- Christians need to get more serious about diet, rest, exercise, and spiritual health.
- Medical doctors need to practice psychosomatic or holistic medicine.
- Pastors, medical doctors, nurses, psychiatrists, and social workers need to work as a team to make the sick whole.

The Church as a Hospital (110p)

The Church is a hospital, healing them and leading them into a living relationship with the Lord. The Church's purpose for existence, when living out its calling as the Body of Christ, is purely therapeutic—to not only show the way to heal the split and separation between humanity and God, but to actually offer medicines, directions, and therapy.

The Church with a Recovery Ministry (side-doors ministry) (111p)

Today the concept of “side-doors” develops rapidly as an essential new disciple-making strategy for churches in the twenty-first century. The traditional “front doors” of many congregations (visitors to worship) are closing, while the “back doors” (death, transfer, reversion) remain open. Many experts insist that the alternative of the twenty-first century evangelical strategy, as well as healing ministry strategy, is a side-door ministry through recovery ministry. Side-Door groups have many benefits: 1) they provide more places for church members to invite friends, 2) they involve more members in starting activities that they really care about, and 3) they keep the overall church focused outward on the people and needs in their community.

Holistic Healing Movement (The Daniel Plan of Saddleback Church) (113p)

The Holistic Healing Movement, named The Daniel Plan, of Saddleback church will be spread all over the world soon. The Korean local churches, challenged by purpose driven ministry of Saddleback church also will be interested in the Holistic Healing Movement such as the Daniel Plan.

With the cooperation of hospital chaplains through HHM, KPCs are able to provide an effective outreach ministry to people who are sick physically, mentally, and emotionally in today's world. Furthermore, KPCs develop an essential, new disciple-making strategy for churches in the twenty-first century through HHM.

d. Practical Method for Becoming a Holistic Healing Church

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To conduct holistic healing ministries actively, the churches should make many congregations holistic healing ministers because HHM is impossible without their active and positive participation. It is impossible for all congregations to join actively in this ministry because all congregations have different spiritual gifts, and the church should respect these various spiritual gifts.

e. Consolidation of Relationship with Hospital for HHM (124p)

- A Close Relationship with a Hospital Chaplain (124p)

Pastors and chaplains are not in competition with one another. Instead, they complement one another. A chaplain is a bridge between the world and the church. While a pastor's ministry deals mainly with an existing body of believers, a chaplain's ministry deals mainly with the lost and the sick out in the community. The local churches supporting hospital chaplains should take on a broad and deep perspective for HHM, empowering their chaplains to act as a *bridge*

between the church and diverse medical professionals (doctors, nurses, therapists, nutritionists etc.) that are needed for true HHM. Particularly for local churches possessing wealth and manpower, they should dispatch or support hospital chaplains with their finance and human resources for enabling HHM to both believers and nonbelievers, rather than starting their own hospital ministry or utilizing the ministry as another program for outer numerical growth.

- Clinical Pastoral Education for Holistic Healing Ministers (127p)

For the church, as a role of hospital for healing the diseased holistically, the church-based CPE is a very effective tool to develop clinical skills for their congregants involved in HHM. Carefully selected and trained holistic healing ministers can meet the expanding pastoral care needs of hospitalized non-Christians, as well as their congregations.

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