

# MIRACLES

God, Science, and Psychology  
in the Paranormal

VOLUME 1

Religious and Spiritual Events

*Edited by J. Harold Ellens*

*Psychology, Religion, and Spirituality*

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CHAPTER 1

BIBLICAL MIRACLES AND  
PSYCHOLOGICAL PROCESS: JESUS  
AS PSYCHOTHERAPIST

*J. Harold Ellens*

In his recent volume, *Jesus the Village Psychiatrist: Disabling Anxiety in a World of Insecurity*, Donald Capps finally addressed definitively what psychologists and theologians have been dancing around for 20 centuries.<sup>1</sup> He has looked squarely in the face the issue of the psychological nature and method of Jesus' healing ministries. Those ministries are more than adequately documented by the witnesses in the numerous New Testament miracle stories. It is clear from those narratives that people who were close to Jesus, or knew those who were, were wholly persuaded that Jesus cured sicknesses and impairments.

Furthermore, when you have a couple of generations of people standing around who were well aware of the person and work of Jesus of Nazareth, there is only so much hyperbole you can use in describing such a personage, and get away with it. Since the stories of Jesus' miracles were so popular and so widespread within 50 years of his death, there must be something very important about them. If not, there would have been significant numbers of voices raised to counter the claims of the biblical stories. It is possible to make a heroic figure out of an ordinary man or woman simply by telling stories about them that embellish their reputation. However, even then one can only get away with telling stories that ring true to some characteristic of the person's nature or behavior. If the stories are wildly exaggerated, beyond that which is believable about that character, they will be countered, contradicted, falsified, and forgotten.

If I told you that Jules Verne's stories about trips to the moon or to the bottom of the sea were not fiction but truth, I might be able to get away with it if I could convince you that he is alive today, but I certainly could not

get away with that regarding a man who you know lived in the eighteenth or nineteenth century. You would immediately falsify my claim because you could prove that the technology did not exist then. Likewise, if I told you that the Wright brothers flew an airship for a few hundred feet at Kitty Hawk at about the turn of the nineteenth to the twentieth century, you would probably believe it. However, if I expanded that story to persuade you that they also created a space ship and visited the moon or Mars, you would laugh at me because the metals, tools, chemicals, and technology for such operations could not have been available to the Wright brothers under any circumstances. What were available were bicycles, primitive internal combustion engines, rather unrefined iron bars, canvas, and such stuff out of which to rig a rickety airframe for rather rustic experimentation. Their real story is only marginally believable. Anything wilder than that would not be believable at all! It was the same with Jesus' miracle stories.

The nature, behavior, and equipment of the heroic character in a story must be such that he or she can authentically carry the freight that the reports heap upon him or her. So the question about Jesus as miracle worker is not really so much the question of whether he performed healings, but rather the question of what kind of character he must have been that this particular set of narratives, this meaning freight, could be placed upon him and become immediately believable regarding him. Apparently people who knew him or knew about him readily responded with something like, "Yes! That is the sort of thing he did or surely would and could have done." The stories seem to have been affirmed from the outset without reservation, not because people were particularly gullible but because people knew something about Jesus that made the stories believable.

## SPIRITUAL DYNAMICS AND SOCIAL DYNAMICS

A great deal of footwork has been employed by biblical scholars, other scientists, and popularizers over the centuries, dancing around the issue of biblical miracle reports; and a lot of ink has been spilled to explain away the fact or the meaning of Jesus' miracles. Those perspectives generally leave one feeling less than satisfied, because they give the impression that they do not take the biblical narratives with adequate seriousness. Whether the miracles are explained in a sacred or secular manner, as divine or human acts, or denied altogether, one has the suspicion that something more should be said. One feels that the attempts to divinize, psychologize, or negativize the miracle stories in the Bible are simply leaving something out. The haunting sense persists that what is being missed in the explanation really has to do with the core of the matter.

That is the issue addressed in Capps's fine book. It is worth our while and wholly appropriate that we should begin here, then, with a summary and

assessment of Capps's thesis and argument. Capps's important volume begins with a discussion of the way in which the miracles of Jesus have been psychologized or rationalized away by scholars since the eighteenth-century Enlightenment. He discusses, for example, Albert Schweitzer's argumentation about whether Jesus was delusional. In the fifth chapter of this work, Capps moves from a discussion of conversion hysteria as an explanation of some spontaneous healings to the issue itself of Jesus as the village psychiatrist.

Capps suggests that Jesus should be taken seriously as a member of our helping professions, particularly those focused primarily upon psychotherapy. Jesus would not have recognized the term *psychotherapy*, but might well have been conscious of that category, described in standard dictionaries as healing that deals with the treatment and prevention of mental illness such as psychoses and neuroses. Mental illness in Jesus' day was caused by many things, just as it is today. Capps thinks that the normal emotional stress and strain for Jewish villagers in Palestine in Jesus' time was greatly increased by Roman occupation of their land. That would have jeopardized their village livelihood since the wealthy Roman cities that sprang up, with their voracious appetites, would have dominated the landscape, economy, and politics. He suggests that these sociocultural factors would have worsened personal stress, family tensions among the villagers of established families, and intergenerational conflicts. Jesus was a rural psychiatrist, in the sense that he ministered in and to the junctures of conflict between rural and urban cultures, between families and social groups, and between parents and children.

Capps notes that having been a carpenter, Jesus was more accustomed to building up than tearing down. So his interest in the well-being of those around him would have enticed him into the helping professions. It is not surprising that he, like so many of us, saw that as a calling in ministry that was both material and spiritual, related to matters mundane and religious. The anxiety and dysfunction of the people around him would have attracted his attention.

Anxiety is the driver behind most mental illness, frequently leading to irrational thoughts and behavior. Free-floating anxiety, which is not focused upon a real source of danger, may lead to the behavior of denial, exaggeration of the perceived threat, or projection of a danger where there is none. Capps believes that anxiety was the underlying cause of the disorders that Jesus treated successfully. Some forms of neurotic or psychotic acting out of anxiety can lead to hysteria and its psychophysical manifestations, as Freud contended. In his explication of this perspective, Capps focuses first upon two biblical narratives, both having to do with paralyzed persons (Mk 2:1–12; Jn 5:1–9).

Everyone knows well the story of the paralytic who was let down through the roof in Capernaum so that Jesus would be compelled to notice him. We know this is a case of hysterical paralysis because of the way the cure

worked. Jesus undoubtedly knew this man and his family history since Jesus vacationed regularly in Capernaum on the shores of the Sea of Galilee. In fact, he eventually had a home in that city. He surely would have noticed the fellow or heard his story frequently, understood his family or life story, and realized the sources of the poor fellow's dysfunction. When the four friends presented the man to Jesus, he addressed him immediately in a familiar manner by saying, "Your sins are forgiven. Get up and walk." Carl Jung thought that half the healing power of a therapist lay in the aura and authority of healer that the patient projected upon the therapist. Jesus spoke with authority to inform the paralytic man that his fear, guilt, and shame had been removed by God from the equation of his life, so he could let go of his symptomatology and function normally. The point is that it worked. Jesus was an effective village psychotherapist.

The end of this story is a joke, of course, played on those who challenged Jesus' right to forgive sins since that is God's domain. It was obviously impossible to discredit the effectiveness for the healed man of Jesus' intervention, because the man began to walk home. So Jesus asked whether the complainers thought it easier to heal the fellow by saying his sins were forgiven, which was obviously effective, or by telling him to get up and walk, which he was already doing? It is interesting that in the second narrative about the man at the pool in Jerusalem, Jesus simply instructed him to get up and walk. The authority in his voice led the man to believe he could, and so he did, throwing off his psychological dysfunction. Nothing here about removal of fear, guilt, and shame! Obviously, Jesus knew that the causes were different in each case, and that suggests that he knew the case history well enough to understand the causes in each case.

## THE PSYCHODYNAMICS

Capps observes correctly that such cases of anxiety-induced hysterical paralysis develop from a person's perception of a severely threatening danger, translated into conscious anxiety, internalized as free-floating unconscious anxiety that is disconnected from the danger source, and then somatized in psychophysiological dysfunction. At that point the original danger may have disappeared or been discovered as nonexistent in the first place; and the original anxiety may have dissipated. However, the unconscious anxiety persists, together with the psychosomatic dysfunction it induced, because the person has developed unrelated payoffs for persisting in the dysfunction. Such secondary gains, as we call them, can be the attention the handicap incites, the fear that acting against the symptoms might induce the original danger to recur, malingering, or other psychosocial payoffs. The person remains disabled because there are unconscious peripheral incentives. In such cases, the person usually wishes at the conscious level to be well; but at the unconscious level has numerous reasons to remain dysfunctional.

The effectiveness of a therapist's intervention in such cases has to do with the action of a trusted authority, upon whom the patient has projected the aura of healer, who gives the patient permission to act on his conscious desire to transcend his or her dysfunction. Jesus outflanked the suffering person's anxiety, inviting him to be free of psychospiritual imprisonment to both internalized and externalized fear, guilt, and shame. That act on the part of Jesus, as healer, permitted the patient a different perspective and hence a new master story, so to speak. Of course, we must remember that Jesus was not alone in that. The gospel records that there were others casting out demons in his society, at least one of whom was doing it by citing the authority of Jesus himself and Jesus commended him for doing so (Lk 9:49–50 and Mk 9:38–41).

It is interesting that when Jesus healed the man at the pool, he first asked him whether he wished to be healed. Undoubtedly, this suggests that Jesus was aware of the man's ambivalence about his imprisonment to his symptomatology with all its unconscious secondary gains, on the one hand; and his conscious claim that he wished to be healed but could never quite manage the optimal timing for it, on the other. One would think that after lying there for 38 years, as he claimed, he would have figured out how to seize the moment, if he were really thoroughly persuaded that he wanted to be healed. Obviously, in both this man's case and that of the paralytic let through the roof by his friends, Jesus' invitation to act on whatever motive each man had for being well tipped the psychospiritual scales in favor of freedom and health.

Capps would like to know what was wrong with these fellows and why. Cases of conversion hysteria resulting in paralysis are quite numerous. Familiar ones, for example, tend to appear regularly in the literature. An adolescent boy in a repressively moralistic family discovers the delights of masturbation and is repeatedly caught at it by his abusively scolding parent; and is so filled with fear, guilt, and shame that he converts these terrors of the soul into a paralysis of the arm and hand he uses to masturbate. I have a patient who not only developed such paralysis, but moved across the line into a psychotic episode in which he cut off the offending limb with his band saw. The men in Jesus' two stories may not have had sex-related hysteria, but may have faced physical threats they considered beyond their ability to defend against, and so saved their lives by retreating into dysfunction. So many dynamics can cause this kind of dysfunction that we cannot adequately speculate about or analyze what the operational sources of their suffering were. We only know what psychopathological category it is into which they neatly fit: classic hysterical paralysis.

In his chapter on "Jesus the Village Psychiatrist," Capps expends a great deal of analysis upon setting the social and psychophysiological setting for the suffering of the two Jewish men in these very Jewish stories. This turns out to be pure speculation, however, and not very useful. We cannot adequately reconstruct the psychosocial setting in ancient Galilee or Jerusalem. Capps



relates the two healings of the paralytics to the stories of the healing at Jericho of the blind man Bartimaeus in Mark 10:46–50, and the healing at Bethsaida of another blind man in Mark 8:22–26. These too, he suggests, are cases of conversion hysteria. His judgment is based upon the fact that the stories indicate that the men both want to see, that both are spontaneously healed when Jesus invites or commands it, and that Jesus instructs one of them to go home and avoid the village.

Capps's assumption is that something in the village was so difficult for the man that it caused his dysfunction, and he could relapse. Did he have eyes for a forbidden woman of the village? Social censure in small villages is unmerciful. Moreover, was there not an injunction afloat in those days that said that every one who looks at a woman lustfully thereby commits adultery with her? Moreover, what about Jesus' observation that if your eye causes you to sin you should pluck it out and dispose of it, since it is better to dispose of one eye than lose yourself in hell (Mt 5:27–29)? That may not have been original with Jesus. It probably was a commonly known proverb of that day in that culture. Capps tops off his discussion with the additional observation that the length of average life in Jesus' day was so short as to obviate most causes of blindness that we see today, such as macular degeneration, hence psychosomatic causes are more likely. Capps's rationale regarding these two blind men is speculative, but of considerable interest.

Hysterical blindness is common, though usually temporary. I experienced it in one eye at about age 12 and it lasted for one night, though the trauma only lasted for a few hours. Capps reports that Ralph Waldo Emerson (1803–92) was blind for nine months at age 22. The dysfunction was not unrelated to his chronic tuberculosis, but the onset of the blindness seems to have been induced by his attempt, in developing his Unitarian theological rationale, to prove that if a demonic god does not exist the good God is the source of evil. In mid-sentence, so to speak, while penning that thought, he was struck blind. He left his studies and left Cambridge to work as a farm laborer. There he met another laborer who persuaded him of the empirical evidence for the efficaciousness of prayer. He undertook to pray for his eyesight, which began to return in December and was fully restored by February so he could go back to his studies and his Cambridge podium. He never revisited the psychospiritual impasse on the occasion of which he went blind. Instead of his perspective of religious doubt he shifted to a constructive quest of theological reflection. In commenting on this, Capps reports that Emerson acknowledged that his psychospiritual stress and associated anxiety had a significant role to play in his affliction.

Emerson's writings are filled with metaphors about eyes, vision, seeing, illumination, sight, and insight. His journals testify to the fact that Emerson began to recognize in college that he had an intense attraction response to glancing at some other persons, both male and female, for whom he felt an

immediate sense of erotic longing and intimate connection. This caused him much anxiety, he acknowledges, probably in response to the glances of males more than those of females, though we do not know with certainty. He first reports noticing it with regard to a male friend in his class at Harvard. Emerson was about 19 and was experiencing the awakenings of love in a way that was rather standard at his age for that time, and had to work through some gender confusion at first, as everyone does in puberty. This confusion dissipated for Emerson in young adulthood. Capps relates this to intense levels of anxiety in Emerson, likely related to his conversion hysteria blindness. The reason that it caused problems with his eyes, Capps implies, is that they were the offending organs inducing the anxiety and triggering the psychosomatic symptomatology that was used to manage his psychospiritual problem in a psychopathological manner.

## CASTING OUT DEMONS

Contrary to many biblical scholars, Capps holds that Jesus' miracles of casting out demons were healing miracles, similar to those of the healing of the paralytics and blind men. It is interesting that the persons whom Jesus cured of demon possession seem to have been predominantly males, though of course Luke 8:2 refers to women who were cured of evil spirits. Mary Magdalene was cured of seven demons, and both Mathew (15:21–28) and Mark (7:24–28) refer to a girl cured of demon possession. The cured males were mostly young males and adolescents, and Capps focuses primarily on these young men, who were brought to Jesus by their fathers. Capps does not address the case of the girl possessed of a demon and brought to Jesus by her mother (Mt 15:21–28, Mk 7:24–28). Only the two Gadarene demoniacs, found near the Sea of Galilee, seem to have been independent of close family. Probably because of the severity of their disorders, they seem to have been living in a cemetery. That would mean that they lived on the edge of the Jewish community, marginalized in their own region. This is confirmed by that fact that there was a herd of pigs close at hand, animals that Jews assiduously avoided.

Most scholars believe the biblical stories of demon possession are evidences of classic epilepsy. Capps argues for conversion hysteria or a combination of the two, a condition we might call automatism in which a person is induced to behavior over which he seems to have no control and which he cannot himself explain. He suggests the Freudian interpretation that a combination of sexual anxiety and role confusion anxiety can induce such hysteria. Jewish males in Jesus' day, says Capps, would have been suffering from a sense of being unempowered by the ignominy inflicted upon them and their nation by Roman dominance.

This would have undercut their sense of phallic prowess and would have forced sublimation or repression of their sexual energies, causing a struggle

with problems of sexual diversion such as incest, adultery, and perversion; as well as a hysterical conversion of their normal assertiveness. The anxiety associated with this for a young man can induce the psychological parody of a conversion disorder that looks like demon possession or epilepsy; severely self-destructive and self-punishing behavior, such as casting him into the water and fire or throwing him violently upon the ground. Josephus says that Galilean boys were inured to war from infancy by harsh discipline and brutal training. Lack of maternal warmth and the presence of strong patriarchal discipline, in a context of male powerlessness and sexual repression and confusion, could prompt a child or adolescent to elect unconsciously for such a conversion reaction hysteria.

The implication of this state of affairs seems to be that males, particularly in Galilee, who were demasculinized by various forces including Roman disempowerment and harsh parental demeanment, would have had little opportunity for fighting back against this oppression as they gained the strength of late adolescence and young manhood. Jesus himself seems to have come to his unconventional break with that society very late. Only in his thirties did he finally find his voice and his true empowerment, and that was in a role and expression of a contrarian who rejected his family, community, vocation, and religious traditions.

To consider such unconventional choices as Jesus made in declaring himself to be the Messiah, or the decision of the Essenes to withdraw from the general society, or even more seriously the choice that the Zealots made to kill Romans, one by one, wherever they could catch one out, would have both raised and expressed enormous anxiety in individual males and in the society in general. Most of the time for most Jewish males those choices would have had to be rejected and repressed, sublimated into other channels of expression. For some, the impasse proved so serious, intense, and unresolvable, Capps claims, that it turned into the psychological conversion reaction of hysterical and self-destructive automatism; a severe psychospiritual pathology.

Instead of the aggressive expression being directed toward the "enemy" it would be directed against the self, just as in hysterical blindness or paralysis. Capps suggests that we have reason to believe that this was a fairly common state of affairs with young men in Jesus' day and later. He cites a document from the third century after Christ, which relates a mother's petition regarding the condition of her son, remarkably similar to the demon possessions cured by Jesus.

## THE LARGER WORLD OF MIRACLES

Miracle stories decorate ancient literature of all cultures more elaborately than we generally realize. They are always assumed to be unexpected and abnormal events caused by divine action in this material world, either directly

by a god or by someone who acts for God. This tradition goes back to the very earliest legends or reports of human experience, and they bedeck the memories of primitive cultures and of the most sophisticated societies. Howard Clark Kee says that these events raise the questions about what happened and what it means; specifically, what divine message is intended to be conveyed by the event.<sup>2</sup> Kee confirms Capps' approach to the biblical miracles in insisting that it is inappropriate to describe a miracle as a violation of natural law. Surprising events in ancient societies were described as miracles because their worldview, technology, and science had no paradigm within which to manage this unusual data. Even the Stoics, who posited the notion of natural law, left room for direct divine action, and they thought they observed such interventions associated with major turning points in history such as those associated with Julius and Augustus Caesar.

According to Brown, it was only since the rise of modern science and its model of the pervasive lawfulness of the material universe that "miracles came to be defined increasingly in terms of violations of the laws of nature. This led Spinoza to seek natural explanations for the biblical miracles . . . and Hume to claim that the whole idea of miracles was self-refuting."<sup>3</sup> Since Spinoza the struggle to understand the nature and meaning of miracles or of the miracle stories in the Bible has fueled an ongoing debate as to whether a given miraculous event was extraordinary in the fortuitous nature and timing of the way the event unfolded, or in the overt violation of natural law. The former case might be a night-long "strong east wind" that parted the water in the Exodus (Ex 14:21). The latter case would be that of raising a dead person to life. In both cases, the event might be understood, indeed, was seen in the biblical world, as a divine intervention.

Kee cites biblical miracles that have the function of divine confirmation of some course of human action; divine illumination of someone's sense of guidance and destiny; judgment upon some misbehavior; deliverance from dire circumstances; revealing divine purposes; and inauguration in this world of the divine rule of grace that works and love that heals. Jesus' healings were miracles of deliverance that inaugurated the breaking in of the reign of God in human affairs. Kee concludes his article by declaring that the biblical miracles are presented as divine instruments by which transcendental purposes are disclosed and fulfilled in our world, illustrating that God is directly present to us in daily life. Exodus 8:19 makes this claim directly. Referring to Moses' miracles before the Pharaoh and his staff, the Bible declares, "This is the finger of God."

Seung Ai Yang observes that of the 35 miracles ascribed to Jesus in the four Gospels, most fall into one of four categories: healings, exorcisms, resuscitations, and control of nature.<sup>4</sup> Of course, the line between the first two is difficult to confirm, as Capps insists; and the line between the last two may not exist, since raising the dead is an act of controlling nature. In

this regard Brown discusses C. S. Lewis' Augustinianism in the matter of miracles.

C. S. Lewis represented a return to a more Augustinian position with his definition of a miracle as "an interference with Nature by supernatural power" (*Miracles*, p. 15). This leaves open the question as to how nature has been interfered with. It gives recognition to the fact that God's working is ultimately a mystery. It allows for the fact that miracles are never seen directly. What is observed is a state of affairs before and after the event. Recognition of an event as a miracle is bound up with the wider view that one takes of reality, just as rejection of miracles is bound up with one's beliefs about the uniformities of nature.<sup>5</sup>

The Bible, of course, assumes a worldview in which the veil between the mundane and transcendent world is permeable. God and his agents seem to move back and forth through that screen rather readily. We do not need to adopt that worldview in order to wrestle with the issues of miracles, though we should not dispose of that worldview too readily either. Since we do not know a great deal about the transcendent world and the barrier that seems to exist between us and it, we should keep a mind of open wonder about any and all of the possibilities. Brown's emphasis is objective and useful.

In their descriptions of Jesus' exorcisms, healings, and nature miracles the Gospels present the events either explicitly or implicitly as following His pronouncement of the word of God in the power of the Holy Spirit. Jesus acts and speaks with the authority of Yahweh Himself.

The tendency to treat the miracles of Jesus apart from His teaching and the course of His life has been encouraged by Christian piety, apologetic interests, and critical study. Piety has found encouragement and inspiration from reflection on individual miracles. Apologetics has tended to focus on the Gospel miracles as supernatural attestation of the divinity of Christ. Critical study has tended to prefer the teaching of Jesus to the miracles, and form criticism has seen the miracle stories as products of pious belief, produced by churches anxious to invest Jesus with the credentials of a divine man.<sup>6</sup>

Brown concludes that his miracles are an inherent part of his teaching and cannot be legitimately separated from it.

Miracles, and therefore miracle workers, were fairly common in the Jewish and Greco-Roman world during and after Jesus' day. Two noted first-century CE miracle workers were Onias and Hanina ben Dosa, though it might be observed that their miracles were not associated with messianic claims, as generally Jesus' were. Miracles were standard healing practices at the medical centers of Asclepius at Epidaurus and Pergamum. Moreover the Egyptian Serapis held the same reputation. It was a popular endeavor of

the History of Religions School of scholars, in the nineteenth and twentieth centuries, to demonstrate parallels between the biblical narratives and the miracle reports from the Hellenistic world in general. They were especially encouraged in this by the similarity between Luke 7:11–17, in which Jesus is described as raising the dead son of the widow at Nain, and the *Life of Apollonius* of Tyana iv:45, in which Apollonius restores to life a bride whose funeral he encountered at the city gate, and who had died just as she was to be married. Philostratus, who wrote the *Life of Apollonius*, expresses almost modern-day reservations as to whether Apollonius detected some spark of life or really raised a really dead person.

Through the centuries critics of Christianity have repeatedly drawn attention to what they conceived to be parallels between Jesus and Apollonius of Tyana, a Neo Pythagorean sage and wandering ascetic who lived in the first century and was credited with exorcistic and miraculous powers. Philostratus was commissioned by the Empress, Julia Domna, who was the wife of Septimius Severus, to write a *Life of Apollonius*. The circumstances and contents of the book have prompted the suggestion that Apollonius and his cult were fostered as a rival alternative to Christianity.<sup>7</sup>

In the September 2007 issue of *Discover, Science, Technology, and the Future*, Jeanne Lenzer published an article entitled “Citizen, Heal Thyself.”<sup>8</sup> She declares that the sorts of miracles in the biblical narratives are happening all around us every day. John Matzke was 30 years old when informed that he had terminal melanoma with lung metastasis. The oncologist at the Veterans Administration hospital urged immediate treatment, despite the fact that patients with his condition have a 50 percent mortality within two and a half years after surgery. John chose to take 30 days to strengthen his body for the treatment. He spent much time walking in the mountains and forest, meditating, visualizing his healing cells killing the cancerous ones, and eating a healthy diet. When he returned to his physician the doctor expected to see two large lung lesions. Instead the radiographies showed a complete lack of any pathology. The physician said, “When John came back a month later, it was remarkable—the tumor on his chest x-ray was gone. Gone, gone, gone.” He was given 18 months to live. He lived another 18 years. Then recurrence of the cancer in his brain killed him.

Pinning down spontaneous remissions has been a little like chasing rainbows. It’s not even possible to say just how frequently such cases occur—estimates generally range from 1 in 60,000 to 1 in 100,000 patients. . . . But genuine miracles do exist, and throughout the history of medicine, physicians have recorded cases of spontaneous remission . . . not just cancer but conditions like aortic aneurysm, . . . Peyronie’s disease, a deformity of the penis; and childhood cataracts.<sup>9</sup>

Researchers speculate that Matzke's immune system, reinforced by his change in lifestyle and psychospiritual address to his tumors, produced a healing effect. They noticed that during his month of meditation and healthy living his skin tumors were surrounded by white halo-like rings, indicating that the immune system was attacking the melanocytes, pigmented cells in the skin that give rise to the cancer.<sup>10</sup> Ever since 1700 or so a medical record has been developing indicating that certain serious infections such as erysipelas or those associated with streptococcus cure cancer by causing tumor regression. It was by following up on these cures that nature spontaneously induces that physicians were able to develop the chemotherapy that is used today. The medical statistics now available indicate that a surprisingly high number of patients are cured or significantly improved in health by both spontaneous remission and by assisting nature by inducing the infectious condition created by chemotherapy.

Lenzer reports the case of Alice Epstein, a brilliant academic diagnosed with kidney cancer in 1985. A month after the resection of her kidney, the cancer showed up in both lungs. Her life estimate at that time was three months.

Epstein, who says she had a "cancer-prone personality," then turned to psychosynthesis, which she describes as a "combination of psychotherapy and spiritual therapy." It helped her overcome depression, difficulty expressing anger, and suppression of her own needs in order to please others—traits she and some psychologists believe are characteristic of the cancer-prone personality. Although she never received any medical or surgical treatment for the deadly cancer invading her lungs, six weeks after starting psychosynthesis, her tumors began to shrink. Within one year, they had disappeared without a trace. That was 22 years ago.<sup>11</sup>

Today Epstein is alive and well and 80 years of age.

The crucial points at stake here are as follows. First, given the right chance, the irrepressible life force in nature is able to induce spontaneous remission of horrible disorder in the physical organism of human beings. Second, the state of psychospirituality of that human person seems to have a great deal to do with the onset of illness and the effecting of cure. Third, a decisive shift in orientation in the psychospiritual world of that person seems to be the trigger that induces radical reorientation of the organic forces at play in the physiological organism, the human body. Focus upon the permission to be well and not sick, and focus upon the will to get well, is a high priority factor in mobilizing the power of our physiological organism to eliminate the deadly forces that work against the well-being of the person. It is clear that this works when the ill person determines to live and be well. One can confidently speculate that a directive to get well, given by an authority whom that the sick person respects as a healer, would be enough in some cases to trigger the will to empower the immune system to overcome the pathological and pathogenic condition in his or her body.

Lenzer concludes almost lyrically. “Although medical advances have dramatically improved outcomes in certain cancers . . . modern medicine has yet to come close to nature’s handiwork in inexplicably producing spontaneous remission without apparent side effects for people like John Matzke and Alice Epstein, who have experienced the rarest hints of nature’s healing mysteries.”<sup>12</sup> The interesting question arising in the context of these reports of miraculous cures, combined with the focus of this volume upon the biblical narratives of miracles, is whether the miracle stories of the Bible were attempts to report similar literal histories of cured persons,<sup>13</sup> or described the imagination of the primitive missionary church at work in glorifying the attention-getting aspects of their memory of Jesus.<sup>14</sup>

## NOTES

1. Donald Capps (2007), *Jesus the Village Psychiatrist*, Louisville: Westminster John Knox.
2. Howard Clark Kee (1993), Miracles, *The Oxford Guide to the Bible*, Bruce M. Metzger and Michael D. Coogan, eds., New York: Oxford University Press, 519–20.
3. Colin Brown (1986), Miracle, *The International Standard Bible Encyclopedia (ISBE)*, Fully Revised, vol. 3, Grand Rapids: Eerdmans, 371–81.
4. Seung Ai Yang (2000), Miracles, *Eerdmans Dictionary of the Bible*, David Noel Freedman, Allen C. Myers, and Astrid B. Beck, eds., Grand Rapids: Eerdmans, 903–4.
5. Brown (1986), 372–73, citing C. S. Lewis (1947), *Miracles: A Preliminary Study*, London: Geoffrey Bless, Ltd. and New York: Macmillan.
6. *Ibid.*, 373.
7. *Ibid.*, 377–78.
8. Jeanne Lenzer (2007), Citizen, Heal Thyself, *Discover: Science, Technology, and the Future*, September, 54–59, 73.
9. *Ibid.*, 56.
10. *Ibid.*, 56.
11. *Ibid.*, 58.
12. *Ibid.*, 73.
13. Charles Caldwell Ryrie (1984), *The Miracles of Our Lord*, New York: Nelson. See also Reginald H. Fuller (1963), *Interpreting the Miracles*, Philadelphia: Westminster.
14. Anton Fridrichsen (1972), *The Problem of Miracle in Primitive Christianity*, Minneapolis: Augsburg. See also Gerd Theissen (1983), *The Miracle Stories of the Early Christian Tradition*, Edinburgh: T&T Clark. Originally published in 1974 as *Urchristliche Wundergeschichten: Ein Beitrag zur formgeschichtlichen Erforschung der synoptischen Evangelien*, Gutersloh: Gutersloher Verlaghaus Gerd Mohn.

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