

## **ABSTRACT**

### **SICKNESS AND HEALING:**

#### **A CRITICAL ANALYSIS OF THE RESPONSES OF CHRISTIANS WITHIN THE METHODIST/WESLEYAN TRADITION IN CAP-HAITIAN, HAITI**

by

Guenson Charlot

On official religious records, Haiti is a Christian country with an average of 80 percent Roman Catholic, 16 percent Protestant, and 4 percent other kinds of religious beliefs (Thomas 4). Despite this high percentage of Christians in Haiti, religious beliefs and practices are not shaped by biblical teaching but rather by animistic beliefs passed on to Haitians by their African ancestry through oral tradition.

In recent years, Evangelicalism has gained significant ground in Haiti. One would hope to believe that once the Haitian encounters and accepts Christ, the transforming power of the Gospel message will ultimately uproot every trace of animism in his beliefs and practices. This does not seem to be the case because animistic living and thinking becomes palpable in times when the life of many of these Christians is threatened by circumstances, such as severe sicknesses, that are perceived to be from the spiritual world.

It is based on such a premise that this project has been an attempt to critically investigate why many Christians within the Methodist Tradition in Cap-Haitian tend to respond to sickness and healing using folk religious practices. This project will challenge and encourage Evangelical leaders to develop discipleship tools that will enable Haitians Christians to respond to illness from a more biblical perspective.

The significance of this research project is to address the syncretistic faith that many Haitian Christians are practicing in Haiti. This project has been proved unequivocal after it reveals that participants' response to the issue of sickness and healing shows a significant animistic influence due to lack of proper understanding of biblical teaching about sickness and healing.

## DISSERTATION APPROVAL

This is to certify that the dissertation entitled

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METHODIST/WESLEYAN TRADITION IN CAP-HAITIAN, HAITI.

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Guenson Charlot

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In Partial Fulfillment  
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Doctor of Ministry

by

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## **CHAPTER 1**

### **NATURE OF THE PROJECT**

#### **Overview of the Chapter**

This chapter identifies the Haitian Christians within the Methodist tradition in Cap-Haitian and their responses to the problem of sickness and healing as an important concern of a research project. It introduces this writer who points out what has led him to research this particular issue. Furthermore, this chapter lists the purpose of this research and the research questions that need to be answered in order to accomplish the purpose of the research. It also states three reasons this research matters. Then it provides definitions for some of the most important terms and concepts that relate to the issue being researched. Subsequently, it sets the boundaries for this study, identifies relevant literature that addresses the issue that this researcher will need to explore, and elaborates on the research methodology that will be used to answer the research questions. The chapter ends with an overview of the project.

#### **Personal Introduction**

I grew up in a social, cultural, and religious context where my faith as a Haitian Christian is believed to be of foreign descent in the same way as my current geographical location and my official language. The consequence is that—as it is believed and taught within the Haitian religious academia—my present religious Christian faith as an imported faith is foreign to my natural religious penchant. As a result, I should not expect the Christian faith to be able to shape or influence my belief system at any significant level within my local indigenous context. Unfortunately, this widespread belief that the Christian faith is foreign to modern Haitians in the same way it was brought and forced

on our slave ancestors by their masters has not been properly dealt with by foreign Evangelical missionaries who have worked in Haiti or by national Evangelical Christian leaders. The consequence is that most of us in Haiti tend to live a dual religious life. We adopt Christianity at one level, but we inherit Voodoo, the traditional indigenous religion, at another more hidden level. There are many indications that most of us do not tend to claim and believe that the Gospel is our own. The most apparent evidence is that we find it almost impossible to fully trust the God of the Gospel when we face life's threatening crises such as sickness. Let us consider, for example, the following scenarios.

I have a family friend whom we shall refer to as Pete. He is a 'committed' Christian. He is a member in good standing of the church where I spent most of my childhood and teenage years before I went to Bible College in 2001. In fact, Pete is a member of the mass choir of the church and has been since I was the director of that choir in 2000. He is a handyman who helps my wife and I with many projects that need to be done in our house. Recently, Pete was in our house fixing our broken dining table. In our conversation, we came to a point where I made mention of a member of the choir he is part of who recently passed away. Pete gave me a well-expected explanation about how the lady died. He said the lady loaned some money to someone. The person, instead of paying back the money to the lady, cast a spell on her. She became very sick and later died. I asked Pete how the church responded to the lady's sickness and whether they went to see her and pray with the lady before she passed away. He said yes. Along with a group of believers from the choir, Pete himself went to see the lady. Then Pete said: "When I saw her I could at once realize that that particular sickness required a particular treatment." Then I asked Pete, "Did you pray for her?" He said "yes, but you know,

though we prayed, we knew what she must have done or where she should have gone to be treated.” By this Pete, a committed Christian and an active member of the mass choir of one of the most well-known Evangelical churches in town, implied that the lady should have gone to seek treatment from a witchdoctor.

A family in a Wesleyan-Methodist Church was faced with the sickness of their daughter. They took her to the hospital, but the tests revealed nothing. After all the attempts of medical doctors to treat her, she showed no signs of improvement. The mother, who is a Sunday school teacher, prayed and asked for prayers. The pastor and church board got involved in helping pray for her healing. Still, there were no signs of improvement. After a while, one member of the church board suggested that the mother seek treatment for her daughter from a witchdoctor for they have tried everything from medical treatment to prayer and there were no signs of improvement. They assured the mother that they would not discipline her or keep her from working in the church.

These two stories reflect the daily reality of how most Haitian Christians respond to the issue of sickness and healing. There cannot be anything more injurious to one's relationship with God than a practice of such a syncretistic lifestyle. This has become both a puzzle and a burden to me. I even wonder at times whether we should call people Christians if they are constantly involved in such practices. However, though it appears to be paradoxical to me, I observe the obvious desire in some of these people to faithfully trust and serve the Lord. They sincerely profess Christ. On the other hand, it seems natural for them to seek healing in ways that contradict their Christian faith. The big question is ‘why?’ Maybe it is because in Haiti we do not see Christianity as a day-to-day religion. Maybe beliefs we have learned from our folk religion known as voodoo are not

dealt properly with after our conversion to Christianity. Maybe the first well intended Evangelical missionaries who brought Haitians the Gospel wrapped up in their language, culture, and worldview had ignored the importance of understanding the Haitian culture and then failed to contextualize their message to us. Maybe Christ is seen as one of the various gods in our Haitian pantheon that deals only with questions related to the afterlife.

The attempt to understand why Haitian Christians respond to the problem of sickness by seeking solutions from folk religious practices is what leads me to select the study of this particular issue of syncretism in the life of the Christians in Haiti.

### **Statement of the Problem**

On official religious records, Haiti is a Christian country. Religious census dated as recently as 2012 estimates the religious affiliation of Haitians to be 80 percent Roman Catholic, 16 percent Protestant, and 4 percent other kinds of religious beliefs (Thomas 4). It is interesting to note that these statistics do not even record Voodoo as a religion neither do they include any percentage of Haitians adhering to the religion. In light of this, these statistics can be said to be true only in principle and at a superficial level of religious affiliation in Haiti. At a deeper cultural level where learned assumptions govern behaviors, these official religious records do not seem to accurately reflect the religious reality in Haiti. A correct understanding of religious allegiance, belief, and practice in Haiti necessitates an observation of the behaviors of the Haitian people in times of crisis or life threatening situations. When this is done properly, the evidence will show that the majority of Haitian Christians do not act according to the Christian faith they profess when they face critical situations that pose a threat to their lives. They are more inclined



to turn to their folk religion—Voodoo—to find answers to their issues instead of fully trusting the God of the Bible. Perhaps this is the primary reason why “it is sometimes said that Haiti is 90 percent Catholic and 100 percent voodoo....” for “...almost all voodoo adherents would call themselves Catholics, and most Catholics practise voodoo” (D. Nicholls 400). Even the rise of Evangelicalism in Haiti does not seem to assuage the influence of voodoo beliefs and practices on Haitian Christians. The result is syncretism—a mixture of indigenous traditional religious beliefs and practices with those of Christianity.

For decades, historians, as well as theologians, sociologists, anthropologists, and missiologists who are interested in the study of Haiti, have been probing this syncretic dichotomy in Haitian religious reality. As a result, there are several well-written and documented resources on Haitian voodoo versus Christianity. Most of the works produced on the issue help explain the history of the encounter between the two religions, its implication, and its impact on all aspects of the Haitian society. From a theological perspective, there is a widespread understanding and awareness that the pervasive influence of voodoo on Christians in Haiti is seriously detrimental to a true biblical Christian faith in Haiti. However, the need to address the issue is more than simply acknowledging the injurious influence of voodoo on the faith of Haitian Christians. More work needs to be done that addresses the problem at a level more deeply than what can be visibly seen. The issue needs to be approached from a perspective that can foster and enable a transformation of the Haitian belief system which can be said to be the bedrock for the issue of the syncretistic duality observed in Haitian Christians religious life. An analysis of the response of Haitian Christians to the issue of sickness and healing

provides the perfect opportunity to address the problem. This study should help Haitian Christians fight against syncretism by enabling them to identify and understand areas in their belief system that tend to lean them toward folk religious practices, giving them useful information so that they can theologically reflect on their beliefs and actions about sickness and healing from a biblical perspective.

### **Purpose of the Project**

The purpose of this research was to understand why many Christians within the Methodist Tradition in Cap-Haitian tend to respond to sickness and healing using folk religious practices in order to challenge and encourage Evangelical leaders to develop discipleship tools that will enable Christians to respond to illness from a more biblical perspective.

### **Research Questions**

In order to fulfill the purpose of this research, appropriate questions needed to be formulated and answered. Three such questions were formulated for this research. There were at least three reasons why these questions were important for this research. First, they were framed in order to limit the scope of this research. Second, they were asked in order to enable this research to progress systematically through its stated purpose. Third, they were formulated to enable this researcher to obtain accurate information and insights about the issue being studied.

#### **Research Question #1 (RQ1)**

How do Christians within the Methodist Tradition in the Cap-Haitian area respond to the problem of sickness and the hope of healing in their lives?

### **Research Question #2 (RQ2)**

What are some of the most popular traditional religious practices observed by Christians within the Methodist Tradition in Cap-Haitian when faced with sickness?

### **Research Question #3 (RQ3)**

How do Cap-Haitian Methodist Christians understand and apply scripture when faced with the question of illness and healing?

### **Rationale for the Project**

There are several reasons why there is an urgent need to address this issue of syncretistic duality in Haitian religious reality as expressed in Haitian Christians seeking healing assistance from voodoo practices.

The first and primary reason is theological. From a theological perspective, syncretism is a repulsive way of life in the sight of the God of the Bible. Most Evangelical theologians would argue that “theology is biblical” which means that theology “takes its primary content from the Old and the New Testament Scriptures” (Erickson 16). This implies that what is known of God came from what God has revealed to humanity in the Bible. The Bible teaches about the nature of God, His work, His will, His expectation of humanity’s response to His offered relationship, His requirements to maintain a relationship with Him among many others. There is no sin that concerns the biblical authors more than mingling the worship of God with the worship of idols. In the Hebrew Bible, Israel is called to worship Yahweh and only Yahweh (Deut. 6). Jesus echoes this same imperative (Matt. 4:10; Luke 4:8). And, the apostles continue the same teaching (I Cor. 8:6; Eph. 4:5-6). In the Hebrew Bible, Israel’s divided loyalty is unconceivable and is punishable by death (Ex. 22:20). Paul

calls the Corinthian Church to flee from idolatry which often takes the form of pagan sacrifices for such sacrifices are offered to demons not to God thereby practicing them means being participants with demons (I Cor. 10).

Today, some scholars of religion would argue for a distinction between idolatry and syncretism. The latter can be considered as persistently serving a pantheon of gods at the same time with the same level of loyalty while the former can be viewed as momentarily wandering away from the one true God. Scholars such as Frederick Greenspahn express concern whether it is even proper to consider ancient Israel religious practices as syncretistic. He argues that “[t]he terms ‘idolatry’ and ‘syncretism’ are widely and sometimes promiscuously used to describe ancient Israelite religious practices; however, the biblical evidence itself is not always clear” (Greenspahn 489). Greenspahn does not, however, deny that ancient Israelites might have been syncretistic and idolatrous, but, through his reading of the Hebrew Bible, he strongly argues that syncretism turns out to be the conclusion of today’s interpreters rather than something the biblical writers saw. The fact that scholars can even attempt to make a case against syncretism in ancient Israel religious practices where the biblical writers are unequivocally critical of Israel’s idolatrous conduct explains how the practice of syncretism is odious to God. Considering this, syncretism should always be an urgent matter to address when it is perceived in any Christian religious environment.

The second reason this research matters is missiological. Gailyn Van Rheen writes about a Brazilian woman who has challenged the naïveté of future North American missionaries going to her country. The woman wrote: “How can we expect missionaries to be effective if no realistic preparation about spiritism is offered prior to going to my

country?” She goes on to ask: “How cynical are untrained missionaries toward beliefs in spiritism?” (Van Rhee 17). Unfortunately, such questions were never asked when the first Evangelical missionaries arrived in Haiti in 1807, three years after Haiti’s independence. All missionaries to Haiti should be informed about the Haitian belief system and worldview to be effective in their missionary work whatever the nature of such work. Missionaries called to work in Haiti should be willing to watch the daily lives and activities of the Haitian people and commit time and energy to learn and understand the meanings Haitians attach to circumstances they face every day in their lives. The old doctrine of *tabula rosa*, which is the missionary doctrine that there is nothing in the non-Christian culture on which the Christian missionary can build (Hiebert *Understanding Folk Religion* 19), has been proven counterproductive and even harmful to the spreading of the Gospel in Haiti. Now is the time when missionaries need to study and understand the religious practices of the people where they are called to serve. This research can be a significant starting point to help with a deeper understanding of the Haitian belief system.

The third reason this research matters is soteriological. It can be argued that salvation is at the heart of every missionary endeavor. Salvation is the inaugural point, the beginning, or the birth, of the restoration of the relationship between God and human beings. Important to salvation is conversion. Theologians devote significant time in their studies and writing to define and explain the meaning and requirements for conversion. To Wayne Grudem, “[c]onversion is our willing response to the gospel call, in which we sincerely repent of sins and place our trust in Christ for salvation” (709). To Erickson, “[t]he first step of the Christian life is called conversion. It is the act of turning from one’s sin in repentance and turning to Christ in faith” (296). Thomas Oden defines

conversion in this way: “Conversion is a reversal of disposition and personal moral direction. Conversion involves a turning away from sin (repentance) and a turning to Christ (faith) two phases of a single act of turning” (*Life in the Spirit* 101). The effort these theologians deploy to define conversion has been in some way very helpful. By and large, they capture the essence of what the Bible teaches about conversion. However, their contribution seems to be more theoretical than practical when it comes to the reality of conversion and salvation in the lives of the converted people throughout the world. The reason is that most of the time conversion, as theologically defined here, resulted primarily in changes of only some behaviors.

Paul Hiebert observes: “Deeply committed Christians faithfully attend church services and pray to God in times of need, but feel compelled during the week to go to a local shaman for healing, a diviner for guidance, and an exorcist for deliverance from spirit oppression” (*Understanding Folk Religion* 15). There is clearly a belief system issue at play here. This reality calls for an anthropological exploration of conversion from the theological perspective, because anthropology is the best-suited field to help explain and understand the origin of people’s belief and behavior. From an anthropological perspective, conversion will encompass a change of behavior, belief system, and worldview which underlies the former two (Hiebert *Transforming Worldviews* 11). As such, Hiebert’s view of conversion seems to be of significant value. He contends, “Conversion may include a change in beliefs and behavior, but if the worldview is not transformed, in the long run the gospel is subverted and the result is a syncretistic Christo-paganism, which has the form of Christianity but not its essence” (Hiebert *Transforming Worldviews* 11). This is primarily the burden of this research. Can a

Christian who lives a syncretistic Christo-paganism lifestyle by seeking healing for her/his problem of sickness be counted as being saved? The attempt to help Christians in Haiti respond to the problem of sickness and healing from a biblical perspective is invaluable for true faith, conversion, and salvation in Haiti.

### **Definition of Key Terms**

The nature of this research calls for the definition of a few key technical terms and phrases because of their importance and repetitive usage throughout the research. Before any attempt to define the selected terms, it is important to take a few things into consideration. One, this researcher acknowledges that there are many sources from different disciplines where definitions of these terms can be found. In this, particular interest is given primarily to definitions that come from works that anthropologists and/or missiologists have produced. Even in these two restricted fields, there are various definitions available. Those that are noted here reflect the best understanding of the terms for the purpose of this research. Secondly, this author does not give in to the temptation to explore any of these terms beyond the bare definitions cited. On occasion, a sentence or two may be added for clarification. When necessary, more than one definition may be cited since at times a definition may define a concept only in part.

#### **Animism**

The first word worth defining in this research is “Animism.” Any serious attempt to define animism would begin with the work of the famous anthropologist E.B. Tylor who is known to be the one who coined the word (Chidester 78). Tylor coined the word ‘animism’ as a substitute term for ‘spiritualism’ in his investigation of ‘Spiritual Beings.’ He writes, “I propose here under the name Animism to investigate the deep-lying

doctrine of Spiritual Beings, which embodies the very essence of Spiritualistic as opposed to Materialistic philosophy” (Tylor 425). Ever since Tylor penned his definition, several modern- and present-day anthropologists have followed him in defining the term. Philip Steyne defines animism as “a belief in spirit beings which indwell everything and everyone; a belief in gods, co-equal or in a hierarchy; or a belief in one supreme deity” (34). To Van Rheezen animism is: “the belief that personal spiritual beings and impersonal forces have power over human affairs and, consequently, that human beings must discover what beings and forces are influencing them in order to determine future action, frequently, to manipulate their power” (20).

### **Belief Systems**

Hiebert, Daniel Shaw, and Tite Tienou, in their book *Understanding Folk Religion*, contend that belief systems “are bodies of knowledge that emerge in response to key questions and agreed-upon methods to find answers” (39). They further explain that “Belief Systems guide thought processes and enable people to focus on experience and formulate theories to help them solve problems of life and pursue higher goals” (Hiebert 40 *Understanding Folk Religion*). In *Transforming Worldview*, Hiebert refers to “Belief Systems” as “knowledge systems” which he considers are made up of at least three key components. He lists them as follow: “(1) A set of beliefs about what sorts of entities and processes make up domain of inquiry; (2) a set of questions worth asking; and (3) a set of epistemic and methodological norms about how the domain is to be investigated, how theories are to be tested, and how data are to be collected” (83-84).

### **Folk Religion**



Folk religion is another concept that demands a definition for this research.

According to Scott Moreau et al. “Folk religions are a mixture of local religious traditions (‘little traditions’) often intermingled with animistic beliefs on the pragmatic level” (288).

Moreau observes that: “...individuals often are orthodox on the surface but have belief systems and religious practices built on an animistic and folk religious core” (289).

Gustave Mensching helps to further understand the concept by explaining that in folk religion of every kind, the *folk*...is the carrier of the religion (254). The folk is the set of particular beliefs, rites, and practices observed within a given community. Mensching contends that: “[t]he individual has not yet discovered himself but has a life quite bound up with that of the collectivity” and “...earliest religious communities are of vital type: family—and house—community, sib and tribe, folk and state...these vital communities for their part have a sacred stamp and are at the same time religious communities” (254)

This is perhaps why some scholars refer to folk religions in terms of: “Popular Religion; Little tradition; Religion of the people; and common religion” (Moreau 289) among others. In his comparative examination of folk religion to what he calls elite religion, Hiebert contends that:

Confucianism, Buddhism, Hinduism, and Christianity, deal with the ultimate questions and claim universal truth. In contrast, the everyday life of most villagers is dominated by folk religions that deal with everyday questions and rely on local earthbound spirits, ancestors, witchcraft, magic, evil eye, and other unseen powers to explain and respond to human dilemmas. (131)

In other words, folk religion seeks to find meaning in this life, seeks to deal with the problem of this life, and seeks to give knowledge to decide and resolve the problem of

misfortunes and the unknown (Hiebert *Transforming Worldviews* 132). A perfect example of what folk religion is can be drawn from Colin Chapman who once made “the point that Sufism developed as a way of addressing ‘the hunger of the heart’ for those who ‘longed for a faith that has reality for the individual’” (Sire 275).

### **Syncretism**

Syncretism is perhaps the most difficult term to define in this research. It has been used in a variety of ways within the religious academia. This makes it almost impossible to find any proper terminology that can comprehensively and satisfactorily define the term in a way that meets the expectations of everyone. This is why scholars are so divided in their definitions of syncretism. What is attempted as a definition of the term in this section is being restrictively and strategically used to fit the purpose of this research.

From a broad perspective, Robert Schreiter writes: “there have been various points of departure for understanding syncretism. It has been spoken of as an inconsistency, in which conflicting ideas and practices are brought together without coherence. It has been called the result of an incomplete existential (deep-level) encounter between two cultures” (174). From a more restrictive Christian perspective, Charles Kraft defines syncretism as “a blend or mixture of Christianity with pre-Christian beliefs and practices relating to supernatural beings and powers” (*Anthropology for Christian Witness* 376). He later on tweaked his definition of the term saying: “Syncretism is the mixing of Christian assumptions with those worldview assumptions that are incompatible with Christianity so that the result is not biblical Christianity” (Kraft, *Culture, Worldview and Contextualization* 390). Hiebert et al. takes the same trajectory by talking of syncretism as “combining elements of Christianity with folk

beliefs and practices in such a way that the gospel loses its integrity and message” (378). According to Van Rheenen, to be syncretistic is to “blend beliefs and practices from different systems into new religious configurations” (96). Moreau argues: “Most simply defined, *syncretism* refers to the replacement of core important truths of the gospel with non-Christian elements” (288). These definitions, in one way or another, reflect the nature of this research by capturing the tension that exists between beliefs and practices of folk religion and Christianity which tension represents the core concern of this research. However, for this project, this writer intends to use Hiebert’s definition unless otherwise indicated.

### **Worldview**

Worldview, even more than syncretism, is an intricate concept. This term applies to countless subjects of studies and is used not only by scholars of religion or philosophy but by everyone in the academia and even by the common people. What follows are definitions taken from a few anthropological and missiological resources.

Daniel Sánchez defines worldview as “the view of the cosmos” which “comprises the lenses we use to help us interpret reality” (1). To Kraft, worldview is “the set of suppositions...underlying how people perceive and respond to reality” (*Culture, Worldview and Contextualization* 385). Kraft contends:

A whole group (society) may chart its course according to a single map of reality... We call such a perception shared by a social group and we see that worldview as the core of a culture, functioning, on one hand, as the grid in terms of which reality is perceived, and, on the other, as that which provides guidelines

a people's behavior response to that perception of reality (*Anthropology for Christian Witness* 51-52).

N. T. Wright describes worldview as “the grid through which human perceives reality” (38). Norman Geisler observes that “people do not see things as they are but as they appear to be through the colored glasses of their worldview” (241). According to David Naugle, “a worldview is a semiotic system of narrative signs that has a significant influence on the fundamental human activities of reasoning, interpreting, and knowing” (253). Michael Kearney adds another interesting element to the definition of worldview. He says: “World view of a people is their way of looking at reality. It consists of basic assumptions and images that provide a more or less coherent, though not necessarily accurate, way of thinking about the world. A world view comprises images of Self and of all that is recognized as not-Self...” (Kearney 41). John Valk's definition follows this same line of thinking. He writes: “Worldviews are those larger pictures that *inform* and in turn *form* our perceptions of reality. They are *visions of life* as well as *ways of life*, are individual and personal in nature, yet bind adherents together communally” (Valk 159-74). This last definition is from James Sire. He writes:

A worldview is a commitment, a fundamental orientation of the heart, that can be expressed as a story or in a set of presuppositions (assumptions which may be true, partially true or entirely false) that hold (consciously or subconsciously, consistently or inconsistently) about the basic constitution of reality, and that provides the foundation on which we live and move and have our being. (Sire 20)

In light of all these definitions, worldview is understood throughout this research to mean the underlining imperceptible set of beliefs of self and the universe upon which

life commitment is founded, character formed, and behavior informed. It is the hope of this research that such understanding will be safeguarded by a strong and practical biblical perspective in the lives of the Haitian Christians.

### **Delimitations**

The religious problem of syncretism is a global problem. As can be noted from the definitions above, syncretism can take various forms. No one single project can pretend to address the issue from its various angles. As such, the focus on syncretism in this research was not an attempt to study the concept in length. It was rather an effort to investigate the responses of Haitian Christians in Cap-Haitian to the issue of sickness and healing in order to understand the syncretistic duality that is being observed in their religious lives.

Cap-Haitian is quite a big town with a population of a little below one million. In the same way, there are many churches and denominations in the city. For this research, the researcher chose to work with three churches within a ten-mile radius. All of these churches are of the Methodist tradition though they are not part of a same denomination. They were selected strategically. Cap-Haitian is the capital city of the Northern Department of Haiti. People migrate to the city from all the other eighteen districts of the department. The city has two entry points that form the two major suburbs where people who migrate from the other eighteen districts congregate. The three Churches were chosen from these two major suburbs and downtown which enabled the research to reflect samples of people of the entire region.

People were chosen to represent several districts where they originally came from in order to find out which parts of the region Christians tended to use folk religious

practices more than others. In the selection of the samples, older people and heads of family units were preferred to younger ones. The reason was that the older generation has remained more traditionally conservative than the younger generation that has been more exposed to Western culture. Both males and females were chosen.

### **Review of Relevant Literature**

This research consulted literature in three broad categories. First, anthropological resources written from both a secular and a Christian perspective were consulted. These resources were used in the study of some of the most important themes and concepts indispensable for an understanding of the issue being studied in this research. Scholars who wrote from a Christian perspective, such as Paul G. Hiebert, Charles H. Kraft, David K. Naugle, James W. Sire, Gailyn Van Rhee, David J. Hesselgrave, and Philip M. Steyne among others, have tremendously contributed to helping understand the meaning, function, and structure of concepts such as worldview, animism, and belief system that lie underneath the problem of syncretism. For instance, a chapter such as “The Flaw of the Excluded Middle” on Paul Hiebert’s *Anthropological Reflections on Missiological Issues* made the task of this researcher easier to analyze the framework of the Haitian folk religious system and its influence on people’s lives in Haiti. It also helped to realize why and how missionaries have failed to appropriate their messages to the indigenous people. Resources from a secular anthropological perspective also contributed to the realization of this work. For instance, classic works such as William McDougall’s *Body and Mind: A History and Defense of Animism* and Edward B. Tylor’s *Primitive Culture* helped tremendously in framing a historical background for the theme ‘animism.’

The second body of literature this research consulted was resources on African and Haitian studies. From this literature corpus, a framework for an understanding of Haitian worldview, culture, theology, animism, and spirituality was drawn. These resources helped refine the perspective to a more restricted and contextualized Haitian perspective. Works such as John S. Mbiti's book *African Religions and Philosophy*, Jacob K. Olupona's *African Spirituality*, Matthew Michael's *Christian Theology and African Traditions*, and James H. Sweet's *Domingos Alvares, African Healing, and the Intellectual History of the Atlantic World*, among others, helped to retrace the issues studied in this research from its African roots. Other resources concentrated on the study of the Caribbean history that helped this researcher acquiring a better understanding of Haitian religious background. Among such resources were the works of Ennis B. Edmond's *Caribbean Religious History: An Introduction*, Margarite Fernandez Olmos' *Creole Religions of the Caribbean: An Introduction from Vodou and Santeria to Obeah and Espiritismo, Second Edition (Religion, Race, and Ethnicity)*, and *Sacred Possessions: Vodou, Santerfa, Obeah, and the Caribbean (Studies of Great Texts in Science)*. Furthermore, a number of resources on Haitian history and religion were consulted. Among them were works from Jean Price Mars who wrote *So Spoke the Uncle*, Emmanuel C. Paul who wrote "*Panorama Du Folklore Haitien: Presence Africaine en Haiti*,"<sup>1</sup> Alfred Métraux who wrote *Voodoo in Haiti*, and R. Murray Thomas who wrote *Roots of Haiti's Vodou-Christian Faith: African and Catholic Origins* to name a few.

The last broad category of literature consulted was resources that addressed the issue of sickness and healing from a biblical perspective. They were used to help flesh

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<sup>1</sup> This is translated: "Panorama of Haitian Folklore: African Presence in Haiti"

out a biblical perspective on the issue of sickness and healing. A number of books on healing and the Bible were used. Among many there were: *Healing in the Bible* by Frederick J. Gaiser and *The Healing Tradition in the New Testament* by Douglas Ellory Pett to cite a few.

### **Research Methodology**

To elaborate on the research methodology used for the project, the following are discussed in this section: (1) Type of research (2) Participants; (3) Instrumentation; (4) Data Collection (5) Data analysis (6) Generalizability.

#### **Type of Research**

The fact that this research investigated the responses of Haitian Christians in Cap-Haitien to the issue of sickness and healing meant that it was a pre-invention type of research. The attempt was (1) to identify the ways in which Haitian Christians respond to the issue of sickness (2) to describe the popular traditional religious practices they have used in seeking healing for their sicknesses, and (3) to determine how they might address the issue from a more biblical perspective. Furthermore, because the sole focus of this research was on people and their beliefs, the research was conducted through a qualitative lens. That helped to describe, explain, understand, and interpret the responses of the Haitian Christians in Cap-Haitien to the issue of sickness.

#### **Participants**

Participants in this research were all the members of three churches within the Wesleyan/Methodist tradition in the Cap-Haitien area. The three churches were strategically chosen. All participants were Haitian-born natives. They were part of a non-English speaking population. The study was conducted in their native language, Haitian



Creole. They were regular members of their churches. Their ages ranged from 18 years old and up. They were both male and female. The senior pastors were asked to help choose the best participants possible based on the desired characteristics. After signing their consent agreements for the research to take place in their churches, the pastors were asked to help select twenty persons within their congregations who best fit the criteria for this research. Fifteen would be chosen from each church for anonymity purposes for a total of forty-five subjects.

### **Instrumentation**

Interviews and a survey questionnaire were the instruments used in this research to gather information. They were conducted to collect data that enabled the researcher to understand the experience of the participants regarding sickness and healing and the meaning they attach to that experience. Interviews were conducted in person with each participant. The participants, the researcher, and his assistant, who helped only with taking, transcribing, and editing notes of the answers collected from the interviews, were the only persons in the room. All interviews were conducted in Haitian Creole, the native language of the researcher, his assistant, and the participants. Answers from the participants were translated into English by the researcher and his assistant.

### **Data Collection**

To collect data for this research, participants were interviewed individually twice. The first interview took the form of an unstructured interview. This researcher was aware of some apprehensions that exist regarding some methodological issues in the analysis of unstructured interviews as Wispé and Thayer (1959) noted. However, the importance of an unstructured interview to this research was too valuable to have been unheeded. The

interview helped to ferret out underlying attitudes and provide indications of their importance (Wispé and Thayer 223) to the participants regarding the issues of sickness and healing they have experienced.

Twenty-four questions guided the first interview. These questions were formulated to answer the three research questions that governed this research. Answers for each question were duly recorded either handwritten, typed, or by audio recording which ensured the collection of every bit of valuable information. An answer sheet was prepared beforehand which allotted space for the researcher to write down the answers of the respondents.

The second interview was a semi-structured interview with a survey questionnaire for each respondent to fill in. The focus was to collect concrete details about the participants. It was built to enable the researcher to understand and reflect more on the participants' knowledge, perception, and behavior regarding their experience of sickness and healing. The questionnaire also helped to test the consistency of the participants' understanding, feeling, belief, and behavior about sickness and healing. Additional notes were taken to complement the answers the respondents provided on the questionnaire.

### **Data Analysis**

The primary purpose behind collecting data for this qualitative research was to gain insights from the participants about the issue of sickness and healing. Those insights that were found came from talking to people through the two interviews that this researcher conducted with the participants. Dale T. Griffie interestingly observes that "People interviewed may not be able to say what they think., or may not be able to state their opinion in a clear way" (36). This is interesting because most of the meaningful insights

gained from the interviews were hidden among the piles of information collected. As such, data analysis here was the process by which the researcher sifted out the data collected from the interviews to hunt down meaningful insights about sickness and healing from the participants.

To analyze the data, the researcher followed the method of data analysis that Miles and Huberman suggested for analyzing interview data (Griffie 36). These are a set of five steps. One, after each interview, the researcher listened to the audio recording and transcribed the interviews. Two, the transcripts were read several times over a period of three weeks that enabled the researcher to be familiar with what was said. Three, the interviews were coded, meaning that the researcher sought to see if any themes became apparent. The themes which were identified by capital letters such as BS for belief system and BP behavior pattern. In fact, the reason behind almost all the questions that were asked was to either discover the participants' belief system and/or pattern of behavior regarding their sickness and healing experience. Belief system was described as the specific opinions of the participants regarding the issue. Similar or closely related opinions throughout the transcripts were marked with identical identifiers for proper study and interpretation. Behavior Pattern was defined as everything the participants would agree to do, whether actions were taken or not, during their sickness and healing experience. A different identifier was used to mark information that characterized a behavior pattern. Four, a summary of the coded data was written. A word document was produced with the two main codes as titles. Under each code was a list of what the respondents had said in relation to the code. The codes helped to reduce the amount of transcribed information into a few pages which allowed for a better view of the whole

picture and interpretation. Five, an interpretation was written. The interpretation was not only a summary but also an endeavor to tie together the themes and force the researcher to process the entirety of the data.

### **Generalizability**

The research was conducted in such a way that guarantees a high likelihood that any other researcher can adopt the same method and come up with the same result. Many factors will allow for this. First is the homogenous socio-cultural, ethnic, and religious make-up of the sample of participants used in this research. The participants were samples of a larger population, monoethnic group that shared a similar social and religious setting. The differences in the way they perceive things were very insignificant. Another reason that guarantees the generalizability of this research is the purpose of the research. Issues that might be related to the validity and reliability of sampling were not relevant to either the quantity of the participants involved in this research nor the goal of this qualitative research. The participants were selected based on a set of criteria constructed to identify the best possible representative of the Evangelical Christians within the Methodist/Wesleyan Theological Tradition in Haiti. The purpose was to find out how they respond to the issue of sickness and healing.

### **Project Overview**

This project is a critical analysis of the response of the Haitian Christians in Cap-Haitien to the problem of sickness and healing. Its primary concern is the duality that can be observed in Haitian Christians religious life and reality. Chapter two discusses what some of the most pertinent anthropologists, missiologists, and scholars of religion with an interest in African and Haitian studies say about such syncretistic life. The purpose here

is to glean insights into what might have been the primary reasons why Haitian Christians tend to feel compelled to seek help from folk religious practices. Chapter three outlines the various ways this researcher will investigate his research questions. The aim in this chapter is to enable this researcher to use all available and necessary means that will enable him to effectively and sufficiently collect as much as data possible that he will need for his analysis. Chapter four analyses the findings that emerge from qualitative methods such as semi-structured interviews and open-ended questionnaire. Chapter five delineates the study's major findings, ministry implications for the findings, and recommendations for further research about the subject matter.

## **CHAPTER 2**

### **LITERATURE REVIEW FOR THE PROJECT**

#### **Overview of the Chapter**

This chapter explores the work of people engaged in and contributing to the subject of sickness and healing and its various facets which is the primary concern of this work. Looking at a selected set of literature that addresses four significant issues will address this goal. First, a selection of resources on sickness and healing will be reviewed. A focus is placed on biblical and theological resources that enable this writer to establish a biblical and theological foundation for understanding sickness and healing.

Second, several key sources that address the issue of sickness and healing from an Afro-Haitian framework with a special interest in folk belief systems and syncretism are considered. These resources are used to provide a general overview of the African understanding of sickness and healing that will serve to (1) help to acquire a better understanding of the roots of the Haitian folk belief system; and (2) inform this writer about specific patterns of behavior to look for in searching for signs of folk religious practices among Haitian Christian believers.

Third, a few resources on contextualization are also consulted. The intent is to help find out which theory and or practice of contextualization might be more suitable and useful in searching for plausible ways to address the problem of this study in the context of Haiti.

#### **Biblical and Theological Foundations of Sickness and Healing**

The problem of sickness has puzzled human beings throughout time. Part of this is because after the Fall, sickness became part of the fabric of human life (Freedman 1).

As an unwanted condition of self (Hahn 22), sickness represents a direct threat to the existence of human life. From a general perspective, sickness is unpreventable. Thus, the ability to evade the grasp of sickness has always been the most coveted of all human desires (Hahn 23-25). This desire is why throughout history humankind has always been in perpetual pursuit of self-preservation. The desired outcome of the process of humankind's effort to fight against sickness is called healing. Healing is what people hope for in order to preserve life and seek happiness. As a result, countless discoveries about sickness and healing have been made and numerous volumes and articles have been written by scholars in all kinds of disciplines.

It is not just humankind that shows concern about sickness and healing. God does as well. God's written revelation, the Bible, has so much to say about the subject that it has been viewed as a rich resource for God's people at times of sickness (Simundson 330). What follows is a snapshot of the biblical and theological conversation about sickness and healing. The scope of this analysis is on the periphery of any exhaustive systematic treatment of the two concepts. For instance, it does not look at the issues here from a medical perspective that would normally attempt to dissect the different types of sicknesses the Bible records. What is represented here is in line with the general purpose of the scripture which is the theological dealings with the issues of sickness and healing. What follows is a general overview of the Old and the New Testaments' respective understanding of what sickness and healing meant, where sickness originated, and how healing had taken place.

### **Sickness and Healing in the Old Testament**

This section is an attempt to look at the early Jewish understanding of sickness and healing as recorded in the Old Testament. First, it considers the concept of sickness. In doing so, it attempts to provide a working definition of sickness based on the usage of a few significant Hebrew words that are translated as “sickness.” Then, from a broad theological perspective, it looks at three general categories of sources dealing with the origin of sickness. These possible origins are God, Satan, and sin. Second, this section concerns itself with the Old Testament perspective of healing. It seeks to provide a meaning for healing from a Jewish standpoint. To do so, it considers a few Hebrew words with special attention to the word *shalom* that best depicts the Old Testament picture for healing, health, and wholeness. It then establishes the primary source of, and the condition for, healing as recorded in the Hebrew scripture.

**Toward a Meaning of Sickness.** The Bible often uses metaphorical language in its use of many words that today have very literal meanings. This renders the task of defining any biblical term literally problematic and complicated. This is particularly true of the term “sickness” which today carries with it links to the discovery of germs, bacteria, and viruses, just to name a few concepts unknown in Old Testament times. Any attempt to define “sickness” from an Old Testament perspective should take into consideration the fact that the Old Testament world knew nothing about these modern discoveries. With this in mind, the best place to begin in any effort to find out what the biblical writers meant by “sickness” is to look at the way they used the term.

Alexander Macalister observes that “sick” and “sickness” are the translations of six Hebrew words that occur fifty-six times in the Old Testament (2). One of these six Hebrew words which is most often used for “sickness” is the noun *choli*. This word



occurs no less than twenty-three times (Unger and White 359) in the Old Testament.

However, various English Bible versions are not all unanimous in their translations of the word. For instance, *choli* is used in verses 3 and 4 of the well-known Suffering Servant passage in Isaiah 53 and the RSV, KJV, and NASB render it as “grief.” It is “suffering’ in the NEB, JB, and TEV and “infirmity” in the NAB (Unger and White 360). The origin of *choli* is believed to be the verb *chalah*, a word that occurs approximately sixty times in the Hebrew Bible and which means “to be sick, weak” (Unger and White 359). The New American Standard Bible translates *chalah* as affliction (1), disease (2), grief (1), griefs (1), illness (3), sick (1), sickness (14), and sicknesses (1).

Another important word worth noting here as well is *raph*. Jeff Benner considers *raph* to be the root of several Biblical Hebrew words related to health and sickness (1). This word perhaps provides the best idea about how sickness was understood in Old Testament times. Benner notices that the original pictographs for *raph* are the signs representing man and the mouth with the meaning open (1). He argues, “Combined, the word means an ‘open man’ and is exactly what happens when one is cut or wounded” (Benner 1). Benner’s study of this word does not fully warrant any attempt to formulate a normative definition of sickness from the Old Testament perspective; however, it helps us understand how people viewed sickness in the Old Testament. That sickness is portrayed as an “open man” indicates the understanding that sickness is that which makes humankind vulnerable; people who are susceptible to experience unwanted dangers in their lives, face undesired circumstances, and be exposed to life threatening situations. Walter Elwell and Philip Wesley Comfort, who observe that disease is used in the scripture synonymously with sickness, contend that “disease was thought of as abnormal,

something that limits one's ability to function with strength and vitality" (Elwell and Comfort 1).

Considering this Old Testament understanding, "sickness" will be understood in the remainder of this section as a state of being physically and emotionally incapacitated by undesirable circumstances that constrain a person from living and enjoying life as it normally should have been. Sickness is that malevolent intruder that causes pain, grief, sorrow, and sadness.

Many passages can be used to corroborate this Old Testament understanding of sicknesses as unwanted circumstances in the lives of people. A few of these passages are worth mentioning here. There is Deuteronomy 7:15 which speaks of God's intent to protect His people from sickness. It reads: "The LORD will remove from you all sickness; and He will not put on you any of the harmful diseases of Egypt which you have known, but He will lay them on all who hate you" (NASB). This is an unequivocal promise from the Lord that He will rid His people of the unsolicited state of sickness. This proves how much the Lord does not want His people to be afflicted by sickness. In many other instances, the Bible records people's petitions and endeavors to take sicknesses and/or diseases away from them. For instance, when Ahaziah fell and got sick "he sent messengers, telling them, "Go, inquire of Baal-zebub, the god of Ekron, whether I shall recover from this sickness" (2 Kings 1:2 ESV). Jeremiah complained: "Woe to me because of my injury! My wound is incurable! Yet I said to myself, 'This is my sickness, and I must endure it'" (Jeremiah 10:19 NIV).

**The Origin of Sickness.** From the above quoted scriptures, it is clear that God does not want sickness for God's people. However, there are so many cases of sicknesses

recorded in the Bible. The question is then, where does sickness come from? Old Testament scholars have given various causes for sickness. However, these sources or origins for sickness can fall under one of three broad categories of sources according to the Bible. These are (1) God, (2) Satan, and (3) sin.<sup>2</sup>

*God.* That God can inflict sickness is implied in several passages in the Old Testament scripture. However, it is to be noted that there is no indication in the Hebrew scripture that leads to the conclusion that sickness, as being evil, is part of who Yahweh is. God did not create sickness. In fact, even after the Fall in Genesis 3, God's judgment did not explicitly include any mention of disease or sickness (Oguntoye 32). The Jewish people, with their high monotheistic worldview, "attributed all phenomena to the one true God who had revealed Himself to them (Is 45:21)" and "God was responsible for everything including disease and evil (v. 7)" (Elwell and Comfort 1). The latter understanding can, however, be justified in the scriptures. On many occasions, God inflicted sickness on people or a whole nation as punishment. Sometimes individuals are singled out—such as Miriam's leprosy (Num 12:9-16) or the illness of the first child of David and Bathsheba (2 Sam 12:14-23) (Simundson 332). God also plagued Pharaoh and the entire population of Egypt so that the Israelites would escape slavery (Exo.7-12)

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<sup>2</sup> Walter A. Elwell and Philip Wesley Comfort in, *Tyndale Bible Dictionary* (Tyndale reference library; Wheaton, IL: Tyndale House Publishers, 2001) speak of four sources—the fourth one being "the breaking of mental/emotional and moral laws of nature." I would argue that their fourth source can be easily fall under the third source which is sin. The propensity to break any kind of laws can be traced back to our fallen sinful nature. Breaking a natural law is not completely different from breaking a spiritual and moral law. The laws of the nature are established by the same law giver, God and should not be broken for the same reason the religious laws need to be kept—absolute obedience to God. When one does not obey, he sins and must suffer the consequences of his sins, which may be punishment in the form of sickness. As such Walter and Comfort 4<sup>th</sup> source can be treated as a sub-section of source 3, which is sin.

(Oguntoye 32). It could also be argued that God used the plagues to demonstrate God's power.

Perhaps the most convincing and palpable evidence that God inflicts sickness on people is found in God's personal testimony. To the Israelites God declared: "If you will diligently listen to the voice of the LORD your God, and do that which is right in his eyes, and give ear to his commandments and keep all his statutes, I will put none of the diseases on you that I put on the Egyptians, for I am the LORD, your healer" (Exodus 15:26 ESV). It is unambiguously clear in this passage that the purpose of God's inflicted sickness is punishment for disobedience. It is observed that in the Hebrew mind, even when the immediate cause of the disease and death was obvious, the response was to pray to God for forgiveness (Numbers 21:4-9) (Walter and Comfort). Nonetheless, it is against the nature of God to think of God as a source of sickness as Walter and Comfort suggest, because this may imply that sickness was part of God's original plan. A better language to use is that of infliction. God inflicts sickness. God did not create it. It is against God's nature. Though God uses it, God hates to see God's people suffering from sicknesses. Thus, a correct Old Testament understanding of God and sickness would contend that sickness is not a creation of God, but a tool God uses to punish the enemies of God's people, display God's power, and keep God's people in line with God's will.

*Satan.* At first view, to list Satan as a source of sickness in the Hebrew scripture presupposes that in their theological thinking the Hebrew writers had already constructed a definite doctrine of the devil. Such doctrine, as it is believed in an animistic context, assumes some sort of dualism, positing an eternal struggle between two self-existing deities, the one good and the other evil as seen in Persian dualism (Caldwell 29-33). One

needs not to be an expert in Old Testament studies to realize that to the Hebrew writers the God of Israel is supreme and beside him there is no other (Caldwell 29). Such dualism was so unconceivable that in the record of the Fall the biblical writer gives no insinuation of an external evil person speaking through the serpent but represents the serpent simply as one of Jehovah's creatures, only more subtle than the rest (Caldwell 30). However, though the Old Testament writers are theologically vague in their treatment of Satan; no one can say that they are oblivious to the presence of evil forces and spirits around them. In the Hebrew scripture, there is evidence that Satan and his evil spirits are sources for sickness.

The first logical place to begin with the quest of Satan as a source of sickness seems to be in the account of the Fall in Genesis 3. However, to begin there suggests a general agreement with traditional theology that has identified the serpent as the devil. Though sickness was not part of the immediate judgment God pronounced upon humanity after the serpent succeeded in its scheme, no one can deny the fact that sickness is an aftermath of the Fall. What the Bible records about the character of the serpent in Genesis 3, and the subsequent depiction of Satan in various scriptures, makes it impossible not to see the devil in the serpent and to hear his voice as the serpent speaks in such a well-known devilish, questioning, denying, false-promising way in Genesis 3:4-5 (Caldwell 30). In such a case, Satan is understood to be an active source of suffering and pain. Sickness is undoubtedly part of the package. However, in the biblical scheme of things as well as in the Jewish mind, Satan's activity and interference with God's people is conducted under the permissive will of God.

Even in the case of Job, where Satan plays an obvious part of Job's plight, the permissive will of God permeates the whole scenario. This incredible drama that explicitly puts into play the most unbelievable cosmic plot ever written in human language is considered by general consent to be outstanding among the various wisdom books of the Old Testament (Bruce 57-60). Job is an exceptional book, not just for its literary beauty or the penetration of its thought but most importantly for "the intenseness with which one of the fundamental problems of life is wrestled with" (Bruce 57). What triggers this masterpiece is Satan's scheming probe about the motives of Job's piety in Job 1:9-11, where Satan spitefully asks: "*Does Job fear God for no reason?*" (v. 9 ESV). This question has to do with Job's piety—its grounds, and, therefore, its nature (Janzen 39). It suggests there is a crack in Job's piety that the accuser claims to see. This is a subtle corruption of the blessing of piety which turns it into a tool for manipulation (Newsom 349). This marks the beginning of the agony Job would suffer, because Satan would receive permission from God to inflict all kinds of arbitrary disasters upon Job. This experience would cause Job to depict life on earth as an imprisoned condition that gives way to a sense of hopeless toil and ignorance (Job 3:23; 7:1-2) (O'Dowd 60). This section establishes two biblical truths. One, Satan may be involved in inflicting sickness on human beings. Two, his involvement depends solely on God's permissive will.

Sin. From a biblical and theological standpoint, sin is the third observed source of sickness. In this context, sin may be classified into two broad categories. There is the sin of the ancestors being delivered upon the descendants, and there is the sin of the individual person. The sin of the ancestors can be argued from a universal perspective to argue that humankind inherits a state susceptible to sickness from its first representatives,

Adam and Eve. Their disobedience had occasioned the created order to be now under a curse (Millard 39b). One prime consequence of such curse is sickness.

Many biblical texts interpret the disruption of health as a consequence of disobedience and sin (Simundson 332) which first was committed by Adam and Eve. The following are observed as causes of sickness: “transgression and iniquity (Psalm 107:17); rejecting God’s Word (Psalm 107:20); misuse of the tongue (Num. 12:2,9,10); touching the Lord’s Anointed (Psalm 105:12-15); refusal to worship the Lord in the beauty of his holiness (Zech. 14:18-20) and marital infidelity (Num. 5 27)” (Oguntoye 31). Every one of these acts is sinful. This demonstrates a strong connection between sin and sickness in the mind of the biblical writer.

There are several scripture verses in the Old Testament that can be used to support the assertion that sickness can be the result of sin. In Genesis 12:17, Pharaoh is inflicted with serious diseases because of the sinful act committed to Abram’s wife Sarai. This is true for the Jewish people as well. When they sinned, they were often inflicted with sicknesses as punishment. For them to have been spared from the same curses that plagued Egypt, they had to remain obedient to God. They ought not to sin. Otherwise, sickness will be inflicted on them. God gave them the following conditional promise: "If you listen carefully to the LORD your God and do what is right in his eyes, if you pay attention to his commands and keep all his decrees, I will not bring on you any of the diseases I brought on the Egyptians, for I am the LORD, who heals you" (Exodus 15:28 NIV).

It appears to be that the primary reasons people become sick is a result of the coming of sin into the world (Alexander 147). In other words, from a broad theological

perspective, sickness originated with sin. Sickness is the product of sin. God does not create sickness. He only uses sickness to punish people who sin against him. Sin in itself is from human beings, the product of humanity's abused freedom (Oden, *The Living God* 257). This leads to the understanding that this unwanted state of suffering originates from humankind which in return has its own consequences of sickness. Hence, looking at this issue from the theological perspective of the fallen nature of humanity, it is sound to argue that sickness is a retribution for sin, thus making sin the primary cause of sickness. However, looking at the issue of sickness from a more restricted perspective, it is not the biblical understanding that every sickness an individual suffers is actually the result of a sin that he commits. This comes out more clearly in the New Testament concept of sickness which is discussed later in this study.

**Toward a Meaning of Healing.** Much has been observed about sickness from an Old Testament point of view. In this section, the intent is to concisely look at what healing may have meant to the Jewish people. It must be noted that healing and/or health, in the same way as sickness, can be a very intricate and delicate term to study. The reason is that it is a word that concerns a variety of fields of studies such as medicine, anthropology, and theology. For instance, from a strictly technical sense, there is a difference between curing and healing. Tamara Eskenazi notes that the difference is correlated to two different terms for sickness: disease and illness (Eskenazi 83). She quotes Arthur Kleinmann who once said: "*Disease* refers to malfunctioning of biological and/or psychological processes, while the term *illness* refers to the psychosocial experience and meaning of perceived disease" (Eskenazi 83). Here illness is a much bigger issue than disease. To Eskenazi, healing pertains to illness and tends to mean to



heal the person in the community. No such technical distinction is intended in this section. Healing and its cognates will be considered here only as they relate to their counterpart—physical sickness or the malfunctioning of biological process of an individual—that has been the focus of the previous section of this study. This provides warrant over against any metaphorical and/or figurative usage of the word in the Bible which may imply a spiritual, ritual, or cultural meaning.

Frederick L Gaiser interestingly declares that “healing is a matter of life and death, a part of the perpetual pursuit of happiness and self-preservation” (ix). This statement carries some truth to it. Healing is desirable to all human beings. However, it seems that Gaiser views the healing question mostly from an anthropological standpoint since the pursuit of happiness and self-preservation is a uniquely human endeavor. God is very interested in healing as well. Eskenazi describes the Bible as a book of healing. She unashamedly declares, “One of [the Bible’s] most pervasive agendas from the very beginning was to provide hope and healing” (Eskenazi 77). In fact, God makes his interest in healing unmistakably clear in declarations such as this in Exodus 15:26: “I am the Lord, your healer.”

The root word for healing, heal, and healer can be said to have come from the Hebrew word *rp*’ which means heal, restore, make whole, repair and mend (Chan and Song 1162). This root word is said to occur no less than sixty-seven times as a verb and nineteen times as a nominal derivative in the Old Testament (Brown 597). These words can be associated with a number of things related to life in the ancient Israel. For instance, it can be used in the context of restoring a drought-stricken land devoured by locusts (2 Chronicles 7:14), mending the earth’s fissures (Psalms 60:4), recovering of a

mildew-infected house (Lev. 14:48), to name a few (Brown 596). The concern here is not any of these meanings of the word. It is rather the way the word is used in passages such as 2 Kings 20:5 which reads: “I have heard your prayer; I have seen your tears. Behold, I will heal you” (ESV). In this context, where the word is addressed to a physically sick person, the term can be viewed to mean healing a sick body. As such, healing can be understood to mean God’s supernatural intervention to restore or to make whole again a body that has been stricken or plagued by some sort of physical illness.

This assertion presupposes a fundamental understanding of the Jewish people regarding physical healing. This is the idea that Yahweh is the ultimate source of healing. Unlike in Mesopotamia and in Egypt where a system of healing that integrated folk belief, religious and magical rituals, and prescribed treatments were administered by physicians and exorcists, (Brown 600) healing to the Jewish people was administered by their ultimate physician, Yahweh. It must be pointed out that unlike in Egypt, it was not the priests who healed in Israel. It was not even the prophets who often received the divine revelation associated with healing who actually performed the healings. It was Yahweh who always healed. Some even spoke of Yahweh’s “healing monopoly” in Israel (Brown 600).

This does not intend to suggest that the Jewish people in the Old Testament had never sought healing from medicine. Evidences have shown that they have used natural roots and plants as medicine though they were by far less advanced in medical science than their contemporaries.<sup>3</sup> In Exodus 21:18-19 it is said: “*When men quarrel and one*

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<sup>3</sup> The lack of the Jewish medical advancement can be the result of their theological worldview and religious practices. As Gaiser points out, burials in Egypt tradition came with the practice of embalming of the dead which entailed removal of internal organs.

*strikes the other with a stone or with his fist and the man does not die but takes to his bed, then if the man rises again and walks outdoors with his staff, he who struck him shall be clear; only he shall pay for the loss of his time, and shall have him thoroughly healed*" (ESV). Here a law is prescribed stipulating the way an injured Israelite should be treated. The means of the treatment is medical rather than divine. This assumes the existence and practice of treatment for wounds, bruises, and fractures (Gaiser 31).

Furthermore, Lawrence Boadt observes, "For wounds and external sores, they had many useful remedies, including the famed balm of Gilead that Jeremiah mentions in his oracles (Jer. 8:22)" (Boadt 248-49). However, in the same way sickness was primarily attributed to God because "the ultimate power over life, sickness, and death lies in the hands of Yahweh," the primary source of healing would be God (Boadt 249). Therefore, those who were sick were expected to seek healing from Yahweh. This is the widespread view of the Psalmist as portrayed in Psalms 30:2; 41:2-3; 103: 2-4; 147:3 to name a few. Any attempt for a sick Israelite to seek healing outside of Yahweh is considered an act of covenantal disloyalty or betrayal. For instance, it is reported that: *"In the thirty-ninth year of his reign Asa became diseased in his feet. His disease was severe, yet even in his disease he did not seek the LORD, but the physicians"* (2 Chronicles 21:16 NASB). To the Chronicler in this verse, King Asa's reliance on physicians only for his healing instead of Yahweh is a detestable act of betrayal.

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This was productive of some degree of anatomical knowledge. To perform such task, the priest in Egypt had to come in close proximity to the dead bodies which was a prohibited practice in Israel. Priests were holy people who should avoid being defiled by anything unclean of which a dead body is the most unclean thing a priest could have ever touched (Num. 19:11-12; Lev. 21:1-4, 11).

Considering this reflection, significant observations can be made to help frame a concise biblical and theological understanding of the Old Testament understanding of sickness and healing. First, it can be observed that in the mind of the Jewish people, Yahweh is the one who ultimately causes sickness. In other words, God is the primary source for sickness. Most of the time sickness is believed to be inflicted as a result of people's sinful behavior. Even when sickness might not be attributed directly to sins, because the underlining understanding of the Jewish people is that God is the source of everything, God is then viewed as the ultimate cause of all sicknesses.

Second, in the same way as God is the cause for sickness, God is as well the ultimate source of healing. God's people must ultimately depend on God for the healing of their diseases. The means God uses to heal, whether through words spoken by a prophet, or to dip oneself into the Jordan River, or to use the balm of Gilead, does not concern the Jewish person in the Old Testament. Healing comes from Yahweh. There is no healing outside of Yahweh. In light of this, Yahweh's declaration in Exodus 15:26 referred to earlier can be taken to mean that it was God's intention to imbed this understanding early enough in the mind of this young nation God was forming. It then makes sense to view God's magisterial statement, "I am the Lord who heals you" as a contrast between God who has the power to generate health, wholeness, and healing as opposed to Israel's former master Pharaoh whose stance had caused his people to be inflicted with all kinds of physical diseases.<sup>4</sup>

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<sup>4</sup> This idea of looking at God's declaration in Exodus 15:26 as an intended contrast that God wanted to establish between Him and Pharaoh is predominantly from Walter Brueggemann's interpretation of the verse in his exposition of the book of Exodus published on the New Interpreter's Bible vol 1, 1994, pages 677-981. Brueggemann takes the entire verse to argue that God's statement of self-identity and self-disclosure is meant

If all that is being observed here is correct, then it can be argued that, to the Jewish people, it is God who both smites and heals. God uses sickness to administer God's justice thereby protecting and preserving his relationship with God's people. God heals and restores to demonstrate God's love and care and lavishes God's grace on God's people. From a theological perspective, though the focus on healing in this section is restricted to the physical aspect of humanity, it can be argued that there is a significant connection between *shalom* and healing. Shalom is the provision that God has made for Israel through God's covenant and health, wholeness, or wellness being the materialization of such provision. Willard M. Swartley interestingly captures this idea by stating: "The God of Israel's Scripture is healer with a preventive health care policy, that is, the covenant provisions God set forth for Israel's life" (Swartley 46).

### **Sickness and Healing in the New Testament**

Unlike the Old Testament, the New Testament corpus of text is laced with significant sickness and healing accounts. It does not require much reading in most of the New Testament books to come across a reference to sickness and/or healing. The real challenge in the study of these two issues in the New Testament may not primarily rest on finding the nature, origin, or meaning of sickness, as to agree on the nature of the procedure and authority by which healing is being performed. This provides fodder for exciting discussions among New Testament scholars of all persuasions. However, in keeping with the general objective of this research, the emphasis here is to add another

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to make a clear contrast between God a genuine alternative power and Pharaoh a god of burdensome obedience and a power that generates disease on his people. By looking at the verse this way, it makes perfect sense then to argue that Yahweh's declaration as Israel's healer is meant to establish a contrast between God and Pharaoh.

layer to the Old Testament view of sickness and healing in order to forge a complete biblical and theological view of the subject.

This will be accomplished in three ways. One, a general understanding of the two issues in the New Testament are respectively considered. Two, with references to some key biblical passages, it is demonstrated that in the New Testament time period sickness was predominantly viewed as originating from sin, demonic activities, and God. And, three, it is also established that any type of sickness was subjected to the healing power of Jesus and His apostles thereby proving the supremacy of Christ's authority over any kind of authority that might have been at the root of the issue of sickness. After these points are demonstrated, evidence should show that, like in the Old Testament, God in the New Testament is still the one who is in control of humanity's wholesomeness, wellness, or healthiness as the ultimate healer of human bodies and souls.

**Sickness in the New Testament.** John T. Carroll is somewhat close to a universal truth about sickness by claiming that "sickness and health are matters of universal human concern" (130). He goes on to say, "Every person and culture must address the experience of sickness, the pursuit of healing, and the need to discern meaning in both sickness and health" (Carroll 130). Lloyd Rediger sees the two issues as having an even a deeper implication in the life of human beings by arguing that sickness, healing, and health shape human experience (Lloyd 29). It is no wonder, then, that the sacred scriptures of ancient Israel and the Christian Church visit this theme over and over again (Carroll 130). What follows is a general understanding and some of the causes of sickness as perceived in the New Testament.

*A General Understanding.* Among many Greek words used to translate the concept of sickness in the New Testament, *nosos* seems to be the most appropriate one to translate sickness and illness according to the context of these terms as they are being studied in this work. The term *nosos* carries primarily the meaning of illness and/or sickness (Verbrugge 876). Like many other terms, illness and sickness can be viewed in both figurative and literal ways. This is also true to *nosos*. It can be used both in a figurative and a literal sense. However, due to the focus of this work, there is no effort to examine the term in its figurative sense where it can be used to mean a plague afflicting a city, a chronic disease of the state, weakness of character, or depravity. The focus here is primarily on the way the term can be used to specifically mean calamity, torment, or madness (Verbrugge 876) as they relate to individual people. As such, here is how the word is being used in scripture passages such as Matthew 4:23, 9:35, 10:1, just to name a few.

Many kinds of sicknesses are recorded in the New Testament. Among them are blindness, paralysis, leprosy, and physical infirmities. All of them were obvious physical evidences that deprived individuals from enjoying or accomplishing what they would want and/or need to do. This unfortunate, disdainful, painful, and unwanted physical state of a given individual is contrary to God's creative intention (Kittel 1095). It is true that believers in the New Testament are called to be patient in their affliction (Rom 12:12). However, there is no indication that sickness was a desirous state of being. In fact, there is an overwhelming sense of enthusiasm in the New Testament for the healing of the sick. This can be demonstrated through any casual look at the causes of sickness and the expressed need for healing in the pages of the New Testament texts.

*Causes of Sickness.* The general understanding in the Old Testament is that only God has the power to cause sickness; in the New Testament, the understanding is that there are many sources where sickness originates. According to Robert M. Price, “[T]he New Testament writers advocate or at least mention six different religious explanations for the origin of sickness” (Price 309). He lists them in the following order:

First, Satan may thus victimize the innocent. Second, God may send sickness as a punishment for the sufferer's sins. Third, God may send sickness to punish one's parents' sins. Fourth, God may so punish one's own sins committed in a previous life. Fifth, God may inflict illness in order to show his power by subsequent healing. Sixth, God may inflict illness in order to show his power by sustaining the sufferer through the illness instead of healing it. (Price 309)

At least two things are rather interesting in this classification. First, Price lists Satan first and God second. If this classification is intended to imply order of priority, then to Price Satan is to be considered as the first origin of sickness in the New Testament thinking. This implies that many types of sicknesses, though they might be expressed in manners and ways that medical science can identify, are believed to have no natural or physical factors as their causes. This is an understanding for which scholars such as Douglas Ellroy Pett would argue. In his book *The Healing Tradition of the New Testament*, he contends: “The greater part of human suffering, some manifesting in actual physical symptoms such as pain, has no discernible physical origin” (Pett 150). He goes on to say that the specific instances of illnesses recorded in the Gospels seem more to resemble such a form (150). R.E.O. White advances the same idea. He observes, “New



Testament belief in evil spirits (demons) under the direction of a supreme devil was almost universal. To them were attributed disorders of all sorts, whether moral, mental, or physical” (4). It goes even further to believe that the existence of demons as agents of all manner of ills is taken for granted in the New Testament (Arthur 823). In his exposition on sickness and sin in the New Testament, Kittle contends that “Christianity, though it did not exclude natural causes, adopted the view that sickness....is due to the influence of demonic powers, that is grounded in a cosmic catastrophe, that is a general panel connection between sin and sickness...” (1095).

One of the ways such demonic agents are being identified in the New Testament is as spirits. More specifically they are called “unclean spirits.” There are many passages in the New Testament such as, Matthew 12:43, Mark 3:7-11, Luke 4:31-36, 8:29, and Acts 5: 16, 8:7 where such identification of demonic spirits is described. A classic example to illustrate this understanding is found in the incident of a sick boy who was brought to Jesus (Mark 9:14-29). The symptoms the boy displayed—“and whenever it seizes him, it slams him to the ground and he foams at the mouth, and grinds his teeth and stiffens out” (9:18 NASB)—are obviously that of what modern medicine would associate with epilepsy. However, Mark identifies the origin of the sickness as being possessed with a spirit. In his study of this episode, Gaiser makes an interesting observation. He contends that: “Only Matthew knows the diagnosis of epilepsy (17:5), but he too assumes the disease is caused by a demon (17:8) even though in his earlier listing of people cured by Jesus he distinguishes between ‘demoniacs’ and ‘epileptics’ (4:24)” (Gaiser 138).

Perhaps two more examples of demonic activities that are associated with sickness suffice to establish the fact that in the mind of the New Testament writers many

forms of sicknesses originate from Satan. At times, there is the understanding that demons cause blindness. “Then they brought to him a demoniac who was blind and mute...” (Matt 12:22a NRSV). There is no question in the mind of the Evangelist here that the blindness of that sick person was a result of being possessed by a demon.

Dumbness is another sickness associated with evil spirits. Mark 9:25 reports: “When Jesus saw that a crowd came running together, he rebuked the unclean spirit, saying to it, ‘You spirit that keeps this boy from speaking and hearing, I command you, come out of him, and never enter him again!’” (NRSV). There is no attempt on Jesus’s part to question the reason why that boy was kept from speaking and hearing. It appeared to be common knowledge that that boy sickness was the work of an unclean spirit.

Second, although Satan might be the first cause for illness according to Price’s classification, it seems that God finds more reasons to inflict sicknesses on people. God is explicitly referred to in five of the six reasons for sickness in what Price asserts. This would not be an attractive picture of God for the simple reason that God, the loving and gracious Father of Jesus Christ, is portrayed here as one who seems to delight in inflicting pain to people. Though revolting as this idea can be, one cannot objectively read the New Testament without noticing considerable indications that God uses sickness to accomplish God’s purposes in the life of God’s people. For instance, passages such as 1 Corinthians 11:32 and Revelation 6:8 view sickness as divine punishment or judgement (Verbrugge 3798). This is also implied by Jesus himself after he healed the invalid man by the pool of Bethesda in John 5:1-15. Verse 14 reports: “Later Jesus found him in the temple and said to him, ‘See, you have been made well! Do not sin anymore, so that

nothing worse happens to you” (NRSV). This is a clear indication that God uses sickness to punish sin.

There is also the understanding that infirmities, along with persecutions and other troubles, are part of the suffering laid on the followers of Christ, a process by which God’s power becomes apparent (Verbrugge 3798). This is at least Apostle Paul’s point of view (2 Cor. 12:7-10; Gal. 4:13-14). This view of Paul is probably based on his own experience with blindness. Therefore, it can be argued that in New Testament thinking sickness is: (1) caused by evil power, commonly referred to as demons or unclean spirits which form a constellation of hostile and evil forces that aim at terrorizing human beings by inflicting infernal pain of various kinds to people; and (2) used by God, as a result of God’s love of humankind, to administer just and beneficial chastening to humankind and thereby enable them to better know God and God’s power. This means the reason God uses sickness is to benefit God’s people. At least a case can be made for this assertion when one considers the overwhelming amounts of healing accounts recorded in the New Testament. The healing material should bring comfort to the believer for it shows that God’s intention is primarily to heal rather than to inflict pain.

**Healing in the New Testament.** In her presidential address to the American Society of Church History in January 2002, Amanda Porterfield stated:

...healing has functioned as one of the most persistently compelling aspects of Christianity. Healing has been, and continues to be, Christianity's most remarkable biological effect. In addition to being a powerful phenomenon in itself, healing has often been cited by believers as proof of the truth of Christian

teachings...healing is a persistent and even defining characteristic of Christianity.  
(227)

Perhaps the amount of sensationalism, emotionalism, and subjectivism in forms, meanings, and purposes that accompany current healing activities even within Christian circles would cause one to be reluctant to place healing in such a prominent seat among the major tenets of Christianity. However, no one can deny the place and the role healing has played and continues to play in the making of Christianity.

In the New Testament, healing is a broad theme. In the same way, approaches to healing in the New Testament are numerous. Some scholars spend their entire careers trying to prove or disprove the accuracy, authenticity, or even the plausibility of the healing miracles recorded in the pages of the New Testament. For instance, in his article "Miracles of Healing," Charles Waddle states this about healing:

In approaching the psychological study of miracles of healing one can scarcely be expected to define the term miracle in any narrow sense, for one must study every form of the so called miraculous from the most elemental form of naturism to the highest type of scientific or pseudo-scientific psychotherapy. The term may cover now one and now another class of phenomena as we deal with a low or a high type of belief or practice. For the purpose of this study it is even, to a large degree, immaterial whether the miraculous occurrences, or supposed occurrences, passed in review be accepted as facts or viewed as mere superstitions.

(219)

Waddle does not only touch on the issue of authenticity of the healing miracles here but also on the complexity to define the term as well as the intricacy of studying the various forms of the healing miracles Jesus performed. No matter what a scholar's interest and/or position might be, there is one fact that remains undeniable about healings in the New Testament. This fact is the overwhelming amount of time the authors of the New Testament devoted to healing.

The focus of this section is exclusively a consideration of Jesus's healing activities as recorded in the Gospels. The emphasis is primarily on the meaning of these healing miracles to the New Testament people as opposed to the methods or processes by which they were performed. Meaning seems to have been the crucial point to the writers of these healing accounts for they exclusively aim at demonstrating the power of Jesus over evil forces through his absolute success in his ministry of exorcism and the curing of natural defects. This enables us to observe whether there is a continuity in the Old Testament understanding of healing and in the New Testament in the midst of the various forms of healings that Jesus performed.

In Gaiser's words, healing is a matter of life and death (Gaiser ix). This is perhaps the primary reason why healing miracles were such a significant part of Jesus's ministry.

Conleth Kearns sums it up this way:

The immense number of the healing miracles, worked in every place and in every period of Our Lord's ministry, right up to the last week of His life, shows that they were no mere extrinsic authentication of that ministry but were integral to its very nature. Passages such as Mt. 15:29-31 abound: "Great crowds came to him, bringing with them the dumb, the blind, the

lame, the maimed and many others; and they set them down at his feet, and he cured them all, so that the crowds marvelled [sic] to see the dumb speak, the lame walk, and the blind see.” (558)

In a more detailed account of the vast number of healing miracles of Jesus, Swartley reports that, “Joel Green counts eighteen healings and four healing summaries in Mark, nineteen and four in Matthew, twenty and three in Luke. John has four healing signs, including the climatic one: raising dead Lazarus to life” (66). When counted how many were recorded in each book of the Gospels, the total quantity of healing accounts amounts to sixty-one and eleven summaries. When they are arranged by types or occurrences, there are no less than forty-one accounts. This huge quantity of miracles recorded by the New Testament writers shows to what extent healing preoccupied Jesus’s mind and ministry.

This perhaps gives fodder for scholars such as Marcus J. Borg to portray Jesus as a healer and an exorcist for, while he walked the streets of Palestine, people from all classes flocked to him seeking healing and liberation (Borg 60). It is reported in the Gospel of Mark that: “....they brought to him all who were sick or possessed with demons. And the whole city was gathered around the door. And he cured many who were sick with various diseases, and cast out many demons” (1:32-34 NRSV).

Now that evidence of the Jesus’ healing ministry is undeniable in the New Testament, the question is how do people understand it. To answer this question, the emphasis must be placed on the meaning of healing to the New Testament people.

R. A Lambourne identifies several principal Greek words used to describe ‘to cure’, ‘to heal,’ ‘to make whole’ and such (93). The first word Lambourne identifies is

the word *katharizo*. This is a word used in two different contexts. It is used in a clinical, thus physical, context as well as in a non-clinical, thus moral or theological, sense in the New Testament. Perhaps the primary reason for using the word with a clear theological and medical distinction rests on the Jewish understanding and belief that certain illnesses rendered people unclean and debarred them from priesthood and the Inner Temple (Lambourne 93). When it is used in that sense, *katharizo*, and its cognates, mean “to free from defilement of sin and from faults; to purify from wickedness; to free from guilt of sin; to purify; to consecrate by cleansing or purifying; to consecrate, dedicate” (Thayer and Smith 1). Lambourne observes that the word, in this context, is used four times in the Gospel and fourteen times elsewhere in the New Testament. In the mind of the New Testament people, healing may mean more than just physical wholesomeness.

When used in a medical context, the word primarily means to cleanse from physical stain or dirt. In this usage of the word, Lambourne observes that *katharizo* is used twelve times in the Gospel. In such context, it is always a leper who is cured (Matt. 8:2; 10:8; 11:5; Mark 1:41; Luke 17:14) (Lambourne 93). This means the use of *katharizo*, even when used in its medical context where a person is physically sick, is meant to have a double meaning. One, it cured the person from a physical ailment which is the removal of the illness. Two, it liberated the person from societal and religious exclusion which was caused by the leprosy.

Lambourne continues his exegetical treatment of the term by looking at two other Greek words that translate ‘to heal.’ These are *therapeuein* and *iaomai*. He treats them together for various reasons. One, he finds no theological or medical distinction among them. Second, they do not have any particular Judaist associations. Third, they are

predominantly used in the narrative through indirect speech and hardly ever in the direct speech of Jesus. These two terms together appear fifty-two times in the Gospels and nine times elsewhere in the New Testament where they are used in a clinical context (Lambourne 93). *Therapeuein*, Lambourne continues, means to treat, in the technical medical sense of looking after a patient (93). Examples of the usage of this word are found in Matt. 4:23, 8:7, 17:18, Mark 1:34, Luke 5:15, 9:6, and John 5:10. Examples of *iaomai* are found, according to Lambourne, in Matthew 8:8, 15:28, Mark 5:29, Luke 5:17, 6:19, 8:47, and 17:15.

The general purpose of Lambourne's treatment of these various words that translate healing is to show how the work of God is made manifest in humankind when they are sick. Such work is the salvation of mankind which means that, through the sick person, Christ in his earthly ministry, brings men and women in to taste of the saved community life, the eternal life community (109).

In his exposition of *therapeuo*, Hermann Wolfgang Beyer observes that the word has two different usages in the Greek language. In the secular Greek, Beyer contends, *therapeuo* means "to serve," "to be serviceable" (128). He states: "the specific feature of *therapeuo* is that it expresses willingness to serve and the personal relation of him who serves to the one served by him, whether of respect in the case of a more powerful master, or of solicitude in the case of someone in need" (Bayer 128).

Contrary to the secular use of the term, in the New Testament, *therapeuo* is used more often in the sense of "to heal," and always in such a way that the reference is not to medical treatment, which might fail, but to real healing (129). Such understanding stresses Jesus' power to heal the sick. Every healing miracle Jesus performed was real



and definite. They display his power and make him Lord of every spirit (130) and natural physical illnesses. Beyer argues, “There is no sickness or weakness which Jesus cannot master. This is the basic thought in all the stories of His healings” (130). This is an interesting observation for it perceives Jesus as the ultimate healer in the mind of the New Testament writers and people, a theme attributed to Yahweh in the Old Testament.

Albert Oepke takes up this idea in his extensive treatment of *iaoma*. He states: “Hardly another image impressed itself so deeply on early Christian tradition as that of Jesus as the great Physician” (204). Not only the Gospel writers, especially Luke (5:17; 6:19; Acts 10:38), see Jesus as the great Physician, but Jesus himself also uses this self-designation on quite a few occasions, according to Oepke (204). Scholars, such as John Paul Heil, share the same idea of Jesus being a healer. He contends that: “the gospels do presuppose that Jesus was a healer and an exorcist. This healing activity of Jesus is understood by Matthew as the divine fulfillment of the prophecies of old (8:16-17; 11:2-5; 12:15-21)” (Heil 276). Heil is perhaps correct because it can be argued that Jesus performed his healing miracles with no desire of self-gratification or payment. All that Jesus seems to desire “is gratitude, not for his own sake, but for that of God and those healed by him, in order that the physical benefit may not be unaccompanied by spiritual blessing (Lk 17:17 ff.)” (Oepke 208). This is another evidence that the healing package that Jesus offered included both the curing or restoring of physical health as well as spiritual health

To R. K. Harrison, Jesus’ healing ministry means the fulfillment of the Old Testament’s prophesized work of the divinely appointed Messiah (Isaiah 53:4) (547). Jesus’ attitude toward the presence of disease in the lives of individuals, says Harrison,

marked a considerable advance in thought on the consensus of Old Testament opinion regarding sickness and disease (546). This advanced, yet continuous, thought can be further observed as Harrison argues that “Jesus was firmly convinced of his Father’s purpose for human wholeness and salvation (John 3:16; 10:10)” (546). This implies that Jesus recognized that disease and sin were not some established parts of the divine order of things, and thus are attributed to the operation of evil in human life (Luke 13:16) (Harrison 547). As a result, “since his [Jesus’] avowed mission was to destroy the works of the Devil, it followed that he would make every effort to heal the sick and diseased” (Harrison 547). Matthew makes it undeniably clear that the purpose of Jesus’ healing ministry “...was to fulfill what had been spoken through the prophet Isaiah, ‘He took our infirmities and bore our diseases’” (8:17). If such a view of understanding Christ as the ultimate healer based on the passages of Isaiah is correct, then Christ dealt also with disease and sickness on the cross as well as human sin (Harrison 547). Harrison might have a point by arguing that “[Christ’s] atonement avails for the whole personality, body as well as soul.... therefore, it is theoretically justifiable to appeal to the finished work of Jesus for the physical as well as for spiritual restoration” (547).

In conclusion, this succinct biblical overview reminds the reader of the Bible of the following truths on the issues of sickness and healing. One, sickness and healing significantly preoccupy the mind of both Old Testament and the New Testament writers. The primary reason for this is the fact that God—revealed as the Father in the Old Testament and the Son in the New Testament—shows undeniable interest in sickness and healing. Two, God uses sickness and healing to bring glory to God’s name and for corrective and redemptive purpose. The Bible shows that not every sickness is the result

of sin. As such, one of the main *raisons* for allowing his people to be inflicted is to bring glory to his name. In many other instances, sickness is inflicted and used to get people's attention to their need of redemption. In almost all sickness and healing accounts, God is glorified, and people are physically saved from their ailments and, in many occasions, their souls are redeemed. Three, God is sovereign and is in complete control over any kinds or forms of sicknesses no matter where one may believe they originate. This is clear for at least two reasons. First, in the Old Testament, it is clearly understood that only God has the power to inflict sickness and perform healing. Two, in the New Testament, though beliefs that Satan can inflict sin are accepted, the overwhelming power of Jesus to heal any and every kind of sickness nullifies any idea that may insinuate proportionate or shared power between God and Satan. In other words, although Satan is viewed in the New Testament as having some power to inflict sickness, he is very limited and controlled in his activities. One can still raise the question, "Why do the New Testament writers give so much detail about satanic and demonic activities in their writing?"

This question can be answered in many ways, thus leading to many discussions which do not concern this study. For instance, scholars may attempt to provide an answer from a theological standpoint. They may argue that a full and a clear image of Satan in his various forms and functions was needed to authenticate the divine and human natures as well as the offices of Jesus Christ whose story—life and work—shows how the power of God acts to challenge the evil forces that dominate the world (Pagels 17-58). Cultural anthropologists may center their answer base on the difference between Jewish and Grecian worldviews and belief systems.

Perhaps the most judicious answer would come from a missiological standpoint. This, however, is not meant to minimize answers from the other perspectives. It can be rightly argued that Jesus and his disciples' primary mission was to establish the greatest religious revival in the history of humanity. It was their calling to advance the Kingdom of God to every corner of the known world. As disciples are asked to go throughout the world to make disciples, they need to have a clear picture and understanding of their archenemy, Satan, and his allies. A thorough knowledge of the enemy, his plans, tactics, and schemes, is crucial for the success in fulfilling God's global redemptive plan for humanity. Sickness and healing are two crucial elements that both the kingdom of darkness and the Kingdom of Light can use at their advantage.

Sickness plays such a vital role in the history of salvation that thinkers such as John Donne, known for imageries in his sermon, would go as far as to view sin as sickness (Quinn 541-543). David Padfield goes even further to contend that the Bible never discusses the problem of the world as "sickness," but rather it points out that sin is the real culprit (5). Padfield interestingly argues: "By blaming the problem of the world on 'sickness' we cause people to lose all hope, for there is no vaccine to cure the sickness of the world. However, when we point out that the problem of the world is 'sin,' we give people hope, 'For Christ Jesus came into the world to save sinners'" (Padfield 5). The fact that some scholars feel comfortable enough to sit the issue of sickness at the same table with sin speaks volumes about the importance of the issue in the life of a Christian believer.

### **Understanding of Sickness and Healing in Traditional Haitian Culture.**

For the most part, Western historians, anthropologists, and theologians who are interested in the studies of Haiti are often carried away by the excitement of exploring Haiti's rich socio-historical legacy and its complex and mysterious religious realities. Haiti, which can be considered one of the best African representations in the Caribbean, provides these scholars with the luxury of proximity, affordable expenditure, and complete research access and freedom to achieve their goals. The result is overwhelming. A considerable number of works on the historiography, the belief system, the culture, and religion of Haiti have been produced. However, the subject matter of this research—a cohesive Haitian understanding of sickness and healing—which plays a significant role in Haitian life, has been overlooked and needs major consideration. Consequently, most of what follows are snippets about sickness and healing in Haitian-African thought taken from resources that are too concerned with the historiographic, social, and religious studies of Haiti to allocate any significant space in their treatises for any in-depth look at the issue of sickness and healing in Haiti. Field study seems to be the only hope one has to obtain a reasonable understanding of what Haitians believe about sickness and healing.

After Haiti proclaimed its independence in January 1804, the priority was survival. The primary reasons for that were due to isolation and devastation. In response to Haiti's illustrious victory over the French army, considered to have been one of the most repressive and powerful armies of that time, the international community sought to make an example of Haiti. They severed all ties to the new, young, and devastated country. In the wake of 1804, Haiti was left isolated from the international markets to which Haiti had been the leading supplier of sugar, coffee, and cacao (Olmos and Paravisini-Gebert 23). Consequently, the devastation that followed Haiti's military exploits had transformed

the country from being the richest colony to the poorest country in the Western World. At the time Haiti gained its independence, it is reported that the country had achieved an unprecedented degree of economic prosperity that had made Haiti “the world’s leading producer of sugar” (Olmos and Paravisini-Gebert 22-23). After the war, most of what was left of the Pearl of the Antilleans was a heap of rubble, ashes, and desolate plantations. David Patrick Geggus paints a dark picture of the country in these terms: “The most productive colony of the day had been destroyed, its economy ruined, its ruling class eliminated. Few revolutions in the world have had such profound consequences” (6).

Out of that precarious situation, Haitians resiliently fought to forge a new life. If the spirits of ancestors, as it is commonly believed in Haiti, were useful and successful in motivating and fighting in favor of the slaves to win Haiti’s independence, they were obviously useless and ineffective in helping rebuild the economy and create stability in Haiti after independence. Haitians struggled to survive. The struggles were not only economic, political, and social, but there were also issues of health which included sickness and healing.

No perception, understanding, or view operates in a vacuum. This is to say that every thought one holds is influenced to some degree by some distant pre-existing sets of beliefs. In major parts, these sets of beliefs are transmitted through two undeniable mediums: religion and culture. One deals with the unseen spiritual world. The other relates to the visible and present realities of life. However, religion and culture are so intertwined that it is almost impossible to draw a dividing line between the two. Some even believe they are one and the same thing. In Daniel P. Sheridan’s words: "Religion

and culture, in the same order of abstraction, when viewed as functional answers to the existential questions of the human predicament and as substantive participations in the whole of reality, are difficult to distinguish” (38). Consequently, it is utterly important to bear in mind the implication of such relationships when one seeks to frame an understanding of such a crucial issue as sickness in any given ethnic group.

### **The African Roots**

It can be argued that most of what one believes is influenced by their religious inheritance. From the Greeks’ belief in the divinity of the heavenly bodies (Nilsson 1-8), to the popular belief in the Upas, or Poison Tree of Java, (Sykes 194-199) religion occupies a preeminent seat in people’s mind. If this is the case, then most of what Haitians believe comes from Voodoo. In 1970, David Nicholls wrote:

It is sometimes said that Haiti is 90 percent Catholic and 100 percent voodoo; this statement is not, of course, entirely accurate, but nevertheless it does emphasize the fact that the duality in Haitian religious history has never been a confrontation between two separate groups of people. Almost all voodoo adherents would call themselves Catholics, and most Catholics practice voodoo. (400)

Some would go even further to attribute the very creation of Haiti as a nation and the Creole language to the work of Voodoo. Without taking into any consideration the socio-political climate in France during the time Haiti gained its independence, Erol Josué, a Voodoo priest who lives in France, states that *Vodou*, the Haitian Creole Language, and the nation of Haiti itself were born in August 1791. That was when Dutty

Booukman, a Voodoo priest, conducted his well-known Voodoo ceremony that led the slaves to revolt against the French masters. Laurent Dubois reports Josué's account:

On that day, the slaves began to realize that they all were part of the same cause, that they had to fight together. It was both a religious and a political economy. From there, a language was born, Creole, and a religion was born, Vodou, and eventually, a nation was born, Haiti. All the slaves had come from different tribes, and these different tribes all had their different practices; but starting with the Bois-Caïman ceremony they mixed their cultures to create a force we call Haitian Vodou, the assembly of the lwa. The slaves merged together to create Haiti, (433).

Voodoo, according to Murray Thomas, "is a belief system patched together from segments of different traditional African faiths that slaves brought from Africa to the Caribbean during the 16<sup>th</sup> through the 18<sup>th</sup> centuries" (4). It is believed that there were more than sixteen (Métraux 25-27)<sup>5</sup> different African tribes represented in Haiti from the second half of the seventeenth century until 1804. This perhaps explains the complexity of Haitian Voodoo if all those tribes were to contribute a distinct aspect of their faiths to the making of the new religion. Murray contends, "African religion is protean, always adding to its form selective aspects of other religions without endangering its function" (4). This in fact is an undeniable feature of Haitian Voodoo. It is syncretistic at its core. It is out of such an amalgam of beliefs inherited from a variety of African tribes that one

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<sup>5</sup> Alfred Métraux provides a list of fourteen plus different African tribes suggested originally by Moreau de Saint Méry in his book *Description Topographique*. Métraux himself believes that Haitian Voodoo is mostly influenced by beliefs from Africans and primarily came from the Gulf of Benin with significant representations from Dahomean, Guinean, Togolese, and Nigerian beliefs. For a complete history of the origin of Voodoo, see Alfred Metraux *Voodoo In Haiti* pp 25-81.



who is interested in identifying a distinctive set of Haitian beliefs about sickness and healing must undertake their inquiry.

### **The Animistic Influence.**

In order to properly define animism, which is not the burden of this research project, one would need to draw from old as well as new authoritative scholarly anthropological works from both a secular and a Christian perspective. To do justice to the historiography of the term, one would need to go as far back as to Edward B. Tylor (1832-1917), the renowned anthropologist considered to be the founder of modern anthropology (Sánchez 22) and the one who developed and established the use of the concept (Bird-David 67). Tylor coined the word ‘animism’ as a substitute term for ‘spiritualism’ in his investigation of ‘Spiritual Beings.’ He wrote, “I propose here under the name Animism to investigate the deep-lying doctrine of Spiritual Beings, which embodies the very essence of Spiritualistic as opposed to Materialistic philosophy” (Tylor 425). Simply stated, animism to Tylor is the belief in spiritual beings. He wrote: “Animism, in its full development, includes the belief in souls and in a future state in controlling deities and subordinate spirits, these doctrines practically resulting in some kind of active worship” (Tylor 427).

Robin M. Wright, in his review of Graham Harvey’s book *Animism: Respecting the Living World*, states: “The original meaning of the term ‘Animism’ referred to a religious belief, said to be held by indigenous peoples of the world, that natural objects and beings, both animate and inanimate, possess mental and spiritual faculties and powers” (95). Perhaps two more very interesting definitions of animism suffice for the purpose here. John S. Mbiti states: “*Animism* is a word derived from the Latin *anima*

which means breath, breath of life, and hence carries with it the idea of the soul and spirit” (7). Mbiti continues to say that the term has become the most popular designation for African religions. Philip M. Steyne describes the nature of animism as simultaneously pantheistic, polytheistic, and deistic (35). On the characteristics of the system, he says:

The world is in essence spiritual rather than material, and any distinction between the religious and the secular is meaningless. What happens in the physical world has its spiritual coordinates and vice versa. The whole universe is interconnected through the will and power contained in both animate and inanimate objects. Everything man is, does, handles, projects and interacts with is interpenetrated with the spiritual. His sociocultural structures, down to their finest details, are under the control of spiritual powers or forces. Nothing in man’s environment escapes the influence or manipulation of the spirit world. (37)

In this case, the statement is contrary to what scholars said such as Alfred Métraux who argued that animist beliefs are marginal and do not fit into the main pattern of the Voodoo religious system (153). Haitian Voodoo can be viewed as the epitome of animism. In effect, Steyne here is describing Voodoo as it is believed and practiced in Haiti. It encompasses almost every element that characterizes animism as described by Steyne. However, some would say that Haitian Voodoo is a monotheistic religion in which practitioners recognize a single supreme entity or God (Olmos and Paravisini-Gebert 120). A well-known Haitian Voodoo priestess who resides and works in New York, “holds that there is one only religion, one God, and one group of spirits. People only call God and the spirits by different names” (Brown 306). In Haitian Creole, this single supreme being is called *Bondye* (Good God). However, this *Bondye* is not the only

supernatural power ruling the universe (Desmangles 162). He is the head of a constellation of spirits known to Haitians as *lwas* with each one a facet that manifests the grandeur of the *Bondye* (Desmangles 162).

Voodoo is also pantheistic and polytheistic in its nature. Voodooists believe in spirits. The entire religion is about spirits, ancestral spirits to be more precise. Karen McCarthy Brown, in her book *Mama Lola: A Vodou Priestess in Brooklyn*, quotes Mama Lola who once stated: “Some people got spirit in their family, but when they grow up, they think they too big-shot to serve that spirit. They too ashamed [sic] about that. But I am not ashamed at all. Because I love spirit, because they help me. That’s my belief!” (78). These kinds of spirits inhabit certain trees, rivers, rocks, mountains, and the likes. This is the essence of animism (Steyne 34). Spirits are in the same geographical region as men (Mbiti 79) and are in control of everything. In fact, the Haitian Creole word *Vodou* is said to be derived from the West African Ewe word *vodu* or the Fon word *vodum*, which means *spirit* (Thomas 5). Jean Price-Mars, considered a national symbol to many Haitians and who culturally fought the American Occupation of Haiti from 1915-1934, wrote: “In Dahomey there is a religion with a structure made of the same elements as our *Voodoo*. In Dahomey certain deities, the *Spirits*, are generally called *Vôdoun*...” (52). It has been observed that: “Vodou posits a dynamic and organic view of reality, in which all events and conditions, whether natural, spiritual, or social, are believed to be animated by spiritual forces” (Edmonds and Gonzalez 109). This would mean that life must be lived to keep the spirits, or the *lwas*, happy. To upset them means to upset the balance of existence. When that balance is upset, then men must make sacrifices, offerings, and prayers to the spirits to try to restore it (Mbiti 79).

In relation to sickness, the animist must discover what beings and forces are impacting him in order to determine future action and to manipulate these powers (Van Rheenen 20). In his article “Animistic and Western Perspectives of Illness and Healing,” Van Rheenen identifies no less than five (5) basic worldview assumptions which underlie the animistic perspectives of illness. He begins to say:

Animists assume that the seen world is *related* to the unseen world—an interaction exists between the divine and the human. Illness is assumed to be caused by these powers. Neglected ancestors punish those of their lineage; angered gods and spirits send catastrophe; jealous neighbors maliciously use sorcery and witchcraft. Animists believe that nothing is due to chance; spiritual powers of various types cause illness and other human catastrophes. (83)

The second assumption postulates that the entire universe—people, things, animals and everything—is interconnected. Illness is then understood as the result of the breaking of this interconnectedness which results in disharmony in one’s life. The third assumption focuses on the importance for the animist to seek power to control human affairs, especially during times of illness and death. There are many reasons, bad and good, for which this power can be used. There are also many sources from which these powers can be obtained such as the ancestors, the family spirits, and the various gods in the universe. The fourth assumption relates to the methods by which the animists seek to determine what powers and forces are causing the illness. Van Rheenen notes that their preferred method is divination (85). In the case of Haitian Voodoo, the priest divines while possessed by the spirits to determine the origin of the sickness. In the fifth

assumption, animists believe that illnesses frequently have personal causes. Van Rheeën writes: “Animists ask ‘who caused the illness.’ The sick person may have caused his own illness by breaking a taboo or by sinning against an ancestor, spirit, or god. In other cases, the jealousy of a neighbor, friend, or workmate might have led to the use of witchcraft or sorcery that has caused the illness” (85). These perceptions shape the Haitian view of sickness and healing.

Considering this succinct historiographic highlight on the origin and nature of Haitian Voodoo and its influence on what Haitians believe, it can be argued that what Haitians traditionally believe about sickness and healing is historically African and religiously animistic in nature. It is African because most of what Haitians believe, including their understanding about sickness and health, originate from their inherited African set of beliefs. It is animistic because, as the evidence proves, African religions are protean in their nature and animism best provides fodder for the multitude of distinctive African faiths to seamlessly cohabitate in Haitian Voodoo. Hence, African beliefs ornamented with animistic décor would be the ideal place for one to start inquiring into elements of Haitian beliefs about sickness and health.

### **The Origin of Sickness in Haitian-African Thought**

In Haitian traditional thinking, it can be argued that there are two major sources for sicknesses. One is *maladi lèzòm* (man inflicted sickness) or supernatural sickness and *maladi Bondye* (God inflicted sickness) or natural causes of sicknesses. *Maladi lèzòm* is the most widely believed origin of sickness in Haiti. It is the act of man manipulating the spirits to inflict sickness on people. In effect, it is a man-spirit combined act. As noted previously, in Haitian-African thought, belief, and practice, spirits permeate all human

affairs. Such spirits are not the mind or the motor of the intellect as René Descartes had attempted to demythologize spirit by endowing it with material causality (Hood 183). To Haitians, these spirits are divine beings that provide a means of dealing with misfortunes, anxieties, no-way-out situations, and most importantly sickness (Hood 184). Thus, spirits, the bad or evil ones of course, are primarily the cause for inflicting illness on people.

These spirits are believed to operate through witchcraft. In order to differentiate the good from the bad spirits, some people, such as J. Omosade Awolalu, call the latter “mysterious powers” rather than spirits because these forces in Africa, as well as in Haiti, are seen as the personifications of evil bent on inflicting harm, wickedness, and misfortunes on human beings whereas the spirits are essentially good (Hood 199). Hood cited Awolalu who once noted:

In the mental and social attitude of the Yoruba, and the Africans in general, there is no belief more profoundly ingrained than that of the existence of witches. All strange diseases, accidents, ultimate deaths, a lack of promotions on the job, failure in examinations and business enterprise, disappointment in love, barrenness in women, impotence in men, failure of crops and a thousand other evils are attributed to witchcraft. (Hood 199)

Those evil spirits, however, work in tandem with human beings’ intent and action. The evil spirits are manipulated by certain people who are considered traditional priests through the use of magic tricks. In Haiti, these priests are called many names. The most common are *bocor*, *hougan*, *gangan*, and *caplata*. All are some sort of Voodoo priests with various roles. Melville J. Herskovits, in his book *Life in a Haitian Valley*, differentiates them in these terms:

In the main, it can be said that though the *hungan* (his word for *hougan*) and the *gangan* practice magic, their main preoccupation is the *loa* (spirit)—the maladies they send to affect a man and his possessions—while the *bocor* is concerned almost exclusively with setting in motion the agents that actuate black magic, and the *caplata* dabbles in anything that is wanted. One important means whereby the sorcerer obtains his powers is the evil *loa*, but there is this essential difference: the gods of the *hungan* are family gods who come to him through the natural course of inheritance endowing him with the *connaissance* (knowledge) that gives him control over the supernatural world, while the *bocor* buys his gods. (225)

One of many points Herskovits makes here is reinforcing the claim that in a Haitian's understanding, maladies or illnesses are the work of the spirits. He implies that one of the functions of the *loas* is to send maladies to affect people. Mbiti shares the same conviction. In his acclaimed work, *African Religions and Philosophy*, he observes the following about death among the Ndebele: "When a person falls seriously ill, relatives keep watch by his bedside. These relatives must include at least one brother and the eldest son of the sick man, because the two are the ones who investigate the cause of the illness, which is generally magic and witchcraft, and take preventive measures against it" (145-46). Here again the cause of sickness is magic and witchcraft, thereby the act of the manipulated spirits.

David Westerlund, in his contribution to *African Spirituality*, goes as far as to view "spiritual beings as agents of illness" (152-175). Westerlund states: "In African cultures, spiritual beings may be seen as important causes for illness...human agents of

disease, such as ‘sorcerers’ or ‘witches’ are well known in many parts of Africa” (152).

Westerlund focuses his essay on the tribe of the Kung of Namibia. He notices that unlike people from many other African tribes, the Kung do not associate spirits or divinities with trees, hills, rivers, or other part of earth but rather the abode of the spirits is above the sky. Then Westerlund says:

Among the Kung the category of illnesses that are caused by heavenly beings may be designated as “sickness of the sky” (*kwi naa*). Such heavenly diseases can manifest themselves in many grave internal ailments of which people are aware, but they can also exist in person without that person knowing it. This spiritual category of illness is distinguished from another category which includes mild, localized ailments visible in the surface of the body, common aches, and minor injuries. (154)

African people might have different views about the habitat of the spirits.

However, it is evidently clear that most African people believe that spirits are agents of human problems among which sickness is a prime one. This belief has well been passed on to Haitians. With some few culturally adjusted nuances, sickness is often seen in a Haitian’s view as the cause of some sort of a disturbance in the line of relationship between the sick person and her *loas* or even deceased family members. Traditional Haitian beliefs obligate the veneration of deceased family members. They do so by offering food to the dead and sacrifices to the spirits. When the living members of the family neglect such obligations, the hungry ancestors and/or the unappeased spirits are susceptible to make their voices known by inflicting sicknesses on the living members of



the family. Elia Shabani Mligo, in his work *Elements of African Traditional Religion*, states: “Ancestral spirits have always been known to be the cause of many calamities affecting the clan. Misfortunes and diseases are not seen as to be coming for their own sake, but as means to inform the living that something is wrong in their relationship with the living dead” (98).

This same view permeates the belief system of the traditional Haitian. The story of *Mama Lola’s* calling to voodoo priesthood is a perfect example of such an understanding (Brown 71-78). She went to New York to live. Then she got ill. In a dream a spirit came to one of her relatives to tell her why she had been sick and none of the finest hospitals in New York could help her. There was a breach in her relationship with the spirit of the family, the living dead ancestor that needed to be fixed. She needed to come back to Haiti and do what the spirit wanted her to do before she could be healed and go back to New York. Not only did she go back healed, according to her estimation, she went also as a *manbo* which is a voodoo priestess.

Thomas Murray, in his work *Roots of Haiti’s Vodou-Christian Faith*, helps to explain this belief in more technical language. He elaborates on what he calls a theory of mediated causes. This is to assume that a supernatural being or power serves as an intermediary between an initial condition or event to a subsequent one (Thomas 110). Murray offers this exemplary illustration: “For instance, (a) a motorist used a supernatural spirit’s name as a curse word, thereby (b) offending the spirit, who responded by (c) distracting the attention of the motorist so the motorist lost his car key” (110). In other words, the immediate cause of sickness is the result of disobeying, offending, or neglecting one’s duty toward the spirit, which in turn, being offended,

punishes the person by inflicting sickness on her. This is the most widespread view of the origin of sickness in traditional Haitian culture.

The overwhelming lack of modern technology, infrastructure, and incompetence in the medical field in Haiti renders diagnosing illnesses unreliable at best and completely misleading at worst. At times, medicine in Haiti even fails to diagnose the *maladi Bondye*. In such case, medical practices in Haiti reaches their highest state of ineffectiveness. As a result, instead of helping to promote natural and objective causes for sicknesses, medical ineptitude in Haiti contributes to the reinforcement of the folk cultural belief that most of what people suffer in their bodies is mysterious, thereby the work of some sort of an angry spirit.

### **Healing in Haitian Thought and Practice**

Sicknesses are nuisances to people. They are intrusions into human life. Even when some people view sicknesses as having a redemptive or purifying purpose, they long to rid themselves of the suffering associated with sickness. This explains the urgency one expresses to be healed when all preventive measures to remain in good health have failed. This is true to all cultures. It is not a matter of whether one seeks healing. It is a question of what one does in their pursuit for healing. For, “there are, according to a Yoruba tradition, a few major blessings in life— among them, health, wealth, and long life” (Wood 376). This corroborates Karen McCarthy Brown’s claim that, “[h]ealing is at the heart of the religions that African slaves bequeathed to their descendants” (4-5).

In Haitian traditional thinking, healing is viewed through the same animistic lenses as illness. Take, for instance, this perception of wholeness from the African Igbo people group:

The Igbo concept of good and ill health is eccentrically constituted: health is a sum, first, of the person's relations with the family and community members, alike with the invisible world of the medicine deity (agwu), the earth deity (ala), the ancestral cult spirits (ofufe ndi ichie). The ancestral spirit is the transmitter and guardian of one's family and personal genius (chi), and its power (mmuo). (Iroegbu 81)

What is implied here is that illness is always personal. There are two ways this can be explained. One, someone is sick because of a disruption in one's personal relationship with his ancestor or family spirit. Two, someone is sick because someone else casts a spell on him through way of witchcraft and magic. Mbiti explains: "Even if it is explained to a patient that he has malaria because a mosquito carrying malaria parasites has stung him he will still want to know why that mosquito stung him and not another person" (165).

In the same way, healing needs to be personal. It begins with finding out who or what spirit originates the sickness then what must have been done or should not have been done to offend the deceased ancestor or the family *loa*. The diagnosis methods may vary, but almost every healing process begins with a preconceived spiritual understanding.

Because Voodoo is animistic at its core, and most Haitians are said to be voodooists in practice, one may think it is an easy task to find out what Haitian people

think and do in their pursuit of healing. In effect, the contrary is true. To find out what Haitians do in their pursuit of healing is a challenging task. The primary reason is because Haitian people are very secretive. Power lies in keeping the family's secret. Exposing the secret of the family renders the family susceptible to harm. Four decades ago, even the children's official names as they appeared in their birth certificates were kept secret to their biological parents only. As a result, it takes a strong commitment and careful circumvention to get data relating to such a sensitive matter as the process one takes toward seeking healing from folk religious practices. However, though the specifics can be determined only through a careful onsite immersive observation, a solid view on the animist understanding of healing would provide fodder for preparing for this field observation. What follows is what a typical animist would do in his search for healing. The distinctive Haitian practices of their quest for healing through folk religion practices are reported in Chapter 3 which deals with the field research.

The desire for power drives the animist. To him, a life without power is not worth living because man's needs cannot be met without power (Steyne 60-61). The animist needs power to get the spirit world to serve his objectives (38). In effect, power is needed for everything. It is needed to make rain, give good crops, secure employment, guarantee fertility and most importantly heal diseases (38). It is through power that the animist, when using the right manipulative formula, compels, entreats, or coerces his gods to do his will (38).

For healing, it can be said that power is used in two major ways. One, it is used for diagnosis and two for the actual act of healing. Both diagnosis and the act of healing are performed through various ceremonies. These ceremonies generally take two forms.

These are prayers and rituals. Both can be viewed as two sides of the same coin.

However, rituals obligate more rigorous physical and personal undertaking than prayers would. Prayers may only require some prescribed postures and diet.

**Diagnosis.** Like any attempt to restore health, be it from a Western scientific modern medical practice or a traditional religious healing practice, diagnosis is the first step to be taken. In Haiti—as in any other religious contexts where animism’s influence is at level one, which means animism dominates the religious life, where local religious practices have little or no distinction with animistic core values (Steyne 46-48)—diagnosis is done primarily through divination. Scholars such as Richard C. Onwuanibe would propose incantations as the first attempt to diagnose a sickness. On his understanding of African Medical Practice, Onwuanibe says,

When a person becomes sick, a medicine man is called. He makes a diagnosis with some incantations, which give the air of mystical and cosmic connections in the ordered world of traditional thought. The sickness may easily be identified, if it is not serious, or if very serious, its diagnosis may require divination, which often connects it with the supernatural agencies. The medicine man, if he is not a diviner, asks the relatives of the sick person to consult a diviner to find the cause and decide what should be done to effect a cure. (25)

In the case of Haiti, most sicknesses for which people seek healing from folk religious practices are considered serious or *maladi lèzòm*. Brown refers to such conditions as deeper issues that the folk healer would uncover during treatment (346). Since such problems give little indication of their true origin, divination is required to

diagnose the root of the issue thereby making it the most utilized diagnosis method in traditional healing in Haiti.

Wood defines divination as a means by which practitioners diagnose past, present, and future issues—physical, mental, and spiritual—much as a physician uses questionnaires and other diagnostic tools in assessing clients and prescribing care (378-79). It is used as a diagnostic method under the assumption that the ailment the patient suffers has been the result of a rupture in the relationship between the patient and his world—spirits attached to his family or an angry ancestor. The purpose for divination is therefore,

to identify the location and cause of these breakdowns and, when possible, to prescribe restorative measures through which the individual may repair these ruptures and regain balance. When divination is practiced, the diviner acts as an agent between humans and the spiritual realm with the goal of gaining information that will help normalize and facilitate harmony within the individual and, by extension, within the society.

(Wood 379)

Patrick E. Iroegbu, who believes that effective healing tends to be successful when the etiology and treatment work in harmony with people's worldview and include due ancestral compliance, explains the ontology of such folk diagnosis. He says,

Expert healing addresses the patient's body within the larger social field and world-making, in resonance with ancestral compliance. That means the cultural mode of healing effectively draws from and emphasizes obligation, alliance and respect to ancestors, descendants and community

as a key moral tradition far beyond the biological analysis of parts of the human body. In this way, people owe their own lives and corporeal wellness to their ancestral fortification and community in addition to showing responsibility for transmitting forces that shape healthy balance of the individual and society in a highly culturally cohesive way (Iroegbu 81).

Mbiti refers to those involved in folk healing as medicine-men or specialist diviners who are concerned with sickness, disease, and misfortune (162-88). He identifies the process of divination in these terms:

Diviners, as their name implies, are concerned primarily with acts of divination. But as a rule, this is done as part of the wider functions, especially of a medical or even priestly nature. They are the agents of unveiling mysteries of human life. This is done through the use of mediums, oracles, being possessed, divinations objects, common sense, intuitive knowledge and insight, hypnotism, and other secret knowledge. (Mbiti 172)

Of these identified means by which divination is performed, being possessed is perhaps the most well-known practice in diagnosing illness in Haitian Voodoo. Possession is believed to be the heart of a Haitian Voodoo ceremony (Brown 6). For diagnosis to occur, the medicine-man, the *bokor*, or *hougan*, needs to be possessed by the spirits or the ancestors. This is the state where the healer surrenders his will to the spirit and his body becomes the envelope that houses the spirit. A Haitian Voodoo priestess describes the experience in these words:

When the spirit going to come in you [sic] head, you feel very light, light like a piece of paper...very light in your head. You feel dizzy in your head. Then after you pass out. But the spirit come, and he talk [sic] to people...when the spirit [is] in your body, in your head, you don't know nothing. They have to tell you what the spirit say [sic], what message he leave [sic] you. (Brown 353)

Although this diagnosis method of divination can be used for many other reasons, healing purposes have been the prime motive for it. Possession has not always been a pleasant or desirous experience for the folk healer. Brown even calls it a perilous ego-exchange with the *lwa* (spirit) that the Voodoo healer must frequently undergo (353). Some even attempt to resist the call because the self-sacrifice is significant and can even require sacrifices such as severing intimate relationships with the opposite sex. However, for fear of neglecting the spirits, getting a deceased ancestor angry, or breaking the family legacy which in turn can harm the one called to be a healer if he refuses, most Voodoo healers accept their plight to undergo the rituals that eventually lead to their healing profession.

**The Practice of Healing.** Hood notes: "The tradition of herbal, faith, and magical healing runs deep in Afro cultures, no doubt a legacy of African traditional religion" (171). After the mystical cause and the nature of an illness is revealed, the next step is to (1) cure the malady and (2), neutralize the cause so it will not recur (Thomas 115). The treatment method for healing often requires participation in some form of ritual. A ritual is a formula for eliciting help from the spirit world and mastering nature to serve man's purposes (Steyne 93). Through these rituals the person sits at the console of a



computer programmed to coerce positive spirit activity on his behalf. In other words, the person controls what happens to herself, to others, and to his environment (Steyne 96).

Healing rituals go beyond the daily normal religious routine and customary rituals such as what people do at birth, marriage, or death. They are critical rituals performed to win the spirits' support in producing a favorable solution for one's healing (Thomas 115). In effect, there is a set of rituals designated to the art and practice of healing itself. Among those included are: prayers, using certain herb-based medicines, sanitary regulations, pilgrimages, food offered to dead ancestors, and sacrifices to the spirits, among others. Prayers are offered to the Voodoo deities and spirits of departed ancestors as derived from African tradition (Thomas 132). As Murray Thomas notices: "Typical intents of prayers to deities or ancestors include: (a) courting their approval, (b) seeking their help, (c) expressing gratitude for favors received, (d) pleading for their blessings, and (e) drawing their attention to people or endeavors that are worthy of divine support" (132). In the case when people pray for healing, the nature of their prayers is to seek help. The insinuating aspect of such prayers is their language or phraseology. At times, the only difference between a Christian prayer for healing and that of a voodooist would be the rituals that should accompany the prayer of the voodooist. A Voodoo priestess known by Mambo Ava Marie, , in her blog page, prescribes the following healing prayer to her patients.

Oh, mighty God, Father, Son and the Holy Spirit, in worship and  
undivided Trinity, look tenderly upon thy servant (name), held in disease;  
Forgive him and all of his sins, heal him from the illness; Bring back his  
health and strength; Give him a long and prosperous life, peace and thine

blessings so that he would bring gratefulness in prayer to thee, God and my Creator. Holy Mother of God help me pray to your son, my God, heal the servant of God (name). All saints and angels of the Lord pray to God for his sick servant (name). Amen. ([www.pagangate.com](http://www.pagangate.com))

This prayer, though it may sound Christian in its wording or form, does not have the same meaning as if it were prayed by a follower of Jesus Christ. There are at least two reasons for this assertion. One, God in voodoo is often understood to be a bunch of deities and ancestral spirits that are personifications of the Godhead (Hill 6). Two, for this prayer to work, the patient needs to follow a set of prescribed instructions including a doll, some needles, oil, and a candle among other items, because Voodoo is not a religion of faith, but of manipulation and coercion. If the patient fails to be healed, the only explanation is that he has failed to use the right formula or procedure.

The healing act may also require the use of herb-based medicine. It can be rightly said that most medicine contains a certain proportion of natural plants. Some are one hundred percent natural but using herbs in Voodoo healing is different. The difference is on the meaning attached to the process of using herb medicines. The plants may have the same medicinal effects for a scientist and a voodooist. What has caused the herb to effectively do its trick would sharply divide the scientist and the voodooist. To the Haitian Voodooist, the healing proficiency of a plant rests on the belief that such plants have a significant spiritual essence and/or power. Each plant has a *nanm* (soul) which habits it. Alfred Métraux writes:

A soul is attributed to the sun, the earth and to plants because they all influence man and nature... When the herb-doctors go to gather [the

plants], they choose a time when they think of them as being overwhelmed with sleep, and then go up to them gently so as not to aggravate the *nanm*. As they pull them up they murmur ‘Get up, get up, go and cure someone who is sick. I know you’re asleep, but I need you.’ They are careful to put a few pennies beside the main stem—to pay the soul for the effort which will be required of it. In placing this pittance, the picker must say: ‘I take you so you may cure so-and-so. Go and cure him immediately, for you have been paid. When a plant dies, its soul leaves it in search of residence in something else that grows. (153-54)

After the right herbs are selected, they are combined with prayers and rituals for healing remedies. Such remedies can take at least three forms. They could be prescribed to be swallowed, to rub on the body, and/or to bathe in. Brown explains the latter prescription in this way:

Bath, a staple in Alourde’s [a voodoo priestess] healing repertoire.... [are] mixtures of herbs, perfumes, milk, alcohol, fruits, and, in some situations, less agreeable things concretize troublesome as well as desired states in a variety of ways. Smell is among the most powerful instruments. After taking the ritual bath, the client is instructed not to wash for three days, leaving the heady odors of Alourdes’s medicine chest on the skin for three long days, waking and sleeping. Our sense of smell connects with the limbic mind, a primordial, nonverbal self, and it is often this deeper self that is addressed by Alourdes’s cures. (348)

Another healing practice worth noting here is sacrifice. Jean Price-Mars highlights the importance of sacrifice to Voodoo in these terms:

...the greatest, the most vibrant aspect of the voodooistic arrangement is not the ecstasy. One would be still less likely to search for it in majestic hommages rendered to deified natural Forces. It resides almost entirely in the imperative fulfillment of sacrifice. Worship can dispense with choreographic meetings, with orgiastic festivities, with the display of nocturnal and processional pageantry, but whatever the social or legal contention may be for holding it; it positively confirms itself through the ritual obligation of the sacrifice. (135-36)

When the nature of the sickness is diagnosed as upsetting the ontological balance between the sick person and any given spirits, the inclined action to healing would be offering sacrifices and offerings. Sacrifices and offerings, in this case, are meant to appease the offended spirits, one of the most crucial steps to restore the broken relationship and thereby restore the health of the sick person. Price-Mars notes that sacrifice “is an act of expiation to appease the wrath of the divinity irritated by voluntary or unconscious offense, the effects of which have been translated into calamities of all sorts: maladies, sorrows, unsuccessful enterprises, and so forth” (136). Hood echoes this same idea. He contends, “In the traditional religions of Africa and the Caribbean...sacrifice is a religious act in which something is offered to the deity or divinity in thanksgiving, for penance, or as a petition for a change in one’s fortunes and situation” (57).

Both Price-Mars and Hood help to see healing as one of the primary reasons for offering sacrifices in Voodoo. In some serious cases of illness, it is a widespread practice in Haiti that birds, such as chickens, and animals, such as goats and pigs, are killed as sacrifices presented to the offended and upset spirits to appease them. However, this does not mean that sacrifices are offered only for healing purpose. There are many other reasons the voodooists would make sacrifices. For instance, Haiti's battle of independence started with a voodoo ceremony where a pig was sacrificed. The participants then drank the pig's blood as an act of sealing a covenant with the spirits that the country would be dedicated to them if they enabled them to defeat the French. It is also important to note that the practice of sacrificing varies from case to case depending on the severity of the case for which the sacrifice is being offered. Melville Herskovits gives a detailed and graphic description of the killing of the animals being sacrificed (167-68).

### **The Syncretistic Nature**

It goes without saying that one of the major features of the understanding of sickness and healing in traditional Haitian culture that this survey reveals is that syncretism dominates the belief and practice of the traditional Haitian approach to sickness and healing. This writer is aware of the problem one faces when attempting to define syncretism due to the historical background of the term. For instance, the first time the term occurred—in the treatise of the Greek historian Plutarch (ca. 50 AD-120 AD)—it was used to simply describe the action of the Cretans to suspend their mutual disagreements and united to face a common enemy (Leopold and Jensen 14). From there on, the term had been used in many ways with many different meanings. It is not the

burden of this work to survey or retrace the transformation of the term. Rather, in this section syncretism is used in its conventional Christian understanding—a blend or mixture of Christianity with pre-Christian beliefs and practices relating to supernatural beings and powers (Kraft *Anthropology for Christian Witness* 376). In the context of Haiti, syncretism is the mixture of deities and religious customs of the traditional religion of the colonized African slaves with the deity and customs of Roman Catholicism, the religion of the colonizers. More specifically, such a mixture is considered here through the lenses of the form and meaning of the combinations. Therefore, what can be seen in the context of the Haitian syncretistic view and practice in relation to sickness and healing is the use of Christian symbolism and form with meanings attached to them that are everything but Christian and/or biblical.

According to R. Thomas Murray, the dominant form of religion in the nation of Haiti is the “Vodou-Christian Faith.” What Murray is insinuating here is that the level of syncretism in Haiti is so elevated that it gives birth to a new form of religion. This religion dominates the religious life of Haitians. In effect, Murray is so convinced that the mixture of Voodoo and Christianity is so prevalent in Haiti that he does not even need to make a case for its existence but rather focuses on its roots. He went and searched for its roots. He reported his findings in a book whose title provides the answer to his quest: *The Roots of Haiti's Vodou-Christian Faith: African and Catholicism Origins*.

Lesly G. Desmangles attributes the inception of this unique religion in Haiti, which Murray described earlier, to the religious oppression that accompanied the physical, social, and moral oppression of the African slaves in the Colony of Saint Domingue. The Catholic Church, according to Desmangles, was embarrassed by the

encroachment of what it has regarded as “superstitious practices” on its theology (6). The church’s recourse was suppression. With the help of the government, Desmangles contends, the church “has conducted a number of so-called Antisuperstitious Campaigns in which it has seized, burned, and destroyed a large number of *ounfòs* (voodoo shrines) and ritual paraphernalia throughout the country (6-7). That same suppression, according to Desmangles, gave birth to a sudden reawakening of the values that the Roman Catholic Church leaders wanted to eradicate. The resilience of the slaves to retain their religious and cultural values and the obligation under which they were to acclimate themselves to European Catholicism are the two main contributing factors that resulted in today’s “Vodou-Christian Faith” as a religious life in Haiti. In Desmangles words, “Vodou is in part a by-product of Catholicism and traditional religions from various regions in Africa” (7).

Therefore, it is not surprising that in their understanding, belief, and practice of sickness and healing, Haitians show a penchant toward folk religious practices. This is evident beginning with their view of sickness to their very practice of healing. The Haitian thinking of the origin of sickness is a mixture of both Christian beliefs and Traditional African beliefs. As noted earlier, sickness has two main sources. God and man. The latter works in tandem with the spirits, including the evil ones, to inflict sickness on human beings. The search for healing also leads to both God’s provision as well as to other deities. The tricky aspect of the healing process in traditional Haitian practice is when the Christian God and the universal Christian symbols such as the Bible, names, the cross, among others, are being given specific meanings within a Haitian context consequential to its African ancestry. As Murray notes, Voodoo is protean in its

nature (4). This means, the African slave would have no issue with being baptized in the name of the Father, the Son, and the Holy Spirit. This can mean to him (1) another addition to his pantheon, or (2) the Trinity is the same as his ancestral spirits under different names. Hesselgrave, in his *Communicating Christ Cross-Culturally*, writes, “when there are myriads of gods, a few more can only enhance the system. The more the better” (282).

This can be explained considering the failed attempt of the slave masters to influence the conquered people to abandon their indigenous faith. Instead, “The conquered peoples embraced Christian forms but with new meanings they themselves had refashioned and at times appropriating them as tools of resistance” (Mitchell 34) This gives fodder to Desmangles’s claim that Haitian Voodoo and Roman Catholicism are two belief systems that differ on the surface but whose differences do not prevent Haitians from practicing both religions simultaneously with no attempt to resolve whatever paradoxes may exist between them. He goes on to say: “religiously, they venerate the saints of the church and the Vodou lwas (spirits) simultaneously” (5). This, however, can be said to have occurred as a result of the Roman Catholic Church’s stern approach against the worship of the traditional African gods by the slaves. Having been forbidden to worship their deities, the slaves hid their gods behind the statues of the Catholic saints which later became intertwined in the mind of the African slaves. This explains the fact that all the voodoo deities are called by names coming from Roman Catholic Christianity. For instance, Paul is Papa Loko, St. Peter is Agwetaroyo, Saint James is Ogou Balendjo (Félix 70) to name a few.



It is within this religious and cultural milieu that the Haitians seek answers to their issue of sickness and healing. They hold dear to their heart the symbols, the prayers, the names, and the rituals they have learned early in their childhood through the various religious sacraments they have been taught by the Roman Catholic Church. They profess faith in, allegiance to, and veneration to the Christian God: Father, Son, and the Holy Spirit. At the same time, it is not an issue to seek healing help through ways such as divination, calling upon ancestral spirits, and offering sacrifices to family spirits when sickness strikes. In many instances such as in prayers and in the use of the scripture and sacred objects such as the cross, it is not easy to distinguish who is a Christian from who is not Christian.

The Evangelical Church, however, has been consistently trying to set boundaries to safeguard and preserve the belief and practice of Evangelical Christians from mixing, translating, and/or accommodating Voodoo beliefs, values, and practices into their faith. Despite such efforts and commitments, the evidence will show that Voodoo's influence in the Church, particularly in the sphere of sickness and healing, is still a force to be reckoned with. This shows how deep and wide Voodoo influence is rooted in the belief system of the Haitians and how important it is for the Church to address the problem from its root instead of at a superficial level.

From a cultural and anthropological standpoint, it seems Olmos and Paravisini-Gebert have reason to argue that the *lwas* occupy such a space within Haiti's cultural sphere of practice from which they may be impossible to dislodge (154). From a missiological, a theological, and, therefore a redemptive standpoint, there is no disease—be it cultural, religious, social, and/or physical—that is beyond the cure that the Gospel of

Jesus Christ offers. Perhaps the main issue at hand is not necessarily the influence of Voodoo on Haitian belief and behavior but rather how properly the Church can administer the medication that God provides through the incarnation, death, and resurrection of His Son, Jesus Christ.

### **Contextualization**

Bruce Nicholls interestingly observes that the current ecumenical catchword is the “contextualization” of the Gospel (637). Contextualization has become the subject of a great deal of attention in many fields of study over the past three decades, particularly missiology. The emphasis on the term has been so prevalent that it may lead people to believe that the fate of the Christian Mission in this century rests on what missionaries, mission agencies, and missiologists do with the concept. The emphasis, however, is not without good reasons. The world is becoming a global village at a supersonic speed. Such rapid change does not only affect the world’s economy or demography. It is also redefining the concept of mission. For instance, cross-cultural mission can no longer be viewed as simply referring to missions carried on abroad or overseas. It also incorporates missions being conducted downtown by the local churches/missionaries to a cosmopolitan population that is comprised of people of all nations who enjoy the freedom of continuing to live their lives with no apparent need to adjust their cultures, worldviews, languages, and belief systems to fit their new neighborhoods. On the other hand, missionaries who are called to missions in foreign countries still need to grapple with culture shock when they are faced with differences in the languages, cultures, worldviews, and belief systems of those to whom they are called to preach the Gospel. In both cases, there is an urgent need for contextualization.

The task of this section is not to get involved into a comprehensive study of the concept. The nature of this project allows only for a marginal look of the term. As such, what follows is a broad overview on contextualization drawn from a few selected resources. This is done in three specific ways. First, there is the attempt to provide a working definition of the concept from a theological and/or a missiological perspective. No attempt is made to define contextualization from any other perspective. The best definition for the purpose of this study is suggested among those cited. Second, a peripheral look at some of the functions of contextualization is considered. Along with the definition, it appears that a good understanding of the functions of contextualization is important for the purpose of this study. Third, and perhaps the most essential element in this section, is a brief survey of some of the most known and useful methods of contextualization. These methods will be briefly studied in order to identify which may be best applied in an attempt to contextualize the Gospel message to Haitians.

### **Definition**

Contextualization is viewed as a complex process that has many facets (Maggay 7). One of the reasons that may explain the complexity of the term is the difficulties and disparities observed in the attempts to define contextualization. Many approaches toward a definition have been attempted. It seems as if every scholar in every discipline has a different way to use the term. For instance, Dolores Perin talks about facilitating student learning through contextualization (1-4). Psychologist Brent Roberts talks about “Contextualizing Psychology Personality” (1072-82). The corporate world also is using contextualization in its own context. For instance, the Language, Literacy, and Numeracy Program (LLNP) in Australia, a program that prepares job seekers for employment in the

manufacturing industry, includes an entire section on contextualization in its manual. Perhaps this is why Dean Flemming attributes the fuzziness of the term to its popularity. He laments: “Today the term is used within a number of theologically related disciplines and by thinkers from a wide range of philosophical and theological perspectives. As a result, there are different perceptions of what it is about” (Flemming 18-19). Flemming’s attitude here may lead some to believe that contextualization should concern only some specific fields of studies. Maybe he is right but maybe he is not. For instance, it is difficult to deny the importance of contextualization in the field of biblical interpretation today. Grant Osborne writes a complete chapter on Homiletics and Contextualization in his book *The Hermeneutical Spiral*. It is also impossible to deny the contribution of theologians such as Stephen Bevans and Robert Schreiter in helping to frame a theological understanding of contextualization. Perhaps of all the thoughts that give the right to these various scholars to show an interest in contextualization, the view of David Hesselgrave and Edward Rommen is probably the most sensible one. They write: “In a real sense, contextualization, culture, and theology all have a simultaneous beginning” (Hesselgrave et al 27). Possibly, Flemming’s uneasiness in relation to the popularity contextualization is gaining among the various fields of studies rests on the supposition that no field of study should be as preoccupied as missiology in providing a lucid and clear understanding of contextualization. Athena Gorospe contends, “Contextualization is a concept that has its roots in mission history, arising out of the need to make the Gospel relevant” (180). Thus, when it comes to mission, contextualization is not optional; it is a necessity (Bevans 45).

From a broad perspective, Mona Bias defines contextualization in this way: “The whole process of translating and communicating a concept in such a way that the recipient understands the message and finds this meaningful in his own context. The content is discernible and stable, though the operating form in which it is communicated may be volatile” (274). Bias’s definition may have some merit but mostly to the general usage of the word. She mentions two aspects—content and form—that provide the indispensable core of contextualization (Osborn 319). In spite of this, her definition may certainly raise some significant concerns among Evangelicals. There is no certainty that mere discernibility and stability of the content—for Evangelicals this content is seen as scripture itself—guarantees any kind of fixed and authoritative meanings on the part of the recipients. Something to guarantee a high view of scriptural authority is missing in Bias’s definition. Nicholls’s definition makes this discomfort about Bias’s definition clear when Nicholls defines contextualization as “the translation of the unchanging content of the Gospel of the Kingdom of God into verbal form meaningful to the peoples in their separate cultures and within their particular existential situation” (Maggay 6). Here Nicholls is advocating the Evangelical affirmation that the structures of theological interpretation can be indigenized but that the Gospel itself cannot be (*Theological Education and Evangelization* 637).

Flemming goes a step further to say:

I take contextualization...to refer to the dynamic and comprehensive process by which the gospel is incarnated within a concrete historical or cultural situation. This happens in such a way that the gospel both comes to authentic expression in the local and at the same time then prophetically

transforms the context. Contextualization seeks to enable the people of God to live out the gospel in obedience to Christ within their own cultures and circumstances (19).

Hesselgrave goes along the same line of thinking though using more simplistic language. He says: "I will use the term to refer to the process of communicating the biblical Gospel in such a way as to make it meaningful to the people of any given cultural context" (Hesselgrave *Great Commission Contextualization* 139).

In Charles Kraft's words, "Contextualization means doing whatever is necessary to make sure Christianity is expressed in ways that are appropriate to the context of the receiving group" (*Appropriate Christianity* 4).

To George Peters, "Contextualization properly applied means to discover *the legitimate implications* of the gospel in a given situation. It goes deeper than application. Application I can or need to make without doing injustice to the text. Implication is *demand*ed by a proper exegesis of the text" (Hesselgrave and Rommen 149).

One last, and perhaps one of the most interesting, definitions of the term comes from John Bailey. He writes: "Contextualization is simply an attempt to take off Western wrappings, which have typically become a part of worldwide Christianity, and put on 'clothing' which looks and feels much more natural and 'right' to others we are ministering to" (Bailey 5).

It seems to this writer that these few selected definitions are proven to be adequate for one to formulate an acceptable view of what contextualization may mean. A careful examination of these chosen definitions among the wide variety available will show that there are at least five key terms that emerge from them though they reveal significant

differences. These key terms are process, communication, content, form, and context. While all the definitions do not explicitly include all these five words, they are being implied in one way or another in the majority of the definitions. Taking into consideration the importance of incorporating these key words in the attempt to define contextualization from a missiological perspective, it can be argued that Flemming's definition best represents the anticipated outcome of sharing the gospel within the context of the locals. What, according to this writer, makes Flemming stand out is that his definition is both broad and restricted at the same time. It is broad enough to view contextualization as a dynamic and comprehensive process, yet it is quite restricted to portray the process as the action of the gospel being incarnated with the purpose of transforming the local context. With this, the priority of the Gospel will never diminish and will continually be held in high value and as authoritative.

### **Functions**

How contextualization functions is no less difficult to grasp than the attempt to define the word. What makes the study of the functions of contextualization most difficult to this writer is his realization that most of the resources consulted for this section of this study expound in great length on the definitions and models of contextualization but seldom say anything explicitly on the functions of the concept. Much is implied about the functions of contextualization in the various definitions of the concept that have been consulted for this study.

One of the functions of contextualization is implied when the word is used to refer to the goal of a process whereby the universal good news of Jesus Christ is authentically experienced in the particularities of a local context (Tennent 198). This leads some to

argue that the process of contextualization requires a strong anthropological emphasis. This does not mean contextualization can be conducted without sound and solid biblical theology. What this anthropological emphasis means is that contextualization requires a theological approach that is different from theology proper. Whereas theology proper may be seen as conducted from above as an elitist enterprise, contextual theology can be said to function as a theology from below with the common people being its interlocutor (Boesh 423). This means contextualization includes more than just theology; it also includes developing a church life and ministry that are biblically faithful and culturally appropriate (Moreau et al 16). In other words, contextualization functions as the process that enables people who come to Christ to form churches that are both biblically and culturally appropriate (Kraft *Culture Worldview, and Contextualization* 389).

Contextualization makes the message meaningful, relevant, persuasive, and effective within the respondent's culture (Bevans 47). This means the task of contextualization is to make the Christian message and the Church's mandate clear enough thereby enabling the recipients to clearly understand the need to accept the message even within their own cultural context. This requires unequivocal intention to choose modes and/or forms that relate to people while the meaning of Scripture remains unchanged. In Byang Kato's words: "Since the Gospel message is inspired but the mode of its expression is not, contextualization of the modes of expression is not only right but necessary" (1217).

Failure to use appropriate relevant modes of transmission may result in a failure to properly understand the Gospel. When failure to understand the implications of God's Word occurs, it is not because the Gospel is irrelevant but because the messenger



inadvertently misleads or is misperceived (Rodewald 54). According to Darrell Whiteman, the messenger needs to pay attention to three key functions of contextualization in mission to avoid misleading and being misperceived. Whiteman says: “We practice contextualization in mission in order to 1) Communicate the Gospel, 2) Critique culture and 3) Create community” (Whiteman, *The Function of Appropriate Contextualization* 53).

To Whiteman, communicating the Gospel is the primary function of contextualization. This is the foundation upon which he derives his definition of the term. In his words, “Contextualization attempts to communicate the gospel in word and deed and to establish the church in ways that make sense to people within their local context, presenting Christianity in such a way that it meets people’s deepest needs and penetrates their worldview, thus allowing them to follow Christ and remain within their own culture” (Whiteman, *The Function of Appropriate Contextualization* 53).

This definition seems to capture the essence of one of the most important reasons why contextualization is necessary to the spreading of the Gospel. However, it is not without the challenges that cross-cultural communication entails. There are many factors that can create noise that disrupts the channel of communication. When language and behavior do not impair mutual understanding of both the messenger and the recipient, one can be assured that the Gospel will make sense to the people within their local context and then Christianity will influence both lives and worldview wherever it is introduced.

Whiteman’s second function of contextualization is to critique culture. By this he means to offend but only for the right reasons, not the wrong ones. He contends, “Good contextualization offends people for the right reasons. Bad contextualization, or the lack

of it altogether, offends them for the wrong reasons.” (Whiteman *Contextualization: The Theory, the Gap, the Challenge* 3) He explains:

When the Gospel is presented in word and deed, and the fellowship of believers we call the church is organized along appropriate cultural patterns, then people will more likely be confronted with the offense of the Gospel, exposing their own sinfulness and the tendency toward evil, oppressive structures and behavior patterns within their culture. (Whiteman 3)

What is interesting in Whiteman’s view here is the understanding that the Gospel possesses an offensive nature in and of itself. It appears that this side of the Gospel will surface one way or another during the encounter between the Gospel message and the current culture. The problem here, however, is how plausible is it for the recipient to accept the offense as being from the message itself not from its bearer. This difficulty lies in the perception that the Gospel must be communicated in word and in deed, two actions that are often at the basis of most offensive confrontations. Also, it is to be noted that Whiteman places almost all the responsibilities of contextualization on the shoulder of the messenger of the Gospel. He argues “when Christianity is not contextualized or is contextualized poorly, then people are culturally offended, turned off to inquiring more about who Jesus is, or view missionaries and their small band of converts with suspicion as cultural misfits and aliens” (*The Function of Appropriate Contextualization* 53).

Communication, which is Whiteman’s first function, requires mutual understanding. This implies that the onus is on the missionary to be persuasive by making the message convincing and interesting enough to get the people’s attention.

Whiteman's third function of contextualization in mission is "Creating Community." According to Whiteman, this is "the need to develop contextualized expressions of the Gospel so that the Gospel itself will be understood in ways the universal church has neither experienced nor understood before, thus expanding our understanding of the kingdom of God" (*The Function of Appropriate Contextualization* 56). The importance of this function is that it enables the messenger to learn from other cultures how to be more Christian in her/his own context, thus connecting the particular to the universal (*The Function of Appropriate Contextualization* 56). Whiteman also argues that people should be reminded that no one has a privileged position when it comes to understanding and practicing the Gospel. The Gospel cannot be the exclusive property of any one culture for it refuses to be culture bound (*Contextualization: The Theory, the Gap, the Challenge* 2-7). Therefore, it is the task of the messenger to contextualize the Gospel wherever they go.

Hiebert once wrote: "In each culture Christians face new questions for which they must find biblical answers" (*Critical Contextualization* 108). These answers must be framed in ways that are relevant to the culture and faithful to the Bible. This is the task of contextualization. Hence, it can be argued that contextualization functions as a necessary filter that missionaries should use to prevent the message from being soiled with their personal wrappings in the transmission process of the Gospel to the local indigenous recipients.

### **Approaches**

There are several ways this section could have been named. It could follow Hiebert's ways of referring to the various approaches of contextualization as 'views'. It

could have also been titled ‘theories of contextualization.’ It could have followed Hesselgrave to talk about ‘kinds’ of contextualization, to name a few possibilities.

Taking from their technical sense and usage, ‘views, theories, kinds, methods,’ and ‘models’ do not necessarily mean the same thing, but they all seem to serve a similar purpose when placed before another term. That purpose is to differentiate the many ways people think, understand, and explain the various manners a concept can be referred to. It is in this sense that ‘approach’ is being used here and can be substituted in this section by any of the previously mentioned words with no different meanings intended. The real need for this section rests on the observation that not all contextualization schemata are valid, that is, not every effort to transculture revealed truth remains faithful to the original gospel (Hesselgrave and Rommen 127).

Hesselgrave and Rommen begin the second part of their book *Contextualization: Meaning, Methods, and Models* saying, “History—whether sacred or profane, ancient or modern—testifies that some sort of contextualization is necessary if we are effectively to cross cultural barriers with the gospel” (37). Then they continue to ask these probing questions: “What sort of contextualization does the Bible enjoin? What sort does it proscribe?...What kind of contextualization will clarify the gospel for people in a respondent culture?” (37) To answer this question, a few major scholars that address the issue are consulted. These include scholars such as Robert J. Schreiter, Stephen B. Bevans, David J. Hesselgrave, Edward Rommen, and Paul G. Hiebert.

Robert J. Schreiter begins his quest for an approach to contextualization by probing the meaning of local theology. He emphasizes the notion that theology has over the years been conducted within a framework of some sort of universalized cultures. He

then advocates the need to listen to the various cultural resonances of differing communities. This is to enable the theologian to relate his theologizing to both specific contexts and communities. For this to be done, Schreiter proposes three different models which he refers to as translational, adaptational, and contextual. In effect, what this work contributes to the subject is the strong emphasis on the importance of theologians learning to listen to the local people, thereby enabling them to decipher specific meanings through the communication system of a specific community. In other words, the theologian is called to be a student of a specific community before he can construct a theology that speaks and relates to the context of such a community.

Another noteworthy work for this section is Stephen B. Bevans' *Models of Contextual Theology*. The idea behind this book suggests that the notion of doing theology in one single way that fits all cultures and times has been obsolete. "There is no such thing as 'theology'; there is only *contextual* theology...." Bevan claims (3). After he expounds on some methodological issues and concerns regarding contextualization, Bevans wastes no time to distinguish six models of contextual theology. These are: translation, anthropology, praxis, synthetic, transcendental, and countercultural models. Each of these models is distinct and possesses some unique features, yet they are not mutually exclusive of each other. Neither can one be exhaustively applicable to all situations of faith (33). They are all linked to each other in one way or another.

Perhaps, one of the most significant points of discussion Bevans may evoke in this work is his endeavor to broaden the scope of life to which the Gospel message must interact. In making a case for the significance of contextualization over against terms such as indigenization and inculturation, Bevans contends that: "Contextualization points

to the fact that theology needs to interact and dialogue not only with traditional cultural values, but with social change, new ethnic identities, and the conflicts that are present as the contemporary phenomenon of globalization encounters the various people of the world” (27). This suggests that contextual theologians should devote more time to subjects that would normally fall to sociologists, anthropologists, and ethnologists. If such endeavor can be pursued within a sound biblical framework and with equal proportion, it can be an invaluable undertaking for the spreading of the Gospel of Jesus Christ.

Hesselgrave and Rommen, in their *Contextualization: Meanings, Methods, and Models*, provide a substantive introduction to contextualization. They offer an analysis of the various approaches of contextualization in five broad perspectives. These are philosophy, theology, anthropology, hermeneutics, and communication. Their exposition aims at helping missionaries to be aware of the pitfalls as well as the importance of contextualization by providing technical analysis of various global approaches to the term with some practical implications by showing how the Gospel relates to a particular context. Their focus is more what one may consider as an applied contextualization. This means they are more interested in providing methods about how to apply contextualization than theories. This is true particularly of their second chapter where they provide many ways to contextualize the Gospel. They provide a significant contribution to the subject in their work here, yet it could have been even more beneficial if a set of guidelines about how to biblically assess any given culture were provided.

Paul Hiebert’s “*The Gospel in Human Contexts*” is another work that helps to frame one’s approach to contextualization. Taking his idea of “Critical

Contextualization” from his earlier work *Anthropological Reflections on Missiological Issues*” (75-92) a step further, Hiebert devotes the bulk of *The Gospel in Human Contexts* to address two polar views of contextualization that he refers to as over-contextualization and non-contextualization. He does this with the aim of helping resolve those two extreme views by providing an alternative approach to contextualization that he refers to as “missional theology.” Hiebert says:

To communicate the Gospel in human contexts, we need a third way of doing theology—a way of thinking biblically about God’s universal mission in the context of the world here and now, with all its particularities, paradoxes and confusions. We refer to this third theology as *missional theology*, although the same principles of studying Scripture, studying humans, and incarnating the gospel in human life apply equally to pastors, church elders, and indeed every Christian. (*The Gospel in Human Contexts* 44)

He refers to this process as the endeavor to exegete humans (*The Gospel in Human Contexts* 13). The missionary needs to exegete both his own context and that of the people to whom he is called to witness. This then will accomplish the purpose of the Gospel, which is not simply information to be added to current cultural understandings but rather the transforming power that changes individuals and societies into signs and witnesses of the kingdom of God (*The Gospel in Human Contexts* 13).

Another very important component of Hiebert’s contribution to this subject is his theory of the “Flaw of the Excluded Middle” expounded in his *Anthropological Reflections on Missiological Issues* (189-201). This theory suggests there is a flaw in the

Western two-tiered view of reality, namely religion and science. Between religion and science, Hiebert contends that there is a middle level of supernatural beings and forces (*Anthropological Reflections on Missiological Issues* 196). This is the realm where local gods and goddesses, ancestors and ghosts, demons and evil, spirits and dead saints live (*Anthropological Reflections on Missiological Issues* 194). This is also where questions reside such as the uncertainty of the future, the crises of present life, and the unknowns of the past (*Anthropological Reflections on Missiological Issues* 197). According to Hiebert, in the West, these questions are left unanswered or are thought to be simply accidents, luck, or unforeseeable events, and hence are unexplainable. “But many people are not content to leave so important a set of questions unanswered, and the answers they give are often stated in terms of ancestors, demons, witches, and local gods, or in terms of magic and astrology” (*Anthropological Reflections on Missiological Issues* 198).

The various approaches noted here seem to be saying the same thing in diverse ways. It is obvious, as Schreiter argues, that there exists in each community a set of local meanings of things. As such, there is a local theology that is being expressed through meanings attached to life in a way that is specific to one community. Thus, there is a need to construct a distinctive local theology. There are many ways through which constructing such distinctive theologies can take place. Bevans provides a map with six models that theologians have been using. Hesselgrave and Rommen suggest that any approaches to contextualization be examined in at least five broad perspectives, namely: philosophy, theology, anthropology, hermeneutics, and communication. Hiebert sums up all of this in his critical contextualization model by advocating the need to exegete the community. All of this would lead to one objective—to learn to know a given community



in such a way that it facilitates the bearer of the Gospel to communicate the message of the Gospel in a manner that allows people to see themselves, their setting, their ethnicity, and their culture within the truth of the Gospel which in turn should give the indigenous people the opportunity to choose Christ and so impact their belief system and practice to become like Christ. This is contextualization in its most effective understanding and practice.

### **Research Design Literature**

This research is qualitative in its methodology and pre-intervention in its design. As qualitative research, the burden is to explore the issue of sickness and healing within the context of the Bible and the Haitian traditional understanding to gain an understanding of the underlying reasons and motivations about why Haitian Christians tend to seek help from folk religious practices. As such, the scope of the research does not extend beyond offering insights and provides ideas to the issue at hand. This is in line not only with the methodology of this work but also with its design which is pre-intervention. The issues of sickness and healing are being researched here to fully describe the problem attached to them in the context of Christianity in Haiti with the hope to identify some significant steps to help address the issue.

The literature used in this survey fits seamlessly with the design of this research. While some of the scholars might have used mixed research methods, it can be argued that research for most of the books used in this survey have taken a qualitative approach. A few examples are in order here. First, Hiebert begins his work *Anthropological Reflections on Missiological Issues* with this question: “What can anthropology contribute to mission?” (9). The idea behind the books is to offer insights into how

anthropology can help missionaries communicate the biblical content without falling into the danger of syncretism. This is purely a qualitative pre-intervention approach to research. His other works cited in this research such as: *The Gospel in Human Contexts* and *Transforming Worldviews* also take the same research approach. Second, there is the work by Philip M. Steyne, *Gods of Power*. This is a book on Animism. Steyne states his purpose in these terms, “It is my hope that learning about this counterfeit system [animism] will cause readers to seek out the truth of the Bible vis-à-vis other religions” (10). The research required to meet such a goal is unequivocally qualitative.

R. Murray Thomas calls his book on Haitian religion *Roots of Haiti's Vodou-Christian Faith: African and Catholic Origins*. He states: “This book is the result of my first attempt to seek answers to two questions: ‘*What, precisely, is the dominant form of religion in the nation of Haiti? From what sources has that religion evolved?*’” (3). He goes on to state that he began his search for answers by surveying the published literature on the subject. This is another compelling case for the use of qualitative method of research in the works used in this survey.

The list could go on and on. The resources used provide clear techniques about how to survey an issue, interact with it, and identify ways to help resolve the issue. Most of what is presented through these resources are subjective ideas that tend to describe the issues and/or the conditions of given situations from the point of view of the authors’ personal experiences in the field and of those experiencing the situations. The result has been the formulation of several hypotheses for which the writers show no apparent burden to test. This is in perfect tandem with the approach of this research.

### **Summary of Literature**

Several themes, definitions, arguments, and concepts have emerged from the resources discussed in this section that are helpful in accomplishing the purpose of this work. First, there is the overall conception of the Jewish people about the origin and cure of sickness. The Old Testament literature discussed in this section reveals that to the Jewish people God is the origin of everything. This is not to say that God is the author of evil. It simply means that to the Jewish people whatever happens to them comes from the permissive will of God. This view will keep them from seeking help from any other source but God. Such an understanding shows how involved God is in the life of human beings. God, to the Jewish people, does not relegate the care of human beings to some sort of demi-god or lesser divinities.

Second, there is the understanding of the people of the New Testament about sickness and healing. There are at least three helpful themes that emerge from the literature reviewed in this section. (1) Over time, the Jewish understanding of Yahweh as the sole origin of sickness has been greatly challenged. The New Testament text records multiple incidences where it is believed that Satan or the Devil inflicts sickness on people. The New Testament writers are not embarrassed, neither are they defensive toward the idea that people suffer from sickness that comes from the Devil. In essence, this was the accepted viewpoint. This is perhaps due to the influence of Greco-paganism within the culture. With the Romans being the world power at that time, it is no surprise that their Greek-influenced worldview would impact the Jewish people and then the church.

Furthermore, since the Gospel has been offered to all races and people, those who came into the church brought with them their pagan views of life. However, (2) there was

a continuity of the Old Testament theme that Yahweh is the supreme One who smites and heals. This is clearly seen in the healing ministry of Jesus Christ, the Son of God, God in human form. What Jesus's ministry reveals is that the change in people's belief does not affect the nature, the capability, and the will of God. People may believe Satan has the power to inflict sickness, but that does not change the fact that God has the ultimate power to heal every type of sickness. There has never been one occasion where Jesus failed to perform a healing miracle because of a lack of power. He could, at will, resist performing a miracle, but this has never been due to his inability. This places God in the New Testament where God is in the Old Testament. There is no change in God though people's beliefs may change with time. This is a very helpful thought for this work.

Third, the study of the African origin of the Haitian cultural understanding of sickness leads to many meaningful insights. First, it reveals that animism is the root of Voodoo religion. This provides a solid starting point to study Voodoo's view of sickness. It also helps to clarify where the Voodoo belief in a pantheon of deities comes from. It is from animism that Voodoo inherits its manipulative nature, coercive power, ability to generate fear, accommodation of other religious beliefs and practices, and its protean nature. Of the nature of the religion, perhaps the most relevant insight learned through the literature is that in Voodoo it is extremely important that one always maintains a healthy relationship with the spirits of one's deceased relatives. One's state of health is concomitant to keeping a healthy balance with their relationship with the spirits of departed love ones. This indicates that the prominent belief about the origin of sickness is from a broken relationship with the spirits. It also leads the writer to believe that healing necessitates the restoration of such relationships. This concept is key to this study in a

sense that it helps to understand why people in the church might choose to go to a Voodoo priest in search of their healing.

The fourth set of important insights gained for this study come from the resources on contextualization that have been consulted. Contextualization is at the heart of this work. The resources consulted help to frame an understanding of the concept that will be helpful to this work in the following ways. First, there is the meaning of contextualization. Scholars studied in this survey wrestle to provide a working definition of the term. It is such a complex term that no one definition can claim to embody the entire meaning and implication it carries. However, definitions such as John Bailey's, which emphasizes the cultural aspect of contextualization by seeing the term as an attempt to take off Western wrappings and put on clothing which looks and feels much more natural and right to those we are ministering to, is crucial to this work. As simple as this illustration may seem, it has much cultural value. It can be considered a call to incarnate into the culture one is sent to deliver the message of the Gospel. To strip oneself of one's own cultural garments and put on attire of the culture one is called to serve is one of the most important actions that one can take to express Christianity in ways that are appropriate to the context of the receiving group.

Second, along with the definition, there are the models of contextualization that are a key factor for this study. Several important insights have been gained here. Hiebert seems to be the most helpful among them. His approach of critical contextualization, which warns against non-contextualization and over contextualization and promotes a strong emphasis on exegeting the community one is called to reach, fits best the envisioned outcome of this study. That is to preach the Gospel in such a way that it

challenges and influences Haitian Christians to view sickness and healing in the same way God intended all God's children in all times to view and act on this issue. Even more meaningful to this research is Hiebert's theory of the Flaw of the Excluded Middle. In a nutshell, this theory helps to understand the reason why Haitian Christians still incline to seek help from folk religious practices when they face life-threatening situations like sicknesses. The reality of life in Haiti is more than high religion and science. There is also the issue of invisible powers, the relationship with ancestral spirits, the need for healing, and the reality of dealing with day-to-day crises and unexplainable events.

## **CHAPTER 3**

### **RESEARCH METHODOLOGY FOR THE PROJECT**

#### **Overview of the Chapter**

This chapter details the research methodology used in this project. It briefly elaborates on the nature and purpose of the project, the research questions, the ministry context of the project, along with some specifics on the participants such as criteria for selection, description, and the process of selection of the participants involved in this project. It furthermore describes the instrumentation employed and the process of data collection and analysis.

#### **Nature and Purpose of the Project**

The question why Haitian Christians in Haiti tend to seek healing help for sicknesses from folk religious practices continues to baffle almost everyone who is interested in the subject. From a biblical and evangelical standpoint, such practice goes beyond its perplexing nature to turn out to be one of the most injurious practices for Christian faith in Haiti. It poses a serious threat to the very essence of the Christian faith for it assumes that the one and only Holy Triune Christian God can cohabitate with the various demi-gods of the Haitian Voodoo pantheon. This calls for a serious consideration of the relationship between the Gospel and the Haitian worldview and religious practices.

This project is an attempt to look at the issue of sickness and healing at a level deeper than what could be visibly seen and observed among typical evangelical Christians in Haiti. The purpose was to understand why many Christians within the Methodist Tradition in Cap-Haitian respond to sickness and healing using folk religious practices in order to challenge and encourage Evangelical leaders to develop discipleship

tools that would enable Haitian Christians to respond to illness from a more biblical perspective.

### **Research Questions**

Three research questions guided this project. They were asked to delimit the scope of this research, to enable this research to progress systematically through its stated purpose, and to facilitate the researcher to collect meaningful information about different aspects of the participants' life, pattern of behavior, and belief system regarding their experience with the issue of sickness and healing.

#### **Research Question #1 (RQ1)**

How do Christians within the Methodist Tradition in the Cap-Haitian area respond to the problem of sickness and the hope of healing in their lives?

The purpose of this question was to gain an understanding of how the participants think about themselves as Christians, how they became Christians, how they described their Christian faith, and what they thought differentiates being a Christian from being a non-Christian. Sub-questions were asked during unstructured interviews that helped unearth what the participants really believed about their Christian faith and themselves in relation to the issue of sickness and healing.

The question also helped to extract the participants' belief on the origin of their sickness, their feeling about their suffering as Christians, their view on the role of God in their suffering, their sentiment about the church support during their sickness, and their thought about the outcome of their sickness.

#### **Research Question #2 (RQ2)**



The second question was: “What are some of the most popular traditional religious practices observed by Christians within the Methodist Tradition in Cap-Haitian when faced with sickness?” This question was asked to identify the most popular behaviors of the participants toward sickness and their actions in seeking healing. Participants were encouraged to share about the steps they took toward their healing. Through unstructured interviews, they were asked to describe their healing process, where they had gone to seek healing, what they had done to get healed, and who had helped them to get healed. They were also encouraged to elaborate on the effectiveness of the practices and why they thought it worked or not.

### **Research Question #3 (RQ3)**

“How do Cap-Haitian Methodist Christians understand and apply scripture when faced with the question of illness and healing?” was the third research question of this project. The purpose was to understand how the participants understood and applied the teaching of the Bible to their illness and healing experiences. The participants were encouraged to describe ways in which they believed the Bible addressed their issues. They were also asked to state how their knowledge of the Bible and understanding of the teaching of the Bible contributed to how they coped with their sicknesses and what they had done in their quest for healing.

### **Ministry Context**

The ministry context of this project brought together three strategic churches within the Methodist Tradition in Cap-Haitian. These three churches were strategically valuable to this research for at least three main reasons.

First is Methodism's doctrinal harmony. Though they are from two different denominations, they are among the churches that best represent in their teaching and practices the core values of the Wesleyan/Methodist tradition in Cap-Haitian. Second is geographical proximity and strategic locations. These churches are strategically located. They are within an approximate fifteen mile radius. The first church is in the heart of the populated suburb south of Cap-Haitian. The second is in the heart of Cap-Haitian's downtown, and the third is in the suburb north of Cap-Haitian. Members of these churches are homogeneous in their cultural background. They speak a common language. There is a certain cultural congruency among them. However, the locations of the churches allow for some varieties in the social status, educational background, and peasant migration to Cap-Haitian among their members which is important to this research. Third, there is the close relationship between this researcher and the leadership of these three churches. Having been a member of two of the three churches for many years, this researcher has gained the trust of the leadership of the three churches. Hence, he has received full cooperation from the pastors of these churches thereby enabling him to smoothly proceed with the research.

All three churches in this project have been wrestling with the issue of their members who are inclined to use folk religious practices in the search for healing. They have been puzzled by the reality that Christians who might have used such practices have demonstrated a genuine conversion and dedication to Christ. When it comes to matters of life and death such as serious illnesses, they have not excluded the possibility of seeking folk religious practices to their healing. As such, they have all been longing to find a viable biblical answer to that endemic and spiritually detrimental tendency that has

plagued the Haitian Christian faith over the years. It is in this context that these three churches were chosen as samples of the Evangelical Church in Haiti for this research.

### **Participants**

Purposive sampling is the sampling technique that was used to select participants for this research. It is the most appropriate technique for the qualitative nature and the purpose of this research. There are two major reasons for this. One, purposive sampling falls under the broad type of “Nonprobability Sampling.” Nonprobability sampling is arguably the most widely used sampling method in qualitative research (Neuman 220). In addition, it allows the researcher to choose participants for their relevance to the research topic rather than their representativeness, and it also allows for limited knowledge about the larger population from which the sample is taken (220).

Two, the nature of purposive sampling provides better fodder to support the criteria needed in selecting the participants for this research. As Tim Sensing notes: “Purposive samples select people who have awareness of the situation and meet the criteria and attributes that are essential to your research” (Kindle Locations Ch. 4). Tim May views purposive sampling as the technique that allows the selection of participants to be surveyed according to a known characteristic (95). John Swinton and Harriet Mowat sum it this way: “Purposive sampling is where the sample is specifically chosen because it offers the best chance of answering the question. The sample is usually taken at one point in time” (69). The desired characteristics sought in the selected participants made purposive sampling the best sampling option for this research.

**Criteria for Selection**

The participants were selected to fit the purpose and the research questions of this project. This selection was based on four characteristics:

1. Participants must have been members in good standing in their churches. This means they needed to be regular members of their churches. Churches in Cap-Haitian keep attendance records of their members through membership cards. Church members are required to have their membership card punched each time they come to Sunday school, communion, and Sunday morning services. To verify their regularity, they only needed to show their membership cards.

2. Participants must have been baptized Christians for the past five years or longer. By this time, a participant should have already learned and been able to articulate the basics of their Christian faith. This was done to alleviate any doubt that the participants might have trouble differentiating their Christian faith from their cultural folk religious practices.

3. Participants must have gone through a period of life-threatening sickness personally or witnessed the suffering of a close member of their immediate family. Having gone through a period of serious sickness was essential to shaping the awareness of the participants, thereby qualifying them to participate in this research. However, at the time of the research, participants must have been physically and mentally healthy.

4. It was preferable that participants still had some close influential relatives and friends who are not Christians. The idea behind this was to gauge the level of influence that unsaved relatives might have had on Christians in their decision making to seek healing.

## **Description of Participants**

As noted earlier, the participants were all members of three churches within the Wesleyan/Methodist tradition in the Cap-Haitian area. The three churches were strategically chosen. All participants were Haitian-born natives. They were part of a non-English speaking population. The study was conducted in their native language, Haitian Creole. They were regular members of their churches. Their ages ranged from 18 years old and up. They were both male and female. The senior pastors were asked to help choose the best participants possible based on the desired characteristics. After signing their consent agreements for the research to take place in their churches, the pastors were asked to help select twenty persons within their congregations who best fit the criteria for this research. Fifteen were chosen from each church for anonymity purposes, for a total of forty-five subjects.

The senior pastors of the selected churches played a significant role in the selection process of the participants for this research. They all received a letter requesting their approval to use selected members of their congregations as participants in this research. The letter was accompanied by an agreement form that the pastor needed to sign and date (see appendix). Upon receiving the signed agreement, a selection guide that contained the criteria for the desired participants was sent to each pastor (see appendix B).

The pastors had to initiate contact with the potential participants from their congregations. As desired and stated in the criteria, the pastors selected twenty members in their respective congregations that fit the criteria for this research. Each pastor was encouraged to identify potential participants who were open and truthful about discussing

their experience with a researcher. Upon the selection of the twenty potential participants, the pastors then provided the researcher with a list that included the names and telephone numbers of each participant. Only the pastor and this researcher had access to this list. This list was kept in a safe box in this researcher's private office with a lock that only this researcher could access. The pastors informed the participants in advance that they would receive a telephone call from the researcher.

Participants needed to fit at least eighty percent of the characteristics outlined earlier to be considered for this research. No emphasis was laid on literacy issues among the criteria. There was no discrimination based on literate and non-literate participants. It would have been very helpful if all the participants would have been able to answer questions on a survey on their own. However, on the initial meeting with the participants, the consent was read to all participants who could not read or write. They were asked to mark the paper with an X indicating that they have verbally heard and agreed to the consent form. As such, no one was excluded based on not being able to read and write.

Upon receiving the list from each pastor, each potential participant was contacted individually via a telephone call. The purpose of the call was to set an initial meeting with each participant. The time and place of the meeting were decided based on the availability and preference of the participant. That meeting was conducted in Haitian Creole, the language that is understandable to all the participants. The purpose of the meeting was to present the project verbally and allow potential participants the opportunity to ask questions. They received information about the purpose of the research, the risk-free nature of the research, the confidentiality of the data, the condition for participation that included the right to refuse and withdraw from the research without

any penalty, and a proposed schedule for interview and filling out a survey questionnaire. In addition, during the meeting, each participant received a consent form. It was read out for participants who could not read or write. Each participant was assigned a code name made from letters and numbers to preserve confidentiality even to the research team. For instance, one was named WV5110.

After the initial meeting with each potential participant from each church, the researcher went through the collected consent/selection forms. Each form was measured against the desired characteristics that were set. The most valuable characteristics were a life-threatening personal sickness and the number of years the participant had been a Christian. Those that met the criteria at the highest level after careful analysis and revision were informed over the telephone and told of the next step of the process.

### **Ethical Considerations**

All who participated in this research, including pastors and members of their congregations, have received a Consent Form that detailed the terms of this research. Their participation was contingent on their consent by agreeing and signing the Consent Form. The form was handed to participants personally during an initial meeting between them and the researcher. They were encouraged to read the form and ask questions before they decided. Those who agreed to participate were asked to sign the form. As noted earlier, the form was read to the participants who could not read or write. They were asked to sign with an X indicating their verbal agreement to the terms of the research.

To preserve confidentiality, the participants were informed that they would not be identified by names throughout the research period. Instead, each one of them would be assigned a code name made of letters and numbers. The only data that included the names

and telephones numbers of the participants were the lists the pastors provided to the researcher. That list was kept confidential and was stored in a secure place in the researcher's private office.

In the same way, all interview notes and completed and returned questionnaires, participants' answers, and transcripts were all coded and securely locked in a file cabinet in the researcher's locked office to which only he had access. The same measure was taken regarding electronic data. The data was stored on a personal password protected computer which only the researcher had password protected access. Participants were assured that all documents, whether hard and/or soft copies, would be destroyed between six to twelve months after the research was completed.

There was no foreseeable risk—physical, economical, psychological, social, or emotional—that was anticipated to impact a participant in this research. Participants knew that they would not be exposed to anything that would be hazardous to them physically. Psychologically, the atmosphere of the interview was set in such a way that participants did not find any reason to express anxiety, sadness, regret, or emotional distress during the research. Also, participants were informed that they would not be under any economic obligation. Place and time of meetings were arranged at the discretion of the participants. The researcher was liable for any cost for transportation that may have been incurred. There was also no foreseen social risk that was involved in this research. The nature of the data that was collected could not negatively impact others' perceptions of the participants. In other words, there was no risk of jeopardizing the participants' reputation and social standing of any sort because of this research.



.Participants were also informed that significant findings of this research would be shared with this researcher's director and cohort colleagues during presentation in colloquium at Asbury Theological Seminary. They were also told that at the end of the research, after it has been approved, relevant results could be made available to the pastors. This is to help them better understand the general reason behind the issue. The purpose is only to enable them to provide better and more appropriate teaching to the issue. No specific details about the participants, their responses, experience, and practices would be identifiable in the findings. Participants were aware of the strict confidentiality measures that guided this research.

### **Instrumentation**

Interviews and a survey questionnaire the instruments were used in this research to gather information. They were conducted to collect data that enabled the researcher to understand the experience of the participants regarding sickness, healing, and the meaning they attach to that experience. Interviews were conducted in person with each participant. The participants, the researcher, and his assistant who helped only with taking, transcribing, and editing notes of the answers collected from the interviews, were the only persons in the room. All interviews were conducted in Haitian Creole, the native language of the researcher, his assistant, and the participants. Answers from the participants were translated into English by the researcher and his assistant.

Being part of an oral culture, Haitians best express their experience through friendly conversations. As such, two types of interviews were used for this research including unstructured and semi-structured/questionnaire interviews. This implies there were two occasions for interviews with each participant. The second interview followed

the first one within a period of six weeks. That was important to build a stronger relationship and trust thereby allowing the participant to feel more comfortable to share more deeply their experience and belief about the subject.

The first interview was focused on the history of the participant's life where the participants could tell as much as possible about themselves considering their life-threatening sickness and Christian life. That enabled the researcher to gather information that helped to formulate or readjust questions for the second interview. The second interview took a semi-structured form guided by a questionnaire. The focus was twofold, naming concrete details and reflections on the meaning of the participant's experience. In a context where modern technology was accessible to everyone and illiteracy was not an issue, the second interview could be replaced by an electronic online survey. However, in the context of this research where some of the participants could not read and write much less have the privilege to use a computer and the internet, all surveys were conducted face-to-face with pen, paper, a recorder app from the researcher's cell phone, and a laptop computer.

Data for the instrument used in this research was collected through pen, paper, the researcher's personal laptop, and his cell phone. There was also the use of voice recordings through the recording app on the researcher's personal cell phone. There were no video recordings or online surveys. After each interview, any data in a hard copy form were secured in the researcher's locked office. The voice recording data was protected by an encrypted password protected app on the researcher's cell phone. Electronic data was secured via password to the account of the researcher's personal computer. Data collected during the research was shared only with the researcher's language

editor/secretary who was helping in collecting, editing, and coding data. Research data will also be available as desired to the Dissertation Coach, Dr. Robert Danielson. No one else will have access to any data collected for this research. The research assistant signed a confidentiality form before his involvement in this research.

Between six to twelve months after completion of the dissertation and its final approval, all data will be deleted. Data saved on the researcher's computer will be deleted and all hard copies of data will be shredded as well, no later than one year after the date the dissertation is completed and approved. Access to the result of the research will be made available to the participating pastors and other interested persons only after the final approval of the dissertation. By that time, all raw data collected during the research will be deleted and none of the churches or individual participants can be identified.

### **Reliability & Validity of Project Design**

Margaret D. LeCompte and Judith Preissle Goetz interestingly argue, "The value of scientific research is partially dependent on the ability of individual researchers to demonstrate the credibility of their findings" (31). They continue to affirm that: "Regardless of the discipline or the methods used for data collection and analysis, all scientific ways of knowing strive for authentic results. In all fields that engage in scientific inquiry, reliability and validity of findings are important" (LeCompte and Goetz 31). The reliability and validity of the instrument used in this research rests on this researcher's understanding that (1) validity in the context of research is "the property of a measure that allows the researcher to say that the instrument measures what he says it measures" and (2) reliability is "the ability of the instrument to measure consistently the phenomenon it is designed to measure" (Hammersley 73-74). The interview and the

questionnaire used in this research were constructed to consistently measure the participants' belief and practices regarding their views of sickness and healing. In other words, the value and the reliability of the findings of this research rest on the researcher's confidence that the instrument used to collect and analyze data in this research best suited the purpose and the nature of the research.

The validity and reliability aspects of the instrument used here can be trusted, according to Tim Sensing, based on how often a questionnaire is used and tested. A tested questionnaire would at least help to "...Avoid ambiguous or misleading words and phrases...; inflammatory comments...[and] questions with two objects that could lead to more than one acceptable answer" (Sensing Kindle Location Ch. 4). Sensing provides three options to testing the trustworthiness of a questionnaire. First, two or three people can take the questionnaire and offer feedback. Second, an independent expert can be asked to assess the questionnaire; or third, the questionnaire can be field-tested in a different setting (Sensing Kindle Locations Ch. 4). The questionnaire and the interview questions for this research were assessed by independent persons before they were used and presented to the participants. Questions that reflected the researcher's biases, questions that were considered as leading, questions that were ambiguous, and questions that had an offensive flair to the participants were discarded after the assessment of the experts.

The work of independent people in assessing the interview and survey questions used in this research helped to ascertain the validity and reliability of this research in two other ways. These are what Tim May calls the standardization and replicability (91-92) of the research design. Standardization assumes a certain 'equivalence of stimulus' which

implies that every respondent has been asked the same questions, with the same meaning, in the same words, same intonation, same sequence, in the same setting and so on (May 92). While the researcher cannot boast of being a skillful interviewer, he was, however, very intentional in creating a standard and similar atmosphere with each participant as much as was possible. The instrument was designed in order that the primary focus during the interviews has been to find ways to help the participants to remember, organize, and share the knowledge they have acquired through their experiences on the issue of sickness and healing.

Replicability is another reason for the validity and reliability of the research design used in this research. According to May, replicability allows for other researchers to replicate the survey using the same type of sampling, questions, etc. and come up with the same results with different groups at different times (92). This researcher believes that when the criteria used to select a sample that is representative of the targeted population for this research and when the instrument used in this research is applied, similar results will be obtained on different occasions.

### **Data Collection**

This research was a qualitative pre-intervention research. “Qualitative research,” declares Sensing, “systematically seeks answers to questions by examining various social settings and the individuals who inhabit these settings” (Kindle Locations Ch. 3). Sensing goes on to quote Denzin and Lincoln who describe qualitative researchers as those who “study things in their natural settings, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them” (Kindle Locations Ch. 3). Such study involves the collection of many empirical materials to which three had been

identified and used during this research, namely: personal experience, life story, and introspection that helped to describe the experience of the participants on the issue of sickness, healing, and the meanings they attach to their lives.

It can be argued that interviews and survey questionnaires, the two methods used to collect data in this research, are the cradle of collecting data for a pre-intervention qualitative research. Many scholars in the field of research would support this claim. The likes of J. W. Heyink and T. J. Tymstra go to the extent to argue that “Beyond any shadow of doubt, the method most used and best documented in qualitative research is the interview” (294).

To collect data for this research, participants were interviewed individually twice. The first interview took the form of an unstructured interview. This researcher was aware of some apprehensions that exist regarding some methodological issues in the analysis of unstructured interviews as Wispé and Thayer (1959) noted. However, the importance of an unstructured interview to this research was too valuable to have been unheeded. The interview helped to ferret out underlying attitudes and provide indications of their importance (Wispé and Thayer 223) to the participants regarding the issues of sickness and healing they have experienced.

Twenty-four questions guided the first interview. These questions were formulated to answer the three research questions that governed this research. Answers for each question were duly recorded either by handwritten, typed, or by audio recording format that ensured the collection of every bit of valuable information. An answer sheet was prepared beforehand which allotted space for the researcher to write down the answers of the respondents.

The second interview was a semi-structured interview with a survey questionnaire for each respondent to fill in. The focus was to collect concrete details about the participants. It was built to enable the researcher to understand and reflect more on the participants' knowledge, perception, and behavior regarding their experience of sickness and healing. The first interview produced a favorable and trustworthy environment for the participants who felt more comfortable to share their thoughts more deeply during the second interview. The questionnaire also helped to test the consistency of the participants' understanding, feeling, belief, and behavior about sickness and healing. Additional notes were taken to complement the answers the respondents provided on the questionnaire.

### **Data Analysis**

The primary purpose behind collecting data for this qualitative research was to gain insights from the participants about the issue of sickness and healing. Those insights that were found came from talking to people through the two interviews that this researcher conducted with the participants. Dale T. Griffie interestingly observes that "People interviewed may not be able to say what they think..., or may not be able to state their opinion in a clear way" (36). This is interesting because most of the meaningful insights gained from the interviews were hidden among the piles of information collected. As such, data analysis here was the process by which the researcher sifted out the data collected from the interviews to hunt down meaningful insights about sickness and healing from the participants.

To analyze the data, the researcher followed the method of data analysis that Miles and Huberman (Griffie 36) suggested for analyzing interview data. These are a set

of five steps. One, after each interview, the researcher listened to the audio recording and transcribed the interviews. Two, the transcripts were read several times over a period of three weeks that enabled the researcher to be familiar with what was said. Three, the interviews were coded. By this it meant that the researcher sought for specific themes that became apparent which were identified by capital letters such as BS for belief system and BP behavior pattern. In fact, the reason behind almost all the questions that were asked was to either discover the participants' belief system and/or pattern of behavior regarding their sickness and healing experience. Belief system was described as the specific opinions of the participants regarding the issue. Similar or closely related opinions throughout the transcripts were marked with identical identifiers for proper study and interpretation. Behavior Pattern was defined as everything the participants would agree to do, whether actions were taken or not, during their sickness and healing experience. A different identifier was used to mark information that characterized a behavior pattern.

Four, a summary of the coded data was written. A word document was produced with the two main codes as titles. Under each code was a list of what the respondents had said in relation to the code. That helped to reduce the amount of transcribed information into a few pages which allowed for a better view of the whole picture and interpretation. Five, an interpretation was written. That was not only a summary, but also an endeavor to tie together the themes and force the researcher to process the entirety of the data.



## **CHAPTER 4**

### **EVIDENCE FOR THE PROJECT**

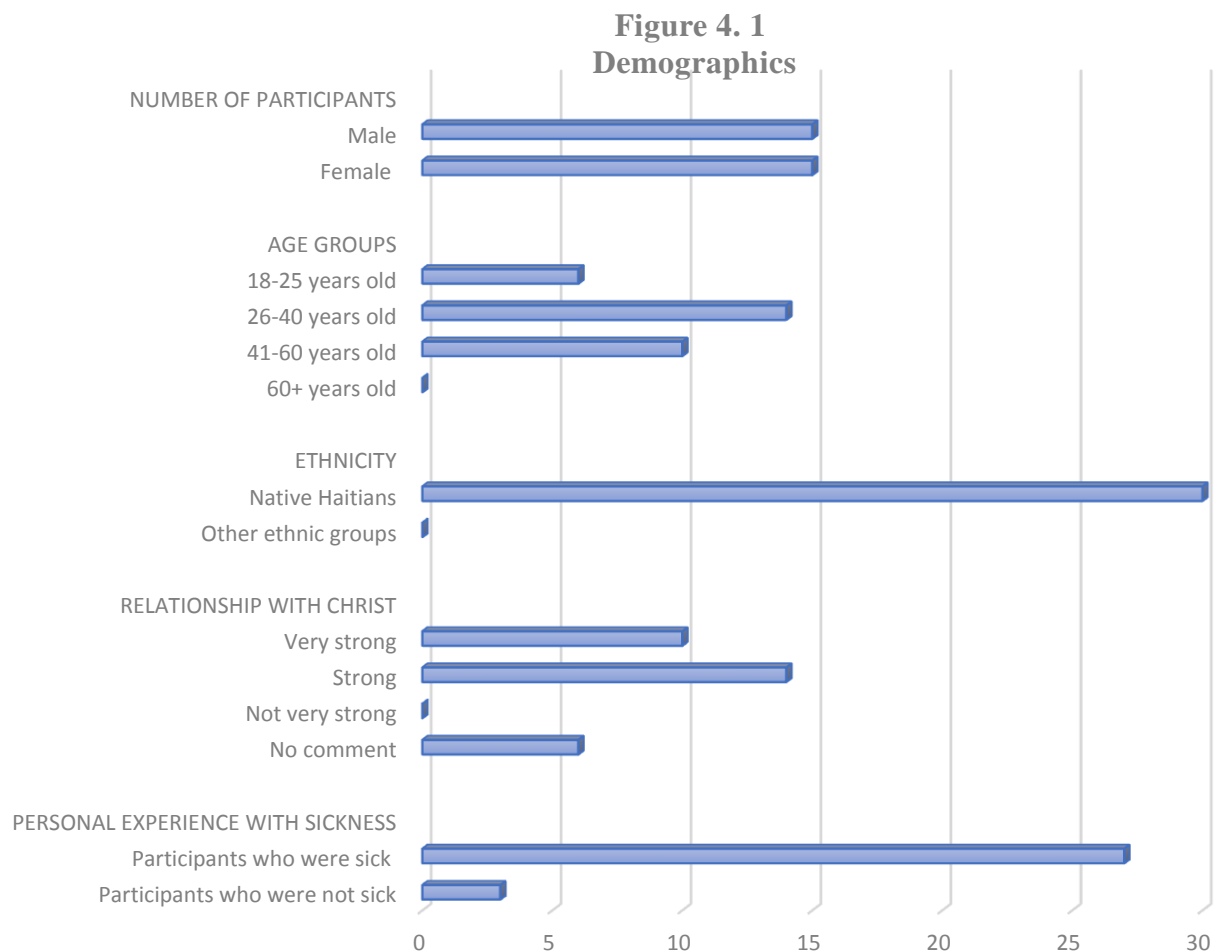
#### **Overview of the Chapter**

Evangelical Christians within the Wesleyan/Methodist tradition in Haiti are taught to trust and obey God not only for their eternal life but also for their daily struggles in this present life. However, there remain questions about their full commitment to God when they are faced with a life-threatening crisis such as sickness. The purpose for this research was to critically investigate how they respond to the issue of sickness and healing.

This chapter describes the participants and their demographic setting. Then, it details the collection and analysis of the data gathered as evidence for this project. This involves organizing the information the researcher has read including answers to the survey questions he constructed and what he heard during personal interviews. The aim was to work with the data in such ways to accomplish a primary and a secondary goal. The primary goal was to determine the participants' belief system about sickness and healing. Belief system here means the beliefs, sets, expectancies both conscious and unconscious (Wilker and Milbrath 479), that the participants at the time of this investigation accept as true or not true of their sickness experience. Special interest was placed on identifying which among their beliefs about sickness and healing are Christian and biblical and which are purely cultural and/or folkloric. The secondary goal was to determine how the participants' belief system informs or influences their pattern of behaviors in relation to their sickness. The chapter concludes with a list of major findings from the considered data.

## Participants

Participants in this research were evangelical Christians from the Wesleyan/Methodist tradition in the Cap-Haitian area. Sixty consent forms were distributed to those potential participants of the three churches chosen for this research. The initial intent was to choose the forty-five most qualified responses among them. However, as stated in the consent form, the participants have the right to refuse to be part of the research even though it was their pastors who suggested them. Of the sixty who received the forms, thirty of them agreed to participate by signing and returning the consent forms to the researcher. As qualitative research, it was decided that thirty responses were a reasonable number to work with. A demographic detail of the thirty



participants is presented in Figure 4.1 here.

It is interesting to realize that both male and female were equally represented in the research. Generally, men in Haiti are more reluctant to share their experiences. For them to represent fifty percent of the participations in this research explains the interest they have in this issue. Ages were pre-categorized into four age groups for this research. These were 18-25, 26-40, 41-60, and 60+ years old. Other than the preferred intent of the researcher that all participants must be 18 years and older, there were no specific reasons or theories behind this age grouping. Fourteen participants were between the ages of 26 and 40 years old. Ten of them were between the ages of 41 and 60 years old. Six of them were between the age of 18 and 25 years old. None of the participants were over 60 years old. All participants were physically healthy enough to take part in the research. They are all native Haitian born. Level of education was not a concern for this research. As such, there was no attempt to find out the participants' level of education.

In addition to the participants' demographic setting, there were questions related to their own estimation of their personal relationship with Christ. They were asked to describe their relationship with Christ using the following words: very strong, strong, not so strong, and no comment. Ten participants were confident enough to describe their relationship with Christ as very strong. This is 33.33 percent of the participants. Fourteen among the thirty participants describe their walk with Christ as strong. This is 46.66 percent of the participants. Six participants choose the "no comment" option and none chose the "not so strong" option. What makes this finding interesting is the average years since conversion of the participants. This is 16 years. The youngest Christian among the participants has been saved since three years and the oldest forty-one years.

Another important qualifying factor for a participant to be part of the study is their personal experience with sickness. Twenty-seven of the thirty participants confirmed they had personally gone through a period of sickness. That was significant for the cogency of the data collected for this study.

As stated earlier, the analysis of the data was conducted using texts and narrative data that were collected by means of open-ended questions and written comments the participants provided of their answers of the survey questionnaire they filled in. Data also came from notes and summaries from individual interviews.

To analyze the data, special interest was placed on questions that helped to flesh out the participants' belief system about sickness and healing. That helped to fulfill the purpose of the analysis which was to determine the participants' belief system about the subject matter and their pattern of behavior.

To facilitate the analysis and the interpretation of the data, the researcher used a set of three predetermined categories of themes as his method. These categories were: (1) the participants' general perceptions of sickness and healing, (2) the participants' personal understanding and behavior about their sickness, and (3) the participants' biblical understanding of sickness. Answers to the survey questions were arranged under these three preset categories for two main purposes. First, they were used to help coherently organize the data in order that focus would be placed on the major themes that were necessary to fulfill the purpose of the analysis. That automatically led to the second purpose. The three predetermined categories were used as fodder to provide answers to the three research questions of this research.

### **Research Question #1**

#### **Deciphering the participants' view of general perceptions about sickness and healing in Haiti**

The first research question reads: “How do Christians within the Methodist Tradition in the Cap-Haitian area respond to the problem of sickness and the hope of healing in their lives?” On the surface, this question may seem to place more emphasis on behavior or attitude than anything else. In the context here, it is not. There are at least two reasons. One, the term “respond” here is intended to be more of a statement of the participants’ conviction of the truth they believe in the reality of sickness than an observable activity relating to sickness. As such, the focus of the question is more on the participants’ belief than their behavior. Trying to understand the participants’ belief is the place this research starts. Many ethnographers, anthropologists, and sociologists, such as Wilker and Milbrath, would suggest that a person’s belief system is the context from which her attitude derives and in which it must be understood. What this means is that no attempt to study and understand a person’s behavior or attitude before understanding her belief system is valid. To try to do this is to try to put the cart before the horse (Wilker and Mibrath 478).

The second reason this question focuses more on trying to decipher the participants’ belief system rather than their behavior about sickness is the approach taken in collecting the data. A research endeavor that aims at studying the participants’ attitude or behavior requires intense field study, immersion in the participants’ life, and focus group studies among many other methods of collecting data. A few interviews and a survey questionnaire, which were the methods used to collect data for this research, can only help to reveal what the participants believe is true about the subject matter.

However, presentiment, which often originates from belief, is said to determine motives (Hiller 321). Motive often orchestrates behavior. In this case, when belief is revealed, behaviors can also be known and understood.

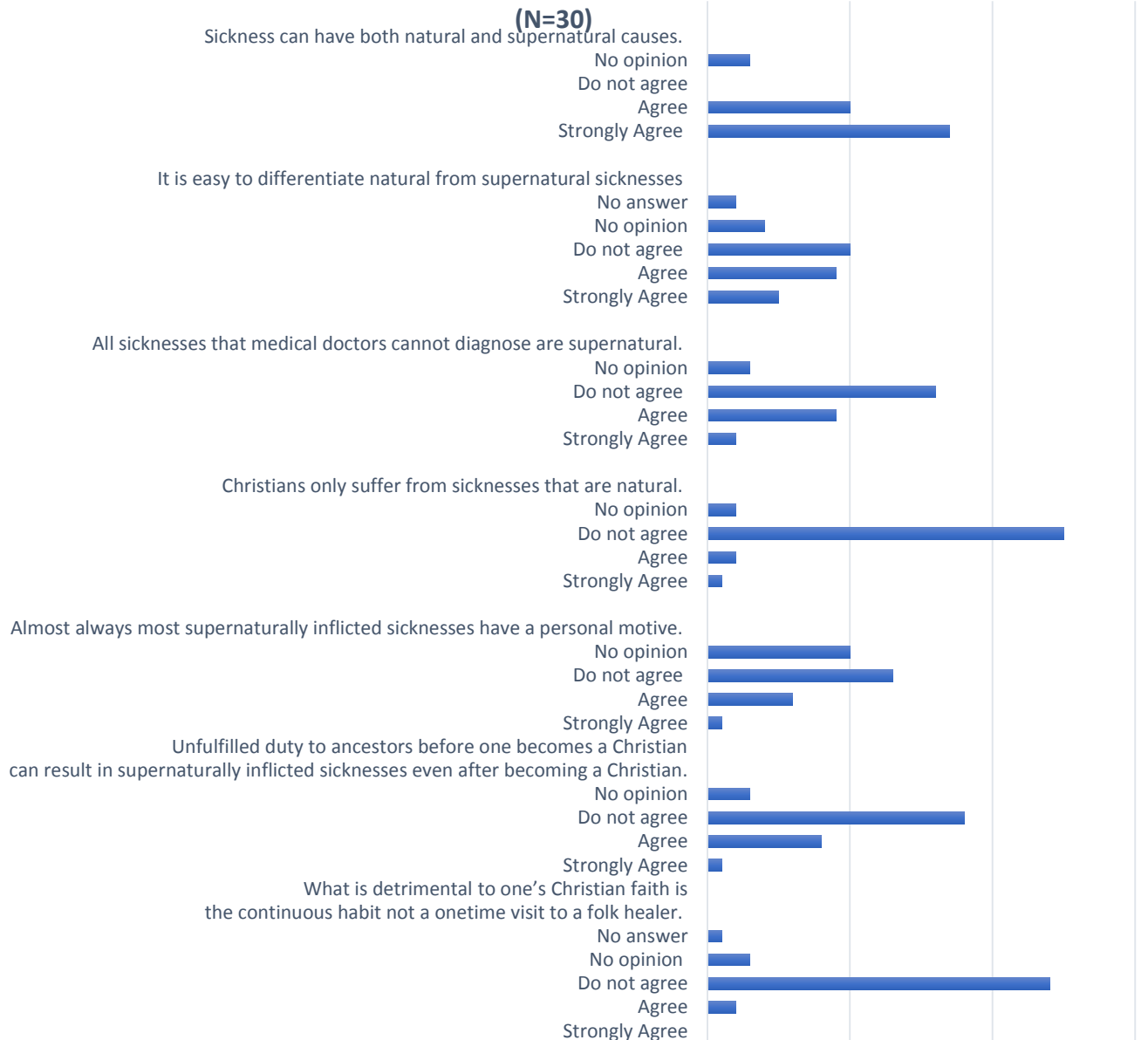
Considering this understanding, the researcher proceeds to answer the first research question by asking the participants questions that help to reveal what they believe is true or not about sickness and healing. Their answers were grouped under the preset category labeled: “The participants’ general perceptions of sickness and healing (PGP).” The technique used to ask questions and evaluate the answers is the Likert Scale. This is a psychometric, non-comparative, and unidimensional response scale primarily used in questionnaires to obtain a participant’s degree of agreement with a statement or set of statements (Bertram 1). The basic idea behind using the Likert Scale is to give a statement to the participants to which they need to indicate their level of agreement by way of an ordinal scale. Likert Scales usually have five (5) levels of agreement. In the survey questionnaire used in this research, only four (4) levels of agreement were used. These are: strongly agree, agree, disagree, and no opinion which were respectively numbered 1, 2, 3, and 4 on a scale.

The researcher is aware of the weaknesses of this scaling technique. Some like John Kleeman have gone to the extent to consider Likert Scales as a source of survey error that should be avoided. One of the major objections to the technique is referred to as “acquiescence response bias.” The term “acquiescence” was originally introduced to describe a tendency to agree rather than disagree with propositions in general (Cloud and Vaughan 193). The primary reason given for this objection is that people are much more likely to agree with a statement than disagree with it because they want to be polite or

they lack formal education, thinking the researcher may know more than they do (Kleeman 1). This, however, is concomitant to the type of the survey and the statements from which the participants need to choose.

In the case of this research, the participants had to assess each statement based on their own belief and experience. That required no formal education and thus no reasons for the participants to be intimidated by the researcher. As such, what may be considered a weakness of Likert Scale in some contexts is a strength for this research for the purpose

**Figure 4.2**  
**General Perceptions Of Sickness And Healing**



here was for the participants to think about how they feel about each statement based on their experience and knowledge before they answered.

Fifteen general statements that describe the general perceptions within the context of the participants about sickness and healing were provided to the participants with which they had the choice to strongly agree, agree, disagree or have no opinions. Most of the statements are generally and culturally accepted. Some are taken directly from voodoo beliefs and practices. Among these statements, the most pertinent ones are examined here. A descriptive chart (Figure 4.2) provides more details about these statements and the participants' response of them.

The first statement: "Sickness can have both natural and supernatural causes" intended to find out what the participants believe about the origin of sickness. The statement gave the participants the choice to scale their belief of the general perception that sickness can have both natural and supernatural sources. The natural source of sickness is believed to be due to natural causes known to all through scientific explanations. Also, any sickness that God might inflict would fall into the category of natural sicknesses. In this way, natural sickness and God's inflicted sickness would be the same kind of sicknesses. This, however, does not mean God is responsible for all the natural sicknesses one may suffer. The supernatural sicknesses are from all sorts of evil or unclean spirits that are often being manipulated by men to fulfill their intended desires.

Such an understanding of a dual source for sickness was stated for at least two reasons. First is the religious and cultural inheritance of the participants. Descending from an African heritage, it can be argued that animism forms the backdrop for the participants' belief system. Findings from the literature review for this research show that



in an animistic worldview, belief in a supernatural world is prominent. To the animist, there is a spiritual and/or a supernatural reason for almost everything that occurs in the world. Thus, there cannot be sickness without the involvement of the supernatural world. Second is the researcher's personal knowledge, understanding, and experience of the participants' worldview. In his experience, there is no doubt in the thinking of the participants that sickness has two origins namely, the natural and the supernatural.

Of the thirty respondents, seventeen strongly agreed that the causes of sicknesses can be both natural and supernatural. This is 56.66 percent of the participants. Ten participants agreed to the claim. This is 33.33 percent of the participants. There are no participants who disagree with the statement and three chose not to share their belief about the claim. This shows 89.99 percent of the participants believe it is true that sicknesses can have both natural and supernatural causes. This is important to understand how the participants respond to the issue if indeed a person's belief influences her behavior.

After establishing the participants' belief system about the origins of sickness, it was necessary to find out how easy they believe it is to differentiate sicknesses that they consider natural to those that they believe are supernatural. The second statement on the list was framed to accomplish this. It is a statement that tests the participants' personal belief that it is easy to differentiate between natural and supernatural sicknesses. Five participants strongly agreed that it is easy to differentiate between natural and supernatural sicknesses. Nine participants say they agreed that the differentiation is easy. Ten do not agree that you can easily differentiate between the two causes of sickness while four chose not to voice their opinion and two altogether ignored the question. This

means, fourteen participants believe it is easy to differentiate sicknesses that are natural from those that are supernatural. This is 46.66 percent of the participants. The ten participants who believe it is not easy to differentiate the two types of sicknesses represent 33.33 percent of the participants. The remaining four participants, which is 13.33 percent, chose not to disclose their belief and two, which is 6.66 percent of the participants who leave the answer scale blank, indicate that most of the participants hold to the belief that it is easy to distinguish natural sicknesses from supernatural ones. The question is how they come to that conclusion.

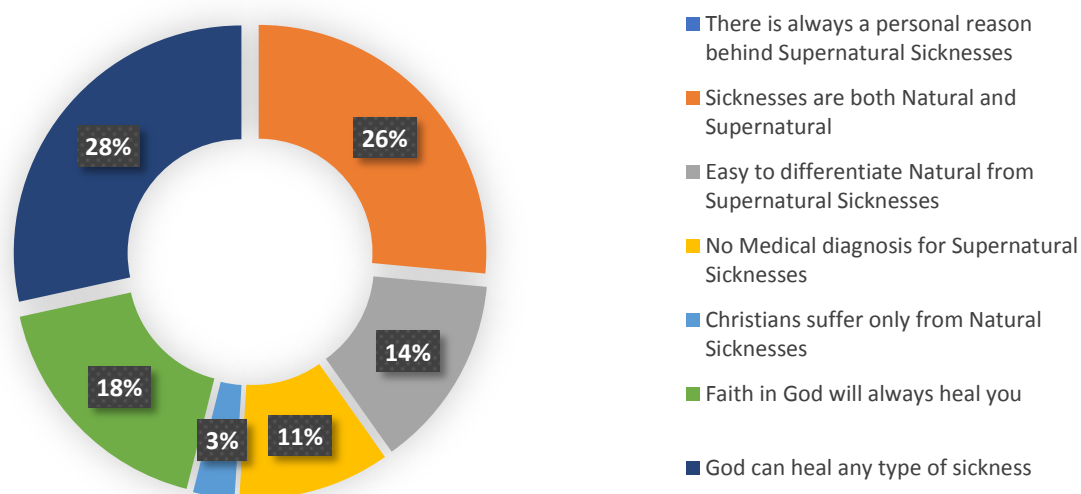
The third statement, which reads thus: “All sicknesses that medical doctors cannot diagnose are supernatural,” helps to find out the reason behind such belief. The statement was constructed to test the participants’ belief about the general claim that all sicknesses that medical science cannot diagnose are supernatural. Two participants strongly agreed with the claim. Nine agreed, sixteen disagreed and three have no opinion to the claim. This shows that eleven participants, which is 36.66 percent, believe that all sicknesses that medical science cannot diagnose have a supernatural cause. The quantity that does not believe this claim is more than that which believes it. The significance of 36.66 percent of the participants believing the claim to be true should not be underestimated. The statement is generally perceived as true in the Haitian culture. Voodoo beliefs and practices feed most of Haitian socio-cultural ways of thinking. It is to be remembered that the participants of this research are all Christians with an average of sixteen years since conversion. As such, for 36.66 percent of participants to believe that all sicknesses that cannot be diagnosed by medical doctors are from supernatural sources without even thinking about the lack of proper medical infrastructure in Haiti is alarming.

It is also believed that even medical doctors tend to hint at their patients that their issues are beyond medical science when they fail to diagnose their patients' sicknesses. Medical doctors would say to their patients that they have tried everything yet could not find out what is wrong with them. Once a sick person hears this, she is left to make her own diagnosis. Almost all the time the case is diagnosed as a supernatural cause. The finding here shows there is a significant number of Christians who believe once medical science fails to diagnose, the sickness is supernatural. Now the question is, "what about Haitian Christians who are sick, yet medical doctors in Haiti fail to diagnose their sicknesses?"

The fourth statement of the questionnaire provided an opportunity to the participants to answer this question. The statement reads: "Christians only suffer from sicknesses that are natural." This question excludes all possibilities that a malignant spirit can harm a Christian. An overwhelming number of participants, being twenty-five, do not agree with the statement. This is 83.33 percent of the participants. This implies that 83.33 percent of the participants believe Christians can suffer from both types of sicknesses. It is to be remembered that in the mind of the participants, supernatural sicknesses are the work of evil spirits manipulated by men to accomplish their desired wills. This means, in the belief system of 83.33 percent of Christians who participated in this study, someone, presumably a non-Christian, with the desire to cause suffering, can manipulate an evil spirit to inflict a disease on a Christian.

The finding for statement six on the survey helps somehow to understand the reasoning behind the participants' belief that Christians can be inflicted with supernatural sicknesses. The statement reads: "Almost always most supernaturally inflicted sicknesses have a personal motive." The statement was written to find out what the participants believe about the claim that there is always a personal reason behind every supernatural sickness. This is a crucial statement because it comes directly from Voodoo's belief system. In Voodoo, there is always a personal reason that leads to someone's sickness. Supernaturally inflicted sicknesses in Voodoo is the result of broken personal relationships. It can be a broken relationship with a business associate, a family member, and/or a spirit. Out of the thirty participants, one strongly agreed, six agreed, thirteen disagreed with the statement and ten chose not to give their opinion. It would be unfair to place the ones who did not voice their opinion in a category with which they chose not to associate. However, it calls for attention when ten persons who have been saved for an average of sixteen years are not comfortable enough to share their opinion on a

**Figure 4. 3**  
**PARTICIPANTS' BELIEF SYSTEM BASED ON STRONGLY AGREE**  
**AND AGREE ANSWERS**



perception that comes directly from Voodoo's belief system. Even for six participants to agree with the statement is alarming for Christian thinking and best practices in Haiti.

Perhaps one may argue that statement six requires a level of academic knowledge of the claim of Voodoo to find out that this perception comes from the religion. This would be true only to a person who would have learned about Voodoo from textbooks. For the context in which the participants live, statement six only represents in writing what people talk about every day. If the perception that statement six describes leaves any doubt about obviousness to the participants' thinking, statement seven eliminates all such doubt. This is another perception that Voodoo's belief system perpetuates in the Haitian thinking. The statement reads: "Unfulfilled duty to ancestors before one becomes a Christian can result in supernaturally inflicted sicknesses even after becoming a Christian." The general belief is that no one can escape the punishment of the spirit of an ancestor for an unfulfilled duty to that ancestor.

In this research, the conception was contextualized to test the participants' belief that even Christians are not protected from the wrath of an angry ancestor to which a duty had not been fulfilled. The finding is surprising and eye opening. One respondent strongly agreed with the statement. Eight agreed with the perception. Eighteen disagreed and three chose not to share their opinion. This means thirty percent of the participants believe that the spirit of an ancestor, which is best known as the "loas," can have power to inflict sickness to a Christian who failed to accomplish a duty to the spirit of an ancestor before becoming a Christian. This is not a meaningless finding, nor an unassuming folkloric belief for a Christian to hold. Most of the time, to avoid falling under the wrath of the angry ancestral spirit even without direct involvement, a Christian

may arrange to pay the debt to appease the spirit. This shows how much a culturally acquired disposition that allows for an unobstructed cohabitation between Christianity and Voodoo in Haiti exists in the Haitian mindset.

## **Research Question #2**

### **A quest to identify the participants' personal beliefs and practices**

The second research question for this study reads: “What are some of the most popular traditional religious practices observed by Christians within the Methodist Tradition in Cap-Haitian when faced with sickness?” This has been the most difficult question to investigate in this research. The primary reason is that the question calls not only for the participants' complete honesty about their practices but also it has a confessional flavor to it. One reality that appears evident in conversing with the participants is that Christians who got involved in folk religious practices are not proud of their acts. They do not feel comfortable talking about even their past involvement in folk religious practices. This is even worse for them to talk about their involvement after they have become Christians.

Knowing this reality, the approach to investigate this aspect in this research was indirect and diplomatic. Participants were given a set of questions that were written in a non-confrontational, non-judgmental way. At times they were asked to talk about their knowledge of the involvement of other Christian people instead of themselves. In this way they felt safe, being reassured that they would not be judged.

A series of ten questions made the interview and the questionnaire for the investigation in this section. Details about their answers are presented in Figure 4.4. The search started with a question that asks the participants to state the kind of sicknesses

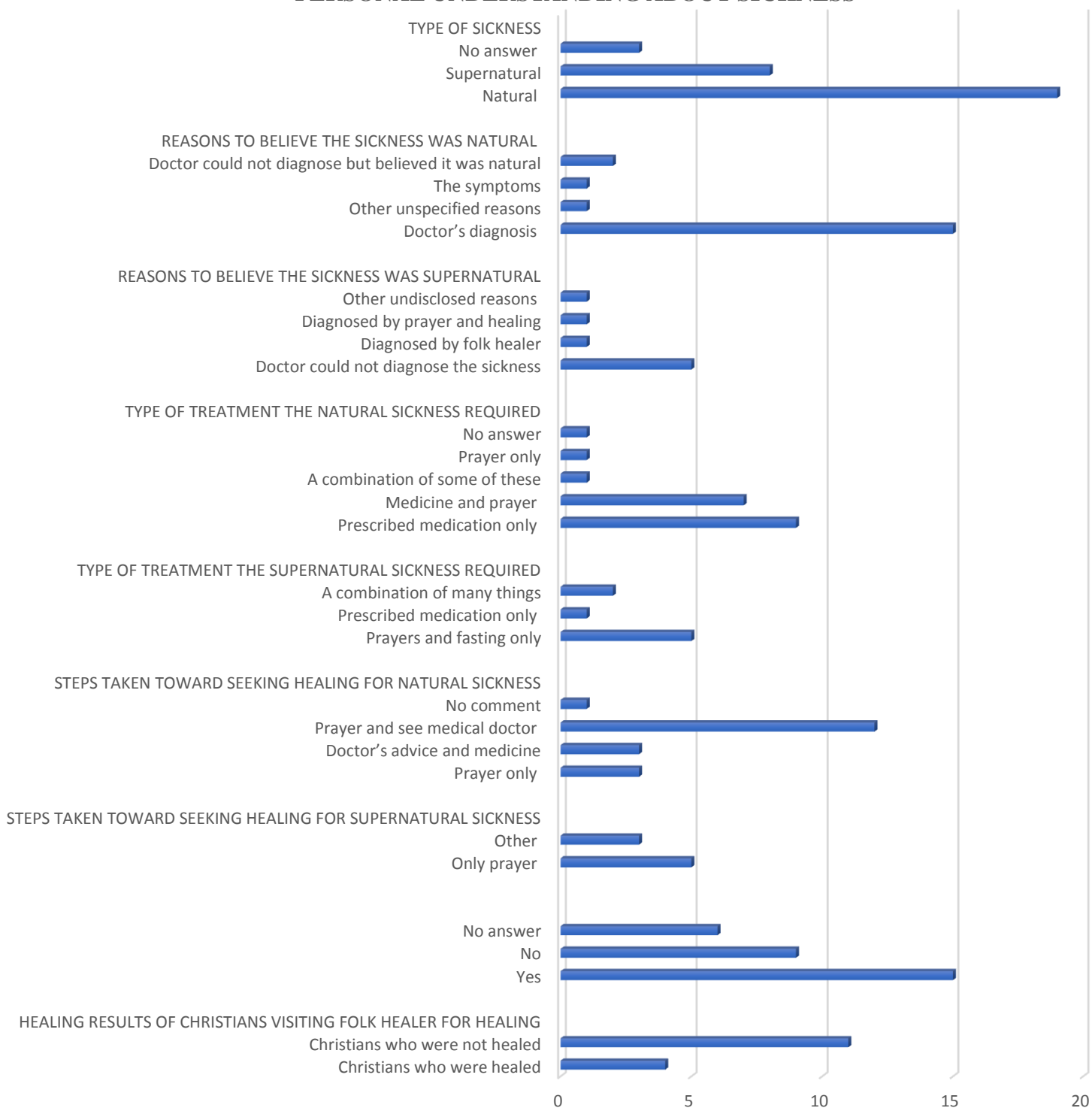
they believed they had. Nineteen of them believe they suffered from natural sicknesses. Eight concluded that their sicknesses were supernatural. The remaining three did not provide any answers. The research continues to find out the reasons the participants believe they had the type of sicknesses they had. The main reason those who believe they had natural sicknesses give for their sicknesses is the fact that medical doctors found out what was wrong with them.

For the eight participants who believe their sicknesses were supernatural, five justify their belief on the basis that medical doctors could not identify what their problems were. One participant reveals that the nature of her sickness was known after a member of her family went to consult a folk healer who gave the reason for the sickness. Another participant believes she had a supernatural sickness after her doctor could not do anything to help, yet a servant of God prayed for her and she was immediately healed.

The participants were asked to tell about the kind of treatments they believed their sicknesses necessitated and what steps they took toward seeking healing. Nine among the nineteen participants who believe their issues were natural claim their issues necessitated prescribed medications only. Seven believe a combination of medicines and prayer was needed for their cases while one says only prayer was needed in his case. The other two respondents believe they needed a combination of many things to help them. For those who believe they had supernaturally inflicted sicknesses, five argue that their cases only needed prayer and fasting. The rest of them believe some prescribed medicines helped and a combination of many other things were needed as well.

The next question on the survey asks the participants to describe the steps they took toward seeking healing. The question was asked with the aim to find out their best practice toward seeking help for their healing. High on the chart for those who describe

**Figure 4.4**  
**PERSONAL UNDERSTANDING ABOUT SICKNESS**





their sickness as natural were prayers and seeking help from medical doctors. Twelve of the nineteen participants said that was the action they took. Of the remaining seven, three said they only prayed, three others said they only followed their doctors' advice and took the medicines prescribed while the other person chose to say nothing about what was done to help with her sickness. No one mentions the use of any folk religious practices. Medicines and prayers were the steps those who talk about their search for healing took. This seems to contradict the well-accepted claim that Haitian Christians tend to seek healing help from folk religious healers and practices. However, the finding for question 8 in this section shows there are reasons not to quickly dismiss the claim.

The next question shifts the attention from gathering information about the participants' personal practices in their quest for healing help. Its focus was to gather information about the participants' knowledge of Haitian Christians they believe incorporate folk religious practices in their healing pursuit. The question reads: "Do you know or have you heard of a Christian who was sick and then went to seek healing from folk healer?" Fifteen participants said they know a Christian who was sick and visited folk healers in search for healing. Nine participants said they do not know any of such Christians, while six chose not to answer the question. This is significant and revealing. For fifty percent of the participants in this research to admit that they know a Christian who has used folk religious practices for healing is quite significant to understand the prevalence of such practices among Haitian Christians. It is important to ask how is it that none of the actual participants admit any involvement in such practices while fifty percent of them know someone who has been involved? This is a question for further research in the future.

Question nine aimed at gathering further details from the participants regarding what happened when Christians went to folk healers. The participants report that four of the fifteen Christians they knew who went to folk healers were healed. Eleven never got any better. What is interesting to find out is that most of the participants attribute the healing performed by folk religious healers to the will of God. In other words, to them all healings that occurred are in accordance to the will of God. Not that they believe the folk healers are working on behalf of God but that if God does not will it, no one can be healed. This also implies that it was the will of God for those who never got better. A participant told a sad story of a Christian who died just after he went to see the folk healer. The folk healer's version was that the patient came too late. To them, the belief to seek a folk religious healer seems to be irresistible even though there is no guarantee of healing. The service of these folk healers is convenient, quick, mechanical, affordable, and culturally inherent.

Two primary rituals were required of those seeking healing from a folk healer. They were asked to either go to their birthplace, most of the time in the countryside, to offer some sort of food as peace offerings which may involve the killing of livestock and cooking produce from the ground. Part of the meal would be eaten and part of it would be scattered at specific places such as under the trees or at crossroads. It all depends on what the angry ancestral spirit requested. The other ritual involved bathing with special herbs, consumption of some secretly prepared herbal tea, and/or rubbing of the body with special ointments. It all depends on the nature of the sickness.

### **Research Question # 3**

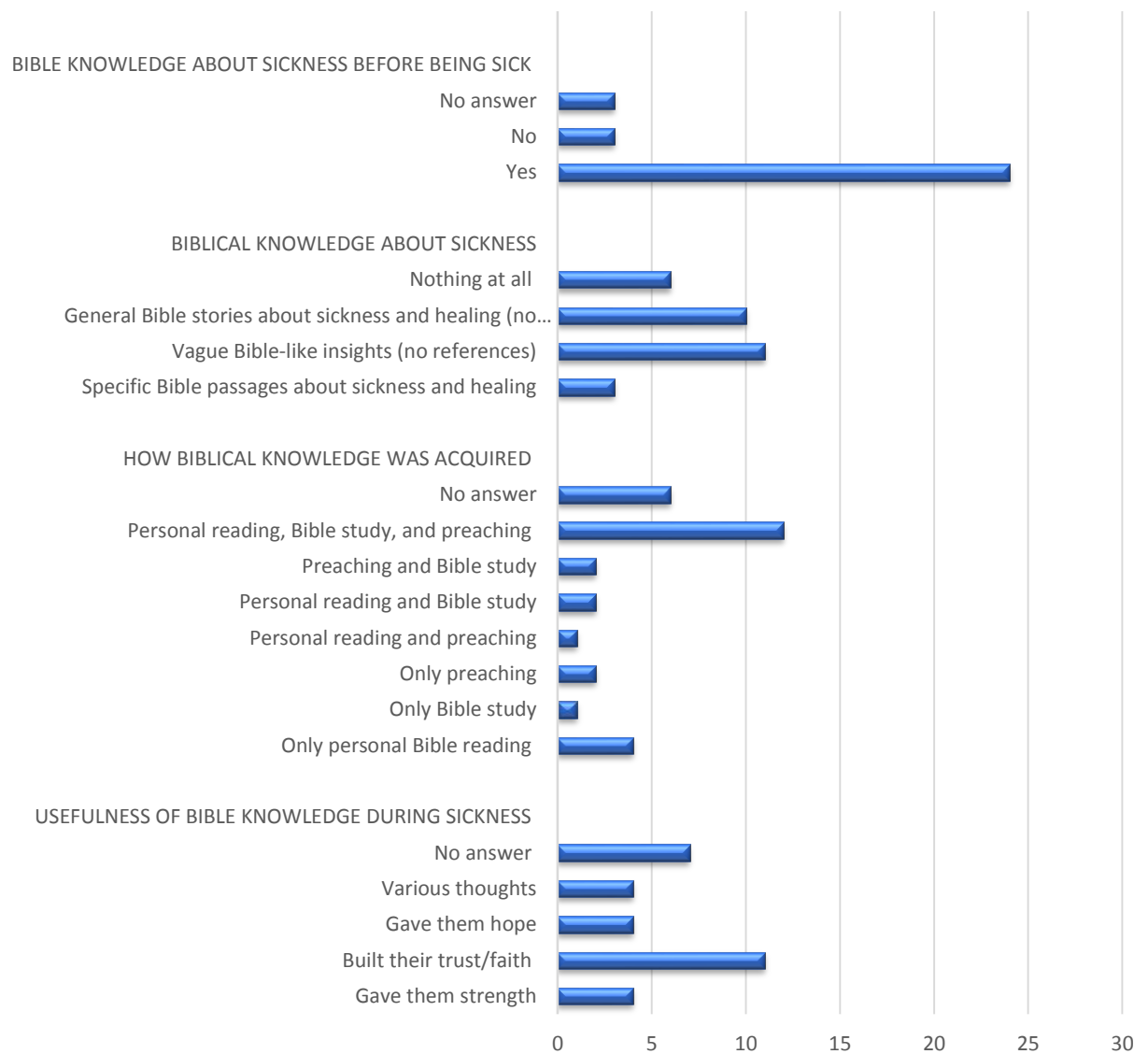
#### **Understanding and application of the Scripture regarding sickness and healing**

The third research question sought to find out how the participants understand and apply the Scriptures to their issue of sickness and their hope of healing. The question reads: “How do Cap-Haitian Methodist Christians understand and apply scripture when faced with the question of illness and healing?” Participants were encouraged to share their knowledge about what the Bible says about sickness and healing. They were asked to tell if they have learned anything from the Bible regarding sickness before they were sick. Twenty-four answered affirmatively. Three said they have not learned anything and the other three gave no answers. Those who said they have learned something about sickness were encouraged to share on the kinds of biblical knowledge they had acquired about sickness. Three specific types of knowledge were found. One, there are participants who know specific Bible passages with references about sickness and healing. Three participants find themselves in this category. Two, there are participants who share vague Bible-like insights about sickness and healing with no specific verses or references. A majority, eleven out of twenty-four participants, fall in that category. Three, there is the category where participants know some general stories in the Bible about sickness and healing without knowing where to find them in the Bible.

After the quest to find out the participants’ biblical knowledge about the issue, attention was turned to the means by which the participants have acquired their knowledge. They were encouraged to tell about how they learned their biblical insights about healing and sickness. No less than seven different means were noted in the data collected. One, there was personal reading of the Bible only. Four participants stated that

all they have learned about sickness and healing came only from their personal reading of the Bible. Two, there is one participant who states that all she knows from the Bible about sickness and healing came from Bible study only. Three, there is preaching. It was the only means by which two participants have gained their insights about sickness and healing. Four, there was an instance of personal reading and preaching. Only one participant has identified these as her means of knowledge. Five, two participants identified personal reading and Bible study as their means of acquiring biblical knowledge about sickness and healing. Six, preaching and Bible study also formed a

**Figure 4.5**  
**BIBLICAL UNDERSTANDING AND PRACTICE**



category by which two participants have gained their biblical knowledge about sickness and healing. And lastly, twelve participants revealed that their knowledge about the issues came from personal reading, Bible study, and preaching.

To find out how the participants applied their knowledge to their experience, they were asked to talk about the usefulness of their knowledge to their situation. Three specific outcomes were identified through the data collected. One, there is strength. Four participants revealed that their knowledge of the Bible gave them strength in their time of sickness. What they have learned from people who were sick and healed in the Bible kept them from being discouraged. That helped them to remain strong in the Lord despite their discomfort in their time of suffering.

Two, there is trust/faith. Through reading and knowing what the Bible says about sickness and healing, eleven participants say that their knowledge of the Bible built their trust or faith in God for their healing. Their trust and faith have kept them from being overcome by fear of suffering and death which is most of the time the sentiment that drives suffering people to seek for hasty relief such as visiting a folk religious healer.

Three, there is hope. Four participants state that the most important contribution their biblical knowledge brought for them was hope. What they have learned from the Bible about people who were sick and healed and how God has been interested in healing God's people has built their hope. That hope has kept them from desperation thereby preventing any sense of hopelessness to drive them from making any ungodly decision in seeking healing from folk religious healer.

### Summary of Major Findings

The analysis of the data leads to conclude that the participants' responses to the issue of sickness and healing in this research show an animistic influence at level three of the four levels of influence animism can have on the religious life of an individual.<sup>6</sup> Most of the participants would not overtly give in to animistic practices. However, the tendency to refer to folk religious beliefs and practices in difficult times is very present in their thinking. As such, fluctuating between Christian and animistic practices has been the practice of many Christians in Haiti in their attempt to find healing, a lifestyle that supports the finding in this research as most of the participants only possess vague biblical knowledge about the issue. This leads to drawing some conclusions that are critical in understanding how Haitian Christians within the Methodist/Wesleyan respond to the issue of sickness and healing. Listed below are five of the most pertinent conclusions that clearly appear in the analysis of the data.

1. Years of conversion do little to influence deeply rooted folk religious beliefs without proper, guided, and intentional discipling.
2. Many Christians in Haiti hold beliefs that came directly from Voodoo teaching without knowing it.
3. In an animistic culture, lack of modern infrastructure as well as an incompetent, and dysfunctional scientific system can be used as excuses to spiritualize ordinary health issues.
4. Christians from an animistic worldview equally trust in the power of God to heal sicknesses and in the power of evil to inflict sicknesses.

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<sup>6</sup> Philip M. Steyne describes what he calls the four levels of influence of animism on religions. Level one is when animism dominates religion. At level two, animism has significant effect on the religion. At level 3 no blatant, overt animist practices are evident. However, practice fluctuates between orthodox and animistic. Level four is characterized by orthodox practice. However, according to Steyne, correct belief and behavior is only legalistic—a way to manipulate the deity or spirit by impressing it with the devotee's commitment (Steyne 46).

5. Vague biblical knowledge is insufficient to prevent Christians who have an animistic cultural background from relapsing into former practices when faced with life-threatening crises.

These findings make the corpus of the following chapter of this research project where the findings are explained to show how they correspond to the researcher's personal observation, the literature review, and the biblical framework of this project.

## **CHAPTER 5**

### **LEARNING REPORT FOR THE PROJECT**

#### **Overview of the Chapter**

Haitians inherit their socio-cultural and religious practices from their African ancestry. African life is shaped by animism. This implies that animism also shapes the life and the thought of the Haitian people in the same way it has been in Africa over the millennia. Evidence of animistic living and thinking in Haiti would become palpable in times when life is threatened by circumstances, such as severe sicknesses, that are perceived to be from the other world, namely the spiritual world. Such beliefs are so deep-rooted they have become acceptable ways of thinking and living in Haiti. Some even perceive them as the blueprint of the Haitian identity. One, however, would want to believe that once the Haitian encounters and accepts Christ, the transforming power of the Gospel message will ultimately uproot every trace of animism in his beliefs and practices. This does not seem to be the case because, in its protean nature, animism always finds ways to accommodate and cohabitate with other religious belief systems and remains just beneath the surface. Therefore, this project has been an attempt to critically investigate how Evangelical Christians within the Wesleyan/Methodist tradition in Cap-Haitien respond to the issue of sickness and healing.

This chapter identifies five major findings from this research and explains how they correspond to the researcher's personal observations, the literature review, and the biblical framework of the project. Then, ministry implications of the findings, limitations of the research and recommendations for further study are highlighted, explained, and suggested.



## Major Findings

### First Finding

**Years of conversion do little to influence deeply rooted folk religious beliefs without proper, guided, and intentional disciplining.**

The first obvious issue that has been observed from talking to and reading the participants' answers in this research is a sense of powerlessness against inherited beliefs. There is an apparent inner struggle among many of the participants, a defeating disposition, a sense of "there is nothing I can do" when it comes to folk religious beliefs associated with sickness and healing. Such a disposition is the result of many beliefs. One, there is the belief that no one is exempted from being inflicted with supernatural sicknesses from the spirit world. Evidence for this is found in the answers the participants provide for this statement: "Christians only suffer from sicknesses that are natural." An overwhelming amount, twenty persons out of the thirty who participated in the study (83.33 percent), disagree with the statement. What that means is that in the mind of most of the participants, there is no way one can protect oneself against the malevolent spirit. Or perhaps it is their belief that God allows a certain amount of power to the malevolent spirits to inflict sickness to the faithful such as in the case of Job (although it was an isolated case).

Second, there is the importance of respect and loyalty to the community members. Respect to the community members, which often include close relatives and neighbors, here means that one must value their opinions and advice. Most of the time, it is the members of the community that diagnose the condition of the sick person. In many occasions, the opinions of the church people are not different from that of the outside

community. The members of the community also have their say on the path to take toward healing. To refuse their advice is to show disrespect and be disloyal. This sense is clearly expressed by a male participant identified as WV6404. This is a Christian who is in the age category of 26-40 years old and who grew up in a Christian family. This means this participant has been a Christian his entire life. He states:

For me what I think we, as Christians must know while we are living in this world, we can get sick any time. It is true when we face such time [sickness] there are a lot of us who often lost our trust/faith to the extent that we forget we are Christians, at time due to what others come to tell us, not just what our relatives tell us, but I want to go further to say that there are people inside the church who would come and tell you that your sickness is not natural, that you need to put your feet outside [which is a way to say you need to consult a folk doctor] to find out what is going on...

It is to be noted the entire community is involved in the decision-making. What the community accepts and believes are often beliefs that are orally transmitted from the previous generations. Such beliefs are highly venerated because they come from ancestors that occupy an immortal place in the mind of the Haitian. Another participant, this time a female who has been a Christian for twelve years which is identified as WP8561, declares: "Normally sickness is suffering, and suffering is not easy to cope with. If I am sick, I will pray to God, go to see medical doctors if they can help me. But if in any case I do not find a solution I will never agree to live with an ailment in my body." Her thought pattern reveals several things about her belief system. First, there is a

doubtful presentiment about finding healing from a medical doctor. Second, there is a predisposition that she will find help somewhere else if medical science fails. Both ideas came from what she believed before she became a Christian. Even after twelve years of conversion, WP8561 still strongly believes in her inherited folk religious beliefs and practices. There is a hole somewhere in her theology about God and sickness.

In the literature review on animism for this research, Phillip M. Steyne says: “A look at world religions in practice will reveal that animism lies very close to the surface of all of them” (40). This is an enormous claim about the influence of animism on religious thinking and practices. Regarding the major finding here, Paul G. Hiebert’s theory: “the Flaw of the Excluded Middle” seems to best explain its presence. As noted earlier, the participants’ indigenous religious heritage is animistic in nature. Their Christian heritage is Western. In Hiebert’s terms, Westerners truncated the reality of life into two areas—religion and science. Religion to Westerners is more about faith, miracles, and the afterlife. Hiebert, in his work “Anthropological Reflections on Missiological Issues,” refers to this as “High religion” (194). Science deals with the empirical world but there is more to life. To Hiebert, there is an excluded middle. This is the realm identified as “folk” or “low” religion where local gods and goddesses, ancestors’ spirits and ghosts, demons and evil spirits, and dead saints live (194). The Haitian religious reality proves Hiebert’s point here. Karen McCarthy Brown, in her book *Mama Lola* about a voodoo priestess in New York, states: “Bondye (Haitian word for God) does not get involved in the personal, day-to-day affairs of human beings...He is too busy. Instead, it is the spirits and the ancestors...who handle day-to-day problems and who if necessary, mediate between the living and God” (6).

Hiebert testifies: “I have excluded the middle level of supernatural this-worldly beings and forces from my worldview. As a scientist I have been trained to deal with the empirical world in naturalistic terms. As a theologian I was taught to answer the ultimate questions in theistic terms. For me the middle zone did not exist” (*Anthropological Reflections on Missiological Issues* 196). What this means is that Hiebert’s education has not prepared him to treat matters found in the excluded middle. This seems to be the same scenario in the thinking of participants such as WP8561 quoted earlier. In her thinking she knows about God to whom she plans to pray for her sickness, i.e. high religion. She is also aware of medical science, the science of the Christian world, but there is a third option available to her in case the first two do not work. It appears in her mind that neither Christianity (high religion) nor medicine (science) seem to have a plausible answer to all supernaturally inflicted sicknesses which is believed to originate from the middle world—the excluded world in her Christian theological thinking.

The biblical and theological framework for this project opted for a Christian life in Haiti free of any trace of folk religious thinking and practices. This means it should be clear in the thinking and practice of the Haitian Christians that Christian living does not support a mix of Christian and Voodoo beliefs and practices blended together. In other words, Haitian Christians should know they cannot worship God and pay homage to their ancestors’ spirits at the same time. This is syncretism and the Christian Triune God abhors even the idea of cohabiting with other accepted deities.

It may seem an ambitious endeavor to think that one day Haitian Christians will completely cease to fulfill the duties that their belief in the power of spirits require of them, yet, throughout the Bible, the people of God are called to live a life of holiness.

This, however, did not come without any struggles. The Bible is saturated with accounts that show how the people of God struggled with animistic powers. In fact, the very first commandment of the Decalogue reads thus: *You shall have no other gods before Me* (Exodus 20:3 NASB). The primary reason for this commandment to be first and foremost is because there has always been a natural penchant of the Israelites to seek other gods. Early in the formation of Israel as a nation set apart for God, God made it clear that Yahweh, Israel's God, is a jealous God (Exodus 34:14.), is one God (Deut. 6:4), that Israel must love with all its heart, soul, and strength (Deut. 6:5). Israel had known many struggles against animistic powers that could be traced way back to their Abrahamic ancestry and their Egyptian acculturation, yet God's plan to make Israel a holy nation has not failed. God sustained Israel by God's love, power, faithfulness, and grace among God's many attributes.

The New Testament also records many such encounters between Jesus, Christians, and animistic powers. After proclaiming the Good News, setting people free was the second priority of Jesus' ministry (Luke 4:18). Most of the time it was setting people free from demonic oppression. This explains the fact that Jesus was always busy casting demons out of people (Mark 1:21-28, Luke 4:31-37, Matt 12:22-24, Lu 11:14., Matt 8:28-34, Mark 5:1-20, Matt 9:32-34). Gailyn Van Rheen sums it up Paul's thinking this way: "They [animistic powers] now desire to estrange believers from the love of God (Rom. 8:38-39). They hold the nonbeliever in bondage (Gal. 4:3). They bind people to their rules (Col. 2:20). They control the lives of the ungodly (Eph. 2:2)" (103). In his classic description of the work of animistic powers, Paul reminds Christians that *"the struggle is not against flesh and blood, but against the rulers, against the*

*authorities, against the powers of this world's darkness, and against the spiritual forces of evil in the heavenly realms” (Eph. 6. 12 NIV).*

Despite their intense struggles with animistic powers, Christians in the New Testament times were called: saints (Rom.1:7, 2 Cor. 1:1, Eph. 1:1, Phi. 1:1), sanctified and holy (1 Cor. 1:2), holy and faithful (Col 1:2), God’s elect (1 Pet. 1:1), loved by God the Father, and kept by Jesus Christ (Jude 1:1) among many other terms. These names are distinctions given to those who live a life worthy to be considered people set apart by God. They have overcome the schemes of the animistic powers by the power of the Holy Spirit after they have been exposed to proper, guided, and intentional discipling starting with God in the Old Testament through the giving of the Law as their teaching continues with Jesus, who embodies in the flesh the whole counsel of God, and the disciples who brought Christ’s teaching and way of living to the entire world. As such, to hope for a Voodoo free Christianity in Haiti is not an unrealistic ambitious endeavor. It is rather a sound biblical mandate. “The flaw of the excluded middle” that renders Haitian Christians to feel hopeless regarding their inherited indigenous beliefs is not originated from the Bible, but from the Western way of thinking conveyed through poor missionary understanding and teaching of these subjects.

When Haitians begin to study the message of the Bible free from any Western wrapping, at least two things will happen. First, Haitians will see answers to their everyday life’s situation almost everywhere in the pages of the Holy Scriptures. Second, they will see, understand, believe in, and apply the power of the Holy Spirit to their every day struggle with the power of the evil spirits that surround them. The non-western scientific and high theology approach to the study of the Bible will enable Haitians to

understand that all the power and authority that God has given to Jesus Christ is available to Haitian believers through the presence of the Holy Spirit who Jesus leaves with us and in us. There will be no reasons for Haitian Christians to feel helpless for the power the Holy Spirit possesses is greater by far than the power of the evil spirits (1 John 4:4).

## **Second Finding**

**Many Christians in Haiti hold beliefs that came directly from Voodoo teaching without knowing it.**

It did not require much effort to observe that most of the participants in this research could not recognize statements in the survey questionnaire that were drawn directly from Voodoo teaching and belief systems. They were only able to identify Voodoo related statements that are widely known and obvious to everyone. For instance, every participant disagrees with statement 8 of the survey question that reads: “A Christian can accept an offer from an unsaved relative to find out the source of his/her sickness using even folk religious practices without jeopardizing his/her relationship with God.” All the participants see this statement as a blatant offense to one’s Christian faith, yet among the thirty who disagree with statement 8, ten of them have no opinion, six agree and one strongly agrees with statement 6 of the questionnaire. Statement 6 reads: “Almost always most supernaturally inflicted sicknesses have a personal motive.” This statement comes directly from Voodoo teaching that all supernaturally inflicted sickness is the result of personal broken relationships. Seventeen participants did not realize that. Although it was less subtle than statement 6, statement 7 also comes from Voodoo’s teaching. The statement reads: “Unfulfilled duty to ancestors before one becomes a Christian can result in supernaturally inflicted sicknesses even after becoming a

Christian.” This statement reinforces the belief of statement 6 which teaches that sickness often is the result of broken relationship. Surprisingly, eight participants agree with this statement, one strongly agrees, and three with no opinion shared. This is obvious evidence that many Haitian Christians believe in Voodoo teaching without even knowing it.

One observation that explains the participants’ inability to identify statements derived from Voodoo beliefs in this research is the impossibility to separate Voodoo as a religion from customs and values that are purely cultural in Haiti. The Haitian culture greatly values relationship within a given community. There is a saying in Haiti that says, neighbors are relatives. As such, any acts committed that disturb relationships are considered betrayals that need to be addressed. As such, although the Haitian Christian may believe in the power of God to protect him from evil spirits, he also may see it as a cultural obligation, an act of respect and loyalty, not a Voodoo practice to fulfill a duty to an ancestor.

Ideas found in many resources used in the literature review for this research address this issue. One is a dichotomy that exists in Haitian religious beliefs and practices. This duality is rooted in the Haitian religious history. According to thinkers such as Murray Thomas, the duality—which is a mixture of segments of different traditional African faiths (4) and Roman Catholicism—has given birth to a unique form of religious experience in Haiti described as “The Haiti’s Vodou-Christian Faith.” Thomas writes an entire volume exploring the roots of such a syncretistic faith.

Perhaps what best explains the thought that ‘Christians in Haiti hold beliefs that came directly from Voodoo without knowing it’ in the corpus of resources reviewed for



this research is the intricate relationship that exists between culture, belief systems, and worldview. With no desire to penetrate the battlefield of modern-day cultural anthropologists on what culture means, E. B. Tylor's definition is sufficient to what needs to be convened here. Leslie A. White, in his article "The Concept of Culture," responds to Tylor's view of culture as such: "is that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society" (White 227). Hiebert, in "The Gospel in Human Context," highlights the complexity to understand these various elements of culture by saying "these beliefs may be more implicit, operating beneath the surface" (157). James W. Sire, in his book "The Universe Next Door," quoting James H. Olthuis, talks about this set of fundamental beliefs as that which "may be so internalized that it goes largely unquestioned...the set of hinges on which all our everyday thinking and doing turns" (18). It is then no surprise that beliefs inherent within the cultural worldview are incorporated within the unconscious religious elements of Haitian Christians as well as in traditional folk religious belief systems.

The biblical and/or theological point that would respond to this is a call to pay more attention to what God reveals about the nature of man and the influence his social environment has on him. In the Old Testament, God constantly reminds Israel to heed the practices of other nations. God does that to teach Israel to abandon any practices they might have inherited during the time they were slaves in Egypt. In the narrative recorded in Exodus 4: 21-23, there is an apparent contrast laid between Yahweh and Pharaoh. Yahweh is the God who delivers. Pharaoh is 'a god' that enslaves. As such, after God delivered Israel, any old practices Israel had acquired in Egypt must be rejected. This

continues with the prophets. In Jeremiah 10, Israel is warned against learning and practicing the ways of the nations. “.... *O house of Israel. This is what the LORD says: “Do not learn the ways of the nations or be terrified by the signs in the heavens, although the nations are terrified by them. For the customs of the peoples are worthless; they cut down a tree from the forest; it is shaped with a chisel by the hands of a craftsman. ...”* (Jer. 10:1b-3a NIV). The reason behind this warning is that the customs of other nations are powerless. There is no real power in any other gods but God alone.

The Old Testament does not only warn against the influence of the cultural beliefs and practices that are ungodly but also provides example of the righteous children of God living in pagan cultures who have maintained their godliness and righteousness. For instance, there is Daniel and his friends. They were part of a system that defied almost every aspect of their lifestyle. They were trained and become skillful and full of wisdom and knowledge in all the literature and customs of the society they were serving (Dan 1:17-20). However, they never let their context influence their relationship with their God.

A recurrent theme in the New Testament is “Putting off the Old Man.” This means to lay aside anything, including belief and practice, from one’s former life before becoming a follower of Jesus. In reference to this, Jesus says: *“Nor do people put new wine into old wineskins; otherwise the wineskins burst, and the wine pours out and the wineskins are ruined; but they put new wine into fresh wineskins, and both are preserved”* (Matt. 9:17 NASB). The Apostle Paul calls the Ephesian believers to lay aside their former manner of life which he calls the old-self (Eph. 4:22). Apostle Peter wrote: *“As obedient children, do not be conformed to the former lusts which were*

*yours in your ignorance, but like the Holy One who called you, be holy yourselves also in all your behavior*” (1 Peter 1:14-15 NASB). The author of Hebrews gives clear instructions on how one can put off the old man. It is through discernment. Hebrews 5:14 states: *“But solid food is for mature people, whose minds are trained by practice to distinguish good from evil”* (NIV). It is also through the teaching and the enlightening of the Holy Spirit (1 John 2:27). Therefore, discernment is acquired through training one’s mind in the Word of God conveyed through the revelation of the Holy Spirit who gives wisdom and leads God’s children in godly ways. This is key to enable one to know what in a culture is antithetic and what is not to the Christian faith.

### **Third Finding**

**In an animistic culture, lack of modern infrastructure, as well as an incompetent, and dysfunctional scientific system can be used as excuses to spiritualize ordinary health issues.**

It has been thirteen years since participant WP5519 became a Christian. He is between the ages of 26-40. He has been sick since he was a child and even after he became a Christian he still suffered from the illness. He believes he has a supernatural sickness. Asking him to describe his sickness, he reports: “It is like a dizziness. It may last 1 or 2 minutes. My mind seems to be far way and I feel sleepy.” Participant WV8205 has been a Christian for thirty-six years. She says that she has experienced sickness for two years. She believes she has suffered from both natural and supernatural sicknesses. When asked to state the symptoms of her sickness, she reports that she could not urinate, could not eat well, her body felt like a cadaver, like she was going crazy at time. Participant WP is another participant who believes his sickness was supernatural. It has

been twelve years since he became a Christian. The symptoms he felt are all chest related. He has chest burn. He has chest aches. His throat feels like it is blocked.

It has been observed that there are two major things that prompt these participants to believe so strongly that their sicknesses have a supernatural origin. First being the lack of proper medical infrastructure to diagnose their cases. Data from this research shows among the eight participants who believe they suffered from supernatural sicknesses, five of them believed it was supernatural because medical doctors could not tell them what was wrong with them. All of the participants in the research who claimed they had natural sicknesses said a medical doctor diagnosed their cases. In this case, the nature of a sickness in Haiti hinges on the outcome of a medical system known for its inefficiency, unreliability, and lack of proper equipment. This partially explains the widespread belief in Haiti that most sicknesses are supernatural in their nature.

It has also been observed that certain types of sicknesses are not part of the Haitian medical vocabulary of natural sicknesses. Sickness such as depression, fatigue, and the likes are not being perceived as natural sicknesses. Whenever someone is troubled in his spirit, it must have a spiritual reason.

Many scholarly works reviewed in this research address this issue. They show the way Haitian Christians think here is typical to most people who grow up in animistic cultures. Van Rheezen, in his work “Communicating Christ in Animistic Contexts,” retells the sad story of Jonathan’s death, a Christian who grew up in the Kipsigis tribe in Kenya. Jonathan was a strong Christian who brought many to Christ, including his parents. He became ill and was diagnosed as having diabetes complicated by malaria and a severe infection. Van Rheezen reports: “However, because of Jonathan’s worldview, he

could not describe disease merely in terms of physical causes” (16). Jonathan believed Richard, a member in the village who came to Jonathan’s house to curse him, was behind his fate. Then Van Rheenen concludes: “Kipsigis believe that there are spiritual causes to all sudden and severe illness” (16). In this case, it is not even the lack of medical infrastructure. It is the result of a worldview that has not fully been transformed by the gospel.

Phillip Steyne in “Gods of Power,” points to this issue even more clearly. He says: “The animist lives in a spiritual world, instead of the techno-scientific world of the Westerner...In the face of life’s demands, he is ultimately concerned with the who and the why rather than the what and how” (35). This explains the penchant for the participants in this research to associate their sicknesses to spiritual causes and with the disruption of personal relationships.

Furthermore, Melville J. Herskovits, in his book *Life in a Haitian Valley*, describes the spirits, which are called *loas* in the Haitian language, as agents of maladies and sicknesses. Herskovits insinuates that one of the functions of the *loas* is to send maladies to affect people (225). Also, the review mentioned David Westerlund’s assertion that such a view goes as far as to understand “spiritual beings as agents of illness” (152) in African thought. In his contribution to *African Spirituality*, Westerlund states: “In African cultures, spiritual beings may be seen as important causes for illness...human agents of disease, such as ‘sorcerers’ or ‘witches’ are well known in many parts of Africa” (152). All that is said here can be summed up by Thomas Murray’s theory of mediated causes he discusses in his book *Roots of Haiti’s Vodou-Christian Faith*. This theory assumes that a supernatural being or power serves as an intermediary

between an initial condition or event to a subsequent one (Murray 110). In other words, in the mind of the animist, what occurs in real life and time in terms of uncontrollable power is the initial work of a supernatural being.

The idea of this finding comes from the participants' answers to the reasons they believed the nature of their sicknesses was either natural or supernatural. The finding shows that medical diagnosis was the determining factor for participants to categorize their sicknesses. The Haitian medical system is far from being reliable, yet it has been targeted as the primary reason people would categorize a sickness as supernatural, even sicknesses that are natural in nature. However, the question remains whether the animist needs any excuses to believe that his fate depends on the occurrences in the spirit world. In other words, if the participants were exposed to better medical services, would this change their view on the origin of their sicknesses? Or, are Haitians in the diaspora where medical science operates at its best thinking differently about the origin of their sicknesses than those are living in Haiti? These are questions for another research project altogether.

While such questions linger, attention is now turned to what the Bible says about this issue. This finding carries with it an insinuating, yet dangerous, consequence to one's Christian faith. What is implied here is not simply an idea. It is a belief that requires an action. The point behind this is that in Haitian thinking the treatment for sickness is concomitant to its origin. In the same way that medical science would administer medicine based on the cause of the illness, a spiritually inflicted sickness, for the animist, requires spiritual intervention. It takes the manipulation of the spirits to inflict supernatural sicknesses; it also takes the manipulation of the spirits to treat supernatural

sicknesses. This is where the danger lies for one's Christian faith. What does a person do when she believes she has a supernatural kind of sickness?

In the Old Testament, there are countless passages that forbid God's people to seek any kind of help from any other deities. In Deuteronomy 18, God provides a list of forbidden practices that includes: sacrificing, divination, sorcery, interpreting of omens, witchcraft, casting of spells, consulting mediums, consulting spirits, and consulting the dead (10-13). Most of these activities are what folk healers perform in their attempt to heal. This means the very idea for a Child of God to seek healing help from folk healers is inconceivable to God. In the thinking of the Old Testament people, it is Yahweh who both smites and heals. Taking Job as an exception, generally there is not much place for Satan and his evil spirits to inflict sickness to begin with let alone to heal. This thought goes so far in the thinking of the Old Testament that leaving Yahweh to seek healing help from even physicians is considered an act of betrayal as in the case of King Asa (2 Chronicles 21:16).

The Old Testament calls the people of God to guard against at least two theological animistic misconceptions regarding sickness and healing. First, unlike animisms belief, spirits do not have the power to willfully go around inflicting sicknesses on the children of God. If the cause of sickness or death is not natural but of an evil force like in the case of Job, if an evil spirit interferes with the wellbeing and/or the health of a faithful believer who does nothing to allow spiritual forces into his life, then it is all made possible under the caring and all powerful permissive will of God. The ultimate purpose would always be for the glory of God and the betterment of God's children. Second, the Old Testament calls the people of God to beware of the animistic fallacious belief that

evil spirit inflicted sicknesses require evil spirit prescribed healings. If God must permit an unclean spirit to interfere—which means the work of the evil spirit is not based upon human action or choice—with the health of a child of God, God also has the ultimate power to heal that child. This becomes an explicit revelation in the life and work of the God-Man, Jesus Christ and the Holy Spirit in the New Testament.

In the New Testament, demonic activities are unequivocally apparent. Scriptures such as Matthew 12:43, Mark 3:7-11, Luke 4:31-36, 8:29, and Acts 5: 16, 8:7, among others, recount the activities of unclean spirits. Interestingly, in the incident of a sick boy who was brought to Jesus that Mark records in 9:14-29, people in the incident diagnosed the boy in the same way some participants in this research diagnose their case—a common thread in many of these Biblical accounts. Mark reports the father's description of the symptoms of his sick boy in these terms: "*and whenever it seizes him, it slams him to the ground and he foams at the mouth, and grinds his teeth and stiffens out*" (9:18 NASB). Such symptoms, in modern day scientifically advanced medicine, would indicate epilepsy. The father, however, has a different diagnosis for his boy's condition. In verse 17, the father tells Jesus: "*Teacher, I brought You my son, possessed with a spirit which makes him mute*" (NASB). This is an untainted animistic diagnosis of the situation. The father's belief and then assertion could be due to lack of medical infrastructure. The fact that he is so certain that his boy was possessed by a spirit indicates the pervasive influence of animism in his community.

In reading the incident, it shows that Mark himself believes the father's diagnosis of his boy. In verse 20, Mark changes his indirect speech where he only quotes the boy's father into a direct speech where he reports what happened when they brought the boy



close to Jesus. Mark says: “*When he saw Him, immediately the spirit threw him into a convulsion, and falling to the ground, he began rolling around and foaming at the mouth*” (20 NASB). This statement clearly demonstrates that Mark himself believes the boy was possessed by an unclean spirit. Here the question whether the animistic diagnosis was due to lack of medical infrastructure is not a concern. The real issue is what action should be taken when a sickness is believed to be from a demonic nature. The answer is: by faith bring it to Jesus and, with the power of the Holy Spirit, confront the spiritual forces which may have caused the sickness.

#### **Fourth Finding**

**Christians from an animistic worldview equally trust in the power of God to heal sicknesses and in the power of evil to inflict sicknesses.**

Through interacting with the participants, it became obvious to the researcher that, in their thinking, most of the participants believe equally in the power of God to heal any kind of sickness and as well in the power of evil spirits to inflict sicknesses. The collected data for this research justifies this claim. The participants’ answers to four related statements in the survey questionnaire serve the basis for this claim. When asked to give their opinion on the general belief that “Sickness can have both natural and supernatural causes,” twenty-seven out of the thirty participants agree with the statement. The second statement that makes a strong case for this finding is this: “Christians only suffer from sicknesses that are natural.” This statement presupposes that Christians are exempt from being affected by demonic activities. However, twenty-five participants do not agree with the statement. This is 83.33 percent of the participants. This demonstrates

how much power the participants believe the spirits possess to inflict sickness on people, even on Christians.

Perhaps the most alarming proof for this finding is found in the participants' response to the following statement: "Unfulfilled duty to ancestors before one becomes a Christian can result in supernaturally inflicted sicknesses even after becoming a Christian." This statement assumes that even after a person becomes a Christian, she is not free from the grip of her ancestor's spirits. No agreement to this statement was anticipated from a group of participants with an average of sixteen years of conversion. Surprisingly, one participant strongly agrees, eight agree, eighteen disagree, and three do not share their opinion. This is one statement in this research to which, if even one person would agree, a red flag should raise on how Christianity is understood and practiced in the community. In this case, not only one but nine persons agree with the statement and three are unsure what to believe. This is a crucial matter regarding Christian belief and living in Haiti.

It is also observed that participants strongly believe that God can heal any kind of sicknesses. The participants' answers to the statement, "God can heal any disease" allow for this claim. Twenty-nine of them agree with the statement. What is puzzling here is how can the participants hold so strongly to two extreme beliefs at the same time. It is extreme to believe that even after one becomes a Christian, the spirit of an ancestor can disrupt his life for failure to fulfill a duty before becoming a Christian. This implies that the Christian is not fully protected from evil spirits. At the same time, God has the power to heal any kind of sicknesses. This means God is all-powerful. Many questions may be raised here that are beyond the scope of this project. For instance, one may ask, 'if God

can heal any kind of sicknesses, why would God not protect God's children and thereby prevent them from being inflicted by supernatural sicknesses?' This is religious dualism at its best.

Many resources reviewed for this research explicitly or implicitly address this dualistic religious predisposition. It all begins with the animistic charts of deities and their ranks in the mind of the animist. Elia Shabani Mligo, in his work *Elements of African Traditional Religion*, provides a list of divinities arranged in the following respective rank in the beliefs of African Traditional Religion: God, divinities, ancestors, and spirits (31). In Haiti, Voodoo teaches this same pattern of belief. Brown quotes Mama Lola who states: "They (Haitians) have only one God for everybody (Christians and Voodooists), and I think everybody love God...I love God plenty. I got confidence in God. But I love my spirit, too, because they help me...God rarely gets involved with individual human lives. Attention to everyday drama of life is the work of his 'angels,' the vodou spirits" (111). This speaks volume to the consequences of the excluded middle in the Haitian religious life and thinking.

The origin of such belief is evidently African. Mbiti contends, "The spiritual world of African people is very densely populated with spiritual beings, spirits and the living-dead" (74). These "beings are personal spirits that include God, gods, ancestors, ghosts, totemic spirits, nature spirits, angels, demons, and Satan" (Van Rheezen 21). These spirits, "inhabit certain rocks, tress, mountains, idols, shrines, geographical areas and persons, both alive and deceased, and that these spirits may be manipulated to serve man" (Steyne 34). In other words, these spirits are everywhere and very powerful. It is all about power and the essence of animism is power (Van Rheezen 21). This evidently

explains the dualistic disposition of the participants in this research to believe in the power of the spirits to inflict sicknesses to all, including Christians, at the same time in the power of God to heal all diseases. To such a tendency the Bible must speak.

For the matters in this research, the Bible has so much to say. Although the belief here does not view the spirits as equal to God in power, it in fact gives too much credit to the abilities the spirits possess. From a biblical and theological standpoint, to credit too much power to a created being is to attempt to allocate to such a being attributes that belong only to the all-powerful God, Yahweh. Any created being that finds itself in such a position needs to repent otherwise a gloomy fate is awaiting such a being. The Bible is laced with accounts that tell what happened to created beings, angels as well as human beings, when they overstep their power boundaries. For instance, Isaiah attributes the eternal damnation of Lucifer to his unconceivable ambition fueled by his pride to equate himself to the Almighty God. Because Lucifer opted to make himself like the Most High (Isa. 14:14), he was sentenced to being *thrust down to Sheol, to the recesses of the pit* (Is. 14:15 NASB). Ezekiel echoes the same refrain in his description of Lucifer's irredeemable fate. By misusing the gift of beauty he received when he was created, Lucifer's heart became proud and embarked in an endeavor that led him to be reduced to ashes and to a horrible end where he will be no more (Ez. 28:13-19). It was his divine-like posture and lifestyle that had brought the Pharaoh of Egypt to a humiliating and fatal end. As the book of Exodus (7-14) records, Pharaoh's animistic worldview misled him to believe he was a god. As such he became stubborn. His stubbornness placed him in a position that conditioned him to suffer the full range of the wrath of the Almighty Yahweh. Nebuchadnezzar suffered the same fate.

The people of God as well suffered ignoble consequences for unrightfully attributing power where it does not belong. A classic example is found in Exodus 32. During Moses' absence when he went up to meet with Yahweh on Mount Sinai, Aaron, under popular pressure, built a golden calf that Israel claimed to have been the god that brought them out of Egypt. There could have been no greater insult to Yahweh, no greater act of betrayal to Jehovah than to attribute God's work, glory, and worship to any other gods let alone a handcrafted idol. At that time, Israel reached the lowest possible state of rebellion, disloyalty, and disgrace in the sight of the most Holy God. The consequence was proportional: *"that day about three thousand of the people died"* (Ex. 32:28 NASB).

In the New Testament, there is only one reason the gracious Lord and Savior, Jesus Christ, gives that puts a sinner in an irredeemable condition. That is blasphemy against the Holy Spirit (Mk. 3:28-29, Matt. 12:28-31, Luke 12:10). The account in Mark gives an explication to what blasphemy against the Holy Spirit signifies. Mark 12:28-29 reads: *"Truly I say to you, all sins shall be forgiven the sons of men, and whatever blasphemies they utter; but whoever blasphemes against the Holy Spirit never has forgiveness, but is guilty of an eternal sin"*— (NASB). Then the inspired Evangelist gives the following reason for Jesus' statement here: *"... because they were saying, 'He has an unclean spirit'"* (v.30). In other words, blasphemy against the Holy Spirit means to attribute the miraculous work of the Holy Spirit to the evil spirits.

The attitude of the participants in this research do not place them among those who blaspheme against the Holy. This means they are not in danger of being beyond forgiveness. However, it does not come without consequences when undue power is

attributed to the spirits. In the case of Haiti, the eventual outcome is an overwhelming sense of fear of the spirits. Arguably, fear is Satan's second-best utilized weapon after pride in his battle against the souls of men. Therefore, for Haitian Christians to attribute so much power to evil spirits creates an atmosphere surrounding these Christians that is favorable for Satan to use fear to destroy people's faith in Haiti. This explains the reason why demonic activities are so visible and spectacular in Haiti. They are shows intended to magnify the power of Satan with the aim to instill fear in people. The answer to this crippling atmosphere of fear is to acknowledge the accessibility of the power and presence of the Holy Spirit to the believers. However, if Christians vaguely know what the Scripture teaches, they are most likely in great danger of falling into Satan's deception.

### **Fifth Finding**

**Vague biblical knowledge is insufficient to prevent Christians from an animistic cultural background from relapsing into former practices when faced with life-threatening crises.**

This finding has been the easiest to observe while interacting with the participants in this research. The participants' inability to relate biblical insights to their issues of sickness and healing is visibly apparent. Personal observation of the participants' biblical knowledge about the subject matter here begins with their answers to the following question in the survey: "Did you learn anything from the Bible regarding sickness before you were sick?" Twenty-four participants answer 'yes' to this question, yet the problem lies on what they have learned from the Bible about sickness and healing.

Among those who have learned something from the Bible, it is observed that eleven possess only some vague Bible related insights with no specific verses or references. Here are some specific answers to the question: What did you learn from the Bible about sickness and healing? “God says in His word, He will not let severe sickness that can kill us befalls on us” (PW1875). “I learned something from the life of Job. I see God healed Job” (WV2658). “I have learned many things from the Bible about sickness, some servants of God, before I was sick” (WV2499). Another participant states: “I have learned many things such as great healings that Jesus used to perform, I believed He could heal me as well” (WV6144). Participant WP8561 answers the question in this way: “Sickness is a curse. There were Christians before us who were sick but never healed from their sickness (i.e. Paul).”

Ten participants know only general popular stories in the Bible about sickness and healing with no Scripture references. For instance, participant WP6951 answered the question, “What did you learn from the Bible about sickness and healing?” in these terms: “The woman with the issue of blood and Bartimaeus who was blind and recovered his sight.” Participant WV5110 answers: “Many things: the woman with the issue of blood. The cripple beside the pool since 38 years.....”. Another participant gives the following list of events as his biblical knowledge about the issue: “Bartimaeus that was blind and recovered his sight, the man who was 38 years old and was healed, those who could not walk, walked, the ten lepers who were healed helped me to hold on my hope” (WV4483). It became clear to this researcher that the participants only have heard of these stories but have not personally read them. There has been not one firm and

applicable conclusion drawn from these vague insights to help one in his personal suffering from sickness.

Furthermore, the participants were given the opportunity to ask any questions they might have regarding the issue of sickness and healing. The types of questions they asked further reveal to what extent they were not prepared to respond to their issue from a Christian/biblical perspective. Some of the questions they ask include: “Why God who loves us so much let man originated sickness to befall us? Why witchcraft originated sicknesses get into Christians” (WV7414). Participant WV8547 asks: “Why many times there are people who are serving God faithfully, yet God allows wicked people to send sicknesses on them?” Participant WP4810 asks: “There are people who never get sick; they are people who got sick and healed; there are those who got sick and died. How can we explain the love of God in each of these cases?” Participant WP6171 asks: “Does a natural sickness come from God?”

These questions reveal the participants’ genuine interest to know more about what the Bible says about sickness and healing. However, the questions also show much of the participants lack in their biblical knowledge about the issue. Many reasons may cause this deficit in the life of the participants. One that is clearly observed is the participants’ lack of initiative to read and study the Bible on a personal level. While everyone has access to a Bible that they can read personally, the tendency is rather to depend solely on their pastor for their spiritual nourishment. Unfortunately, most of the pastors encourage such dependency on them for the purpose of power. It gives a sense of power and prestige to the pastor when he is the one with the answers to the questions of his congregation. Most of the time the pastor provides answers based on his preference and limited knowledge.



Such a situation does not help Haitian Christians from relapsing into their former practices because at times they have found no Christian/biblical answers, thereby they often have no solutions to their everyday struggle with the issue of sickness.

One way the literature review addresses this issue is by explaining the profound influence of worldview and belief systems on people. In his most extensive and recent book used in this research, *Transforming Worldviews*, Paul G. Hiebert contends that Christian conversion must encompass behavior, belief, and the worldview that underlines the first two (11). This indicates that one's worldview is that which dictates one's belief and behavior. As such, true conversion must go as deep as to influence a person's worldview. On this, Hiebert insightfully notes:

Conversion must involve a transformation of beliefs, but if it is a change only of beliefs and not behavior, it is false faith (James 2). Conversion may include a change in beliefs and behavior, but if the worldview is not transformed, in the long run the gospel is subverted and the result is a syncretistic Christo-paganism, which has the form of Christianity but not its essence. (11)

What Hiebert is suggesting here is that for true conversion to Christianity to take place, a person's set of suppositions that underlies how she perceives and responds to reality must be transformed (Kraft *Culture, Worldview and Contextualization* 385). This requires more than a form of conformity at a surface level to a set of Christian principles. Rather, there is need for a deep change that influences such as the grid (Wright 38), the colored glasses (Geisler 241), the images of self and of all that is recognized as not-self (Kearney 41), or those larger pictures that inform and in turn form one's perceptions of reality (Valk 159-74).

Unless one's worldview is transformed, his belief system—which is the body of knowledge that emerges in response to key questions and agreed-upon methods used to find answers (Hiebert et. al 39)—will never change. Where the belief system is not influenced, changes cannot be substantial. The outcome would be most likely for Christians to behave in ways that are conformed to the learned Christian principles when faced with situations that do not require help from their inherited belief system. However, when faced with serious threats, what and how they have learned to protect themselves or provide solutions to their issues would naturally emerge. It is at such a time that Christians who vaguely know what the Bible teaches are more susceptible to relapse into their former folk religious practices. The ultimate outcome is syncretism, a blending, mixing, or combining of Christianity with folk religious beliefs and practices. The Bible has much to say about living a syncretistic life.

Looking at this issue from a biblical and theological perspective, it can be argued that lack of biblical knowledge about syncretism must be the primary reason behind any idea a Christian might have to relapse back to former folk religious beliefs and practices. From the time Adam and Eve fell to Satan's deception in the third chapter of the first book of the revealed and inspired Holy Word of God to the last stroke of the pen and the last drop of ink in the book of Revelation, there is an unequivocal unity among the books of the Bible that God abhors religious syncretism. In a sense, Adam and Eve's sin could be classified as an attempt to live a syncretistic life. They thought they could have had a relationship with God and at the same time they could be close to Satan to satisfy their carnal desire. The price Adam and Eve paid (Genesis 3:17-19) plagued not just the two of them but the entire human race. This is the fall of humanity.

Since then, God never ceases to warn the people of God of the danger of living a double standard in their religious life. Early in the formation of Israel, God's chosen nation, God sought to teach Israel the importance of serving God alone. The first commandment of the Decalogue is an antidote to syncretism. In an arresting and clear precision, God declares to Israel: *You shall have no other gods before Me.* (Ex. 20:3 NASB). Later in Exodus 34, God sternly warns Israel against any sort of covenants with the Canaanites. At the heart of the caution was the Canaanites distasteful syncretistic and immoral religious practices. Notice what the Israelites must first do upon entering the land they were about to possess: “...*you are to tear down their altars and smash their sacred pillars and cut down their Asherim*” (v. 13 NASB), all of which is associated with religious beliefs and practices. Verse 14 states the reason: “*for you shall not worship any other god, for the LORD, whose name is Jealous, is a jealous God*” (14 NASB).

This same instruction is reiterated in Deuteronomy 7:1-6 with more reason being added to it. To the Hittites, the Girgashites, the Amorites, the Canaanites, the Perizzites, the Hivites, and the Jebusites, Israel shall make no covenant and show no favor, shall not intermarry, and shall not give their daughters to their sons, nor take their daughters for their sons (vv. 2-3 NASB). The reason is once again clear. These nations will turn Israel's sons and daughters away from following God which will cause the anger of the Lord to be kindled against Israel and God will quickly destroy Israel (v. 4 NASB). To prevent all this from happening: “. . . *thus you shall do to them: you shall tear down their altars, and smash their sacred pillars, and hew down their Asherim, and burn their graven images with fire. For you are a holy people to the Lord your God; the Lord your God has chosen you to be a people for His own possession out of all the peoples who are on the face of*

*the earth*” (vv. 5-6 NASB). Many other Old Testament passages such as Joshua 24:14-15, 1 Kings 18:21, Joshua 23:16, 1 Samuel 7:3, Jeremiah 19:4-5, 2 Kings 17:34-41, 2 Kings 21:1-7, 2 Chronicles 33:1-7, Ezekiel 8:9-16, Jeremiah 2:5, Isaiah 2:6, Zephaniah 1:4-5, and Hosea 2:2-13, among many others, treat this crucial matter.

The New Testament picks it up where the Old Testament has left off. Jesus was asked to identify the greatest (Matt 22:36) or the most important (Mark 12:28) commandment in the Law. Jesus’s answer is the ultimate interpretation of the entire Old Testament Scripture that Jesus describes as the Law and the Prophets. In His own words, Jesus replies: “*‘Love the Lord your God with all your heart and with all your soul and with all your mind.’ This is the first and greatest commandment. And the second is like it: ‘Love your neighbor as yourself.’ All the Law and the Prophets hang on these two commandments.*” (Matt 22:37-40). The relevance of Jesus’ interpretation in this passage of the entire Old Testament rests on the understanding that the children of God are called to love God in such a profound way that leaves no space in their thinking to even contemplate other deities. What Jesus means here is that the children of God are those who preoccupy themselves continually expressing their love, adoration, and loyalty to God through their acts of worship. As such, the entire being—heart, soul, and mind—of the children of God is so filled with the thought of God that there is no room left for other gods let alone the inclination to relapse to former ungodly practices.

Perhaps the most pertinent passage for the finding here is Ephesians 4:17-24. Here, the Apostle Paul addresses the issue of relapsing into old lifestyles and practices head-on. Writing to a church that existed in an animistic culture, Paul knew that lack of a proper understanding of God’s Word and will would result in people’s going back to their

former lifestyle while still professing the Christian faith. Paul knows this cannot be. God does not tolerate such double standards. The Apostle earlier in this book reminds his audience of their former life, a lifeless life which Paul describes as dead in trespasses and sins because they formerly walked according to the world, the prince of power of the air, the spirit of disobedience, and the lusts of the flesh. The result has been that they were by nature children of wrath (Eph. 2:1-3). Now the believers at the Ephesus Church are in Christ. They have been born again. In Christ, they have a new life. They are no longer children of wrath. Therefore, they should never think of returning to their former way of life. This is Paul's primary intent in this passage.

Paul begins with an earnest reminder, *"So this I say, and affirm together with the Lord, that you walk no longer just as the Gentiles also walk, in the futility of their mind..."* (17 NASB). Paul continues to describe such a walk as, *"being darkened in their understanding, excluded from the life of God because of the ignorance that is in them, because of the hardness of their heart; and they, having become callous, have given themselves over to sensuality for the practice of every kind of impurity with greediness"* (18-19 NASB). Then he draws a contrast between the life his hearers are called to live now and their former life that he describes earlier saying: *"But you did not learn Christ in this way, if indeed you have heard Him and have been taught in Him, just as truth is in Jesus..."* (20-21). Then he tells them what they must do: *"... in reference to your former manner of life, you lay aside the old self, which is being corrupted in accordance with the lusts of deceit, and that you be renewed in the spirit of your mind, and put on the new self, which in the likeness of God has been created in righteousness and holiness of the truth"* (22-24 NASB).

This passage addresses the core of the issue to which this finding refers. It shows how important it is that Christians with an animistic religious inheritance know and understand what the Scripture teaches about their old and new lives. There is no place for God and the spirits of ancestors in one's heart. There cannot be two coexisting altars designated to God and any other form of deity in the body of the children of God. One cannot pay allegiance to God and any other kind of deity at the same time. For Christians that have been so impacted by their animistic belief systems such as in Haiti, vague biblical knowledge is inadequate to dissuade them from the tendency to return to their old ways of seeking for healing, especially from perceived sicknesses with spiritual causes. When people are exposed to proper in-depth biblical teaching, they will see the power of the Holy Spirit at play.

They will know that promises such as: “.... *but you are to stay in the city until you are clothed with power from on high*” (Luke 24:35-49 NASB) apply to them as well as believers. In addition, they will be more convinced to trust in the power of the Holy Spirit and resist the temptation to relapse to former folk religious practices when they read and understand “...*how God anointed Him [Jesus] with the Holy Spirit and with power, and how He went about doing good and healing all who were oppressed by the devil, for God was with Him*” (Acts 10:38). When they spend more time in the Scripture, they will be able to explore actions such as: “*they even carried the sick out into the streets and laid them on cots and pallets, so that when Peter came by at least his shadow might fall on any one of them. Also the people from the cities in the vicinity of Jerusalem were coming together, bringing people who were sick or afflicted with unclean spirits, and they were all being healed*” (Acts 5:15-16 NASB) and “...*But Paul was greatly annoyed, and turned*

*and said to the spirit, "I command you in the name of Jesus Christ to come out of her!" And it came out at that very moment"* (Acts 16:18 NASB). This will certainly convince them to believe there is no greater power than the power of the Holy Spirit. Then they will see no need to revert to old powerless and meaningless practices.

### **Ministry Implications of the Findings**

The findings in this research project give an opportunity to acquire and apply many insights that can be meaningful for ministry in the Haitian context. Various people who are concerned about Christian life in the Methodist/Wesleyan tradition in Haiti may find some helpful suggestions in this research. Here, some of these implications are briefly discussed as they relate to individual Evangelical Christians in Haiti, the Haitian Evangelical Church and its leadership, and Evangelical missionaries to Haiti.

The first implication relates to individual Evangelical Christians in Haiti. This research reveals that Haitian people have dispositions that are culturally acceptable but theologically injurious to their Christian faith. For instance, one finding reveals that Haitian Christians may hold several beliefs, such as all supernaturally inflicted sicknesses have a personal motive behind them which comes directly from Voodoo teaching. These beliefs are subtly inserted in everyday life and practice in Haiti and have become acceptable norms. The research encourages and enables individual Evangelical Christians in Haiti to think deeper on what they believe which they have learned from their cultural heritage. As in all cultures, many elements in the Haitian culture are acceptable to the Christian faith. Many others are not so innocent. When an individual Christian can identify and differentiate what in his culture is acceptable to his Christian faith and what is not, there is a lower risk for practicing a syncretistic Christian life. The findings in this

research are a valuable contribution to lower such risks. To accomplish this, a selection of the most appropriate and relevant findings of this project will become available to Evangelical Christians in Haiti by way of seminar presentations and publications.

The second group of people the implications of the findings concern is the leadership of the Evangelical Church in Haiti. The kind of leaders this research is mostly concerned with are those who are preachers and teachers in the church. One of the most disturbing truths this research reveals is the participants' lack of biblical knowledge on the subject matter. Interacting with them and with Christians in Haiti, it has become clear that Christians have learned how to accommodate themselves to present the ideal Christian image expected from them. However, what is seen often does not go beyond the outside image. For most of them, it does not even penetrate the first layer of skin. In this way, the Gospel is just an embellishing commodity instead of a transformational force.

As a result of the findings of this research, preachers and teachers of the Bible in Haiti will know that years of conversion do not guarantee eradication of animistic beliefs in the life of the Haitian Christians without proper and intentional discipleship. Leaders of the church will know as well that vague biblical knowledge does nothing to protect the believers from reverting to their former folk religious practices. This should propel the preaching and teaching leadership of the church to evaluate the effectiveness of their ministry to the Church. Then they will be challenged to take appropriate actions to teach the Evangelical Church in ways that the Gospel of Jesus Christ influences the belief system and worldview of the Haitian Christians, thereby enabling them to understand the need to sever all ties with cultural practices that are injurious to their Christian faith.



There are also significant ministry implications of the findings here to mission agencies and missionaries associated with the Evangelical Church in Haiti. The research reveals the extent of the influence of Voodoo's belief system and practices on people in Haiti. Such influence does not spare even those who have been saved for an average of sixteen years. To missionaries, at least two things must stand out from this research. First, the struggle for Haitian Christians to live in a context pervaded with animistic beliefs is real and is being fought against daily. This should compel missionaries to be more sensitive and patient in their mission to help.

Second, missionaries should be convinced not to rush to proclaim victories over the power of the spirits and the devil in the life of people in Haiti when Haitians claim to accept the Christian faith. This research should help missionaries understand the protean nature of the Voodoo religion. Voodoo is a religion that ingrains its believers with the types of beliefs that are good at hibernating deep within the worldview of the people. In the case of Haiti, such beliefs are clothed with cultural garments exclusive to the Haitian identity. They are dormant to the moment when a Haitian faces a situation to which other acquired beliefs do not seem to provide answers. The implications for missionaries here are that they go slower in their endeavor to convert Haitians. This is to enable them to have enough time to learn more about the culture and the religious inheritance of those they are called to reach out to in Haiti.

### **Limitations of the Study**

There were a few roadblocks encountered during this research project but nothing that could negatively impact the validity and the generalization of the research. One is the issue of time due to unexpected and unavoidable circumstances. This project should have

been completed a year ago had it not been for an unexpected death in the family that required taking time away from this project. Another limitation has to do with the desired number of participants for the research. Of the forty-five participants targeted to participate in the research, fifteen denied the invitation. By the time it became conclusive that they would not participate in the research, it was too late to try to replace them. Although thirty participants were enough for the purpose of this research and were the perfect samples of the population targeted, fifteen more would have added significant strengths and coherence to the data collected.

Other limitations include infrastructure and social and political constraints. The lack of basic infrastructure such as electricity and access to the internet caused some difficulty in accomplishing the research. Because participants have no access to technology, everything needed to be done mechanically. That required more energy, more time, and more expenses. However, these obstacles did not significantly affect this research.

The political climate of the country at the time the research was being conducted was very tense. The entire country went into a lockdown mode for over ten days where circulation was almost impossible. Plans to meet with more participants for personal interviews were delayed and some were postponed indefinitely. By the time things got back to normal, it was too late to reschedule due to the deadlines that had to be met. This setback did not affect the survey questionnaire because all the participants had already returned their questionnaire before things went bad. No one can know for sure how tomorrow will be in such a volatile and unpredictable political climate in Haiti. Another limitation has been the cautiousness of the people to answer the survey questions and

freely speak to the researcher. The participants show a significant level of caution. Perhaps their uneasiness was a result of talking with a pastor about things they know the church does not condone.

### **Unexpected Observations**

Nothing stood out as overtly unexpected during the process of this research. What was somehow more than expected was the level of uneasiness the participants exhibited in providing answers to the questions of the research. They knew from the consent form they signed that their answers would be confidential, yet, some of them were still very sensitive in their approach to the research. Perhaps sensitivity was the motive behind most of those who refused to participate in the research. The belief that Haitian Christians are involved in seeking healing help from folk healers is widespread, but the question is why it is such a secretive and sensitive matter. The answer to this question is surprisingly because believers do not want their pastors and/or churches know about their involvement for fear of being sanctioned by the church.

### **Recommendations**

This research provides some significant insights about how Haitian Christians think and what they are inclined to do about the issue of sickness and healing. However, this project was able to only scratch the surface of the matter. There is far more that needs to be done to expand the study on this subject matter. The findings, in fact, reveal the enormity of the problem thereby calling to further research the issue in a more systematic way in at least three perspectives.

First, there is need to explore the issue from the perspective of contextual theology. The God of the Christian faith, the only true God, the Triune God of the Bible,

abhors syncretism. The religious and cultural inheritance of the Haitian people promotes syncretism. This means the biblical worldview and the Haitian inherited worldview (animism) stand in two opposing extremes. Is there a middle ground? Can the message of the Bible find ways to penetrate and influence the Haitian worldview? Can the message of God be translated so Haitians can understand God in a way that they feel comfortable, free, and safe to serve God to the extent of relinquishing their day-to-day struggles to God's care instead of reverting back to folk religious beliefs and practices? To answer these questions requires more study about God within the context of the Haitian people.

The second recommendation would be to explore the issue from a pneumatology perspective. Animism is all about power and the spirits. Christian pneumatology is about the power of the Holy Spirit. There is already a common normative ground between animistic beliefs and Christian pneumatology. This is the word spirit. What is left to be explored is the nature, the work, and the power of the Holy Spirit versus the animistic spirits. This will be to establish which, between the two categories of spirits, is more powerful thereby worth trusting and serving.

Third, the issue would also be explored from a missiological perspective. This is perhaps the most pressing research need for this issue today. In this perspective, it would be crucial to investigate the history of the work of evangelical missionaries in Haiti. This would place an emphasis on when, from where, and how Christianity came to Haiti. It would also investigate what the first missionaries knew about the Haitian culture when they first arrived. An investigation about the missionaries' training and preparedness in ministering in cross-cultural context would also be needed.

### **Postscript**

My interest to this subject came as a result of my frustration as a pastor to see how much we, Christians in Haiti, are struggling with beliefs we have learned from our African religious heritage. Those beliefs pervade every aspect of life in Haiti. They drive our political decisions. They influence the way we do business. They impact the way we raise our children. They dictate the outcome of our marriages. They shape our school system to cite a few.

Having been trained at some of the most prestigious theological institutions in our Evangelical traditions in the West, I thought I was ready to have an immediate impact in helping my fellow Haitian believers to live out their Christian faith free of syncretism. It took me only a few months as a pastor to realize what I was up against. My Western education equipped me with significant organizational skills, meaningful preaching techniques, outstanding biblical interpretation methods, and great understanding of sound biblical and theological doctrines. I am forever grateful for the privilege I had to sit under some prolific professors with whom most of them displayed a rare dichotomic embodiment of holiness and scholarship. Now that I am in the field as a pastor and a faculty member, I have come to realize that I need to use my Western education in a way that my people can understand and relate to my theological language lest I become a sophisticated alien to my own people. The best way for me to do that is to become a student of those I am called to serve, teach, and lead. This research project provides me with this opportunity. From start to end, it has been an enriching learning process although at times I felt it was an endless, painful exercise. I have learned so much about

myself and my cultural background from the literature review and field research for this project.

## **APPENDIXES**

A. Permission Letter

B. Criteria and Procedure for Selection of Participants Observation

C. Participants Informed Consent Letter

D. Interview Questions

E. Questionnaire

## APPENDIX A

### PERMISSION LETTER

***Pastor Guenson Charlot***

Doctorate Candidate/Beeson Fellow

Asbury Theological Seminary

Wilmore, Kentucky 40390

**guenson.charlot@asburyseminary.edu**

**3812-5240**

Request for research permission.

I am a doctoral student in Ministry (DMin) at Asbury Theological Seminary. To fulfill the program requirements, I must write a dissertation that requires ministry-related research. The topic of my dissertation is: *The Gospel in Haitian Context: A critical Analysis of Christians within the Methodist Tradition and their Responses to the Problem of Sickness and Healing in Cap-Haitian, Haiti.*

Three churches in the Wesleyan / Methodist tradition in Cap-Haitian, including the one of which you are the pastor, are chosen to participate in this research. This research will be guided by the following three research questions:

1. How do Christians in the Wesleyan / Methodist tradition in the region of Cap-Haitian respond to the problem of illness and hope for healing in their lives?
2. What are some of the most popular traditional religious practices observed by Haitian Christians in the face of the disease?
3. How do Wesleyan / Methodist Christians in Cap-Haitian understand and apply scripture to the issue of illness and healing?

Your contribution is paramount for the realization of this research. Here's how I would like your help.

1. Accept my request for permission to serve your congregation as a participant in this research.
2. Help me choose the best possible samples for research among members of your congregation. A description of what I would consider to be the best samples will be provided to you after your permission to serve your congregation.

Here's what I can assure you.

1. Absolute confidentiality.
  - a. **Members of the church.** No names of participants will be disclosed. Strict and secure measures will be taken to prevent information being exposed to other people.



- b. **Data collected.** None of the data will be disclosed to other people. I will use codes in letters and numbers for your church and for each member of your congregation who will agree to participate.

2. Free of any risk.

- a. Physical. No physical risk will be anticipated during the research period. Participants will not be exposed to anything that is physically dangerous for them.
- b. Psychological. The research atmosphere will be established so that participants have no reason to feel stressed, anxious, sad, regret, or emotional distress.
- c. Economic. The research will not require any monetary expenditure from the participants. The meetings will be arranged in such a way that participants will not have to disturb their routine and daily activities. No obligation requiring fees will be taken into account.
- d. Social. The information that will be collected would not have to negatively affect the perception of others about the participants of this research. No reputation and social status of participants is at risk during this research. Not only will the information be kept confidential, but the nature of the search will never affect the social status of the participant.
- e. Spiritual. The researcher's personal opinion will not be disclosed during the research. There will not be an opportunity during the entire period of research or the researcher will try to convince a participant to adopt any position. The purpose of the research will remain the same, which is to collect data on the subject in question.

Again, a more detailed description of the research process will be provided to you one week after your response.

I thank you most sincerely for giving me the opportunity to use your congregation to participate in this research. Please, can I ask you to sign the attached sheet to this letter as proof of your authorization and to return it to me before November 22, 2018?

Sincerely yours,

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Guenson Charlot

## **APPENDIX B**

### **CRITERIA AND PROCEDURE FOR SELECTION OF PARTICIPANTS**

Dear Reverend,

May the peace and grace of God abound to you. I thank you very much for your collaboration in making this project a success.

As a follow-up to the process, we need to select some members of your congregation with whom I will work for the realization of this project. This correspondence describes the criteria and procedure necessary to help select the best possible participants for this research. Here is what is required to choose a participant:

#### **Criteria:**

1. Potential participants must be members in good standing with the church. This means they must be regular members of the church who enjoy any privilege and service of the church.
2. Potential participants must be of two sexes, men and women between 18 years of age and over.
3. Participants can have any level of education. Even those who cannot read and write are eligible to participate in this search.
4. Potential participants must be baptized members within the last five years or more.
5. Potential participants have personally experienced a period of illness or have witnessed the suffering of a close relative of their immediate family.
6. Participants are open to share their experience, knowing that they are fully protected by the ethics of confidentiality required for this research. No information there share will be disclosed.
7. It would be better if the participants still have close influential relatives and friends who are not Christians.

#### **The process:**

1. The pastor, with the help of his leadership board, will take the initiative to identify 20 persons in his congregation who meet the criteria for selection.
2. The pastor will meet with the potential participants to give them an idea of the nature and purpose of the research as detailed in the permission request letter he received. During this meeting, the pastor will collect the names and phone numbers of potential participants to share them with the researcher. This list will only be accessible to the researcher.

3. 15 out of the 20 potential participants will be selected for the research. This is necessary to protect the anonymity of the participants. During the meeting between the pastor and potential participants, the pastor will explain that the meeting does not guarantee participation in the research because only 15 of the 20 will be selected for the research. The main reason for this is anonymity. Confidentiality is strictly required for this research.
4. After receiving the list, the researcher will contact each potential participant individually through a phone call. The purpose of this initial contact is to plan an appointment with each participant to explain more about the nature and purpose of the research giving them the opportunity to ask questions. During this meeting they will use a form of consent that they will all sign.
5. After the initial meeting with each participant individually, The researcher will analyze the information gathered during the meeting to choose the participants he will judge to have better met the criteria necessary to participate in this project. They will be notified right away after a decision has been made.
6. The selected participants will be interviewed twice for the duration of the research. They will be asked questions that will allow the researcher to understand their thoughts on and responses to the subject of illness and healing. The interviews will be conducted in very discrete places, which will not disturb the confidentiality of the participant.

I thank you very sincerely for your frank collaboration for the success of this research. May I, please, ask you to try to send me the list of potential participants by November 29, 2018 at the latest. The result of the research will be made available to you after the completion and final approval of the dissertation by the DMin office of Asbury Theological Seminary.

Sincerely yours,

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Guenson Charlot

## APPENDIX C

### PARTICIPANTS INFORMED CONSENT LETTER

*Sickness and Healing: A Critical Analysis of the Responses of Christians within the Methodist/Wesleyan Tradition in Cap-Haitian, Haiti.*

You are invited to be in a research study being done by Guenson Charlot from the Asbury Theological Seminary. You are invited because you are a baptized Christian for the past five years or more, you attend a Wesleyan/Methodist church in Cap-Haitian and you have been through a period of sickness personally or you have experienced a close relative who were sick

If you agree to be in the study, you will be asked to meet with the researcher, me Guenson Charlot, in two occasions in a period of six (6) weeks at a discrete location of your choosing. There will be no payment for your participation, except for public transportation cost if necessary.

The researcher, me, Guenson Charlot, will have someone with him while interviewing you, for the only purpose of helping taking notes. The person will not use your name and is not a member of your church. The person will not even know your name because a code name made of letter and number will be used to identify you instead of your name.

If something makes you feel bad while you are in the study, please tell your pastor. If you decide at any time you do not want to finish the study, you may stop whenever you want.

You can ask Guenson Charlot questions any time about anything in this study. You can also ask your parent or close relative any questions you might have about this study.

Signing this paper means that you have read this, or had it read to you, and that you want to be in the study. If you do not want to be in the study, do not sign the paper. Being in the study is up to you, and no one will be mad if you do not sign this paper or even if you change your mind later. You agree that you have been told about this study and why it is being done and what to do.

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Signature of Person Agreeing to be in the Study

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Date Signed

## **APPENDIX D**

### **Interview Questions**

The aim of this interview was to collect information about different aspects of the participants' life, practice and belief system regarding their experience with the issue of sickness and healing. All questions were formulated in Haitian Creole. Participants were encouraged to say more when it was needed. What is presented here is a list of priority questions for the first interview followed by a questionnaire for a second interview.

#### **Questions based on the Research Question #1 (RQ1)**

How do Christians within the Methodist Tradition in the Cap-Haitian area respond to the problem of sickness and the hope of healing in their lives?

1. How did you become a Christian?
2. How would you describe your Christian faith now?
3. What do you believe differentiates being a Christian from being a non-Christian?
4. How would you describe your sickness?
5. How would you explain the origin of your sickness?
6. How did you feel as a Christian that you had to go through this period of suffering?
7. How did you feel about God while you were sick?
8. How did you feel about the church support during this trying time?
9. What did you believe would happen to you? Did you believe you would be healed, or you would die? Why?

#### **Research Question #2 (RQ2)**

What are some of the most popular traditional religious practices observed by Christians within the Methodist Tradition in Cap-Haitian when faced with sickness?

1. What was the first idea that came to your mind when you realized that you were seriously sick?
2. What did you do when you realized your condition was not improving?
3. What can you tell about your healing process?
4. Where did you go seeking help?
5. Was there anyone that helped you seek help? If yes, what did they advise you to do?
6. How would you describe their advice?
7. Do you know of a story where someone you know went to a traditional healer seeking help for his/her sickness? If yes, can you tell me about it?
8. Did it work?
9. Why do you think it worked?
10. What was the power behind the healing?

**Research Question #3 (RQ3)**

How do Cap-Haitian Methodist Christians understand and apply scripture when faced with the question of illness and healing?

1. How do you think the Bible addresses your sickness issue?
2. Do you think the Bible says anything about your sickness? If yes, what does it say? Do you know?
3. How did your knowledge and understanding of the Bible contribute to your healing process?
4. Can you tell me anything you know the Bible encourages people to do while they are sick?
5. Did you do any of them? If so how did they work for you?

## **APPENDIX E**

### **Questionnaire**

This questionnaire was built to collect concrete details that will enable the researcher to understand and reflect on the participants' knowledge, perception, and behavior regarding their experience of sickness and healing. This questionnaire also helped to test the consistency of the participants' understanding, feeling, belief, and behavior about sickness and healing.

#### **Instruction to the participants.**

Please answer all questions that apply to your situation to the best of your ability. As much as you can be more precise the better. Remember no one else will access and be able to know any information you give in this questionnaire. Do not write your name here, only your code. Thank you for participating in this research.

**Participant Code #**\_\_\_\_\_

#### **Demographic Information**

1. What is your age group? (Circle the letter that corresponds to your answer)
  - a. 18-25 years old
  - b. 26-40 years old
  - c. 41-60 years old
  - d. 60+ years old
2. Gender
  - a. Male
  - b. Female

#### **Personal Understanding of being a Christian**

3. How long have you been a Christian? \_\_\_\_\_
4. How does someone become a Christian?

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5. How would you describe a Christian?

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6. What do you believe differentiates being a Christian from being a non-Christian?

7. How would you describe your relationship with Christ today?

- a. Very strong
- b. Strong
- c. Not so strong
- d. No comment

### **Presence of Sickness**

8. Have you ever been sick since you became a Christian?

- a. Yes\_\_\_\_\_
- b. No\_\_\_\_\_

9. If you have been sick, for how long?

- a. \_\_\_\_\_days
- b. \_\_\_\_\_week (s)
- c. \_\_\_\_\_month (s)
- d. \_\_\_\_\_year (s)

10. Did you know what kind of sickness you had?

- a. Yes \_\_\_\_\_
- b. No \_\_\_\_\_

11. Can you describe in specific words the symptoms of your sickness?



- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

12. How did you feel about God while you were sick?

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13. How did you feel as a Christian that you had to go through this period of suffering?

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### **General Perceptions of Sickness and Healing**

<i>Here are some general statements about sickness and healing, please tell whether you strongly agree, agree, disagree or have no opinions by circling the number under the category of your choice.</i>					
		<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>No Opinion</b>
<input type="checkbox"/>	Sickness can have both natural and supernatural causes.	1	2	3	4
<input type="checkbox"/>	It is easy to differentiate natural from supernatural sicknesses	1	2	3	4
<input type="checkbox"/>	All sicknesses that medical doctors cannot diagnose are supernatural.	1	2	3	4
<input type="checkbox"/>	Christians only suffer from sicknesses that are natural.	1	2	3	4
<input type="checkbox"/>	A non-believer was sick. A folk healer prescribed him some folk religious ritual to be healed. A Christian who has the same type of sickness can use the same healing ritual to get healed.	1	2	3	4
<input type="checkbox"/>	Almost always most supernaturally inflicted sicknesses have a personal motive.	1	2	3	4

Unfulfilled duty to ancestors before one becomes a Christian can result in supernaturally inflicted sicknesses even after becoming a Christian.	1	2	3	4
A Christian can accept an offer from an unsaved relative to find out the source of their sickness using even folk religious practices without jeopardizing his/her relationship with God.	1	2	3	4
In time of serious sickness, healing is the most important need no matter how and where it comes from.	1	2	3	4
After a Christian tries every naturally known option in the quest of finding healing without success, it would be understandable to seek help from traditional folk healers.	1	2	3	4
What is detrimental to one's Christian faith is the continuous habit not a onetime visit to a folk healer.	1	2	3	4
God will always heal you if you have enough faith	1	2	3	4
God can heal any disease	1	2	3	4
If you are a strong believer, you will not get sick	1	2	3	4
If a Christian knows that he has a supernatural sickness, it would be worst to let the sickness kill him than seeking healing from folk healer	1	2	3	4

### **Personal Understanding and Behavior**

1. What kind of sickness did you believe you had?
  - a. \_\_\_\_ Natural
  - b. \_\_\_\_ Supernatural
  
2. Why did you think it was that kind of sickness?
  - a. \_\_\_\_ after successful medical diagnosis
  - b. \_\_\_\_ after unsuccessful medical diagnosis
  - c. \_\_\_\_ after I had a dream
  - d. \_\_\_\_ an unsaved relative went to inquire for me

e. \_\_\_\_\_ other reasons

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3. What kind of treatments did your sickness necessitate?

- a. \_\_\_\_\_ Prescribed medications only
- b. \_\_\_\_\_ Prescribed Natural herbs by folk healers
- c. \_\_\_\_\_ Observing certain rituals
- d. \_\_\_\_\_ Prayers and fasting only
- e. \_\_\_\_\_ a combination of some of these

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4. What did you do to get heal?

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5. Did any unsaved relatives and/or friends advise you how and where to seek help?

- a. \_\_\_\_\_ Yes
- b. \_\_\_\_\_ No

6. If Yes, where did they ask you to go?

- a. \_\_\_\_\_see a medical doctor
- b. \_\_\_\_\_see a folk healer
- c. \_\_\_\_\_see a medical doctor first. If it does not work, see a folk healer
- d. \_\_\_\_\_Other places:

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7. Did you follow their advice?

- a. \_\_\_\_\_Yes
- b. \_\_\_\_\_ No
- c. Why\_\_\_\_\_

8. Do you know or have heard of a Christian who was sick and then went to sick healing from folk healer?

a. Yes\_\_\_\_\_

b. No\_\_\_\_\_

9. If yes:

a. Was s/he healed \_\_\_\_\_Yes \_\_\_\_\_No. Why do you think s/he was or was not healed?

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b. What did the folk healer require him/her to do to get healed?

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10. Did you learn anything from the Bible regarding sickness before you were sick?

a. \_\_\_\_\_Yes

b. \_\_\_\_\_No

11. If Yes:

a. what did you learn?

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b. How did you learn it?

i. \_\_\_\_\_By personal reading of the Bible

ii. \_\_\_\_\_In Bible study at church

iii. \_\_\_\_\_Through preaching

iv. \_\_\_\_\_other ways

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c. How what you learned helped you?

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12. If you have not learned anything from the Bible about sickness before you were sick, can you explain why?

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Please add any other additional comments in the space below

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Thank you very much!

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