

When Suffering Continues

BY ROBERT V. RAKESTRAW

Many Christians, like the author, are afflicted with chronic illnesses, and have wondered, “Why do these long-term afflictions come to God’s people?” “Is the illness my fault, at least in part?” and “How should we pray for healing?” Here is a wise interpretation, born of much intellectual and experiential struggling, of the book of James’ teaching on health, healing, and faithful living in times of suffering.

I was diagnosed with heart disease at the age of 41. I went to donate blood, as I had done several times in my earlier years. After taking my blood, the technicians became alarmed. My blood pressure had dropped so low that they thought they might lose me. After I recovered they told me very firmly never to give blood again!

While I previously had experienced occasional lightheadedness and fainting episodes, I now learned that I had mitral valve prolapse, a congenital (in my case) condition that allowed a considerable amount of newly oxygenated blood to leak back into my left ventricle instead of being pumped into my body. As a result, as the years passed, my left ventricle grew enlarged and my heart became increasingly weaker in its pumping ability. By the age of 46 the condition had become so severe that I needed open heart surgery. The doctors repaired the mitral valve and expressed hope that my enlarged heart would return to a near-normal size.

But this did not happen. Even though the valve was now working well, my body was not receiving enough oxygen, due to the insufficient quantity of blood pumped with each beat. Increasingly I experienced fatigue,

lightheadedness, and shortness of breath as I moved through each day. Fatigue was the greatest problem—it seemed that every cell in my body was crying for more oxygen continually. It did not help to lie down or take a nap because my problem was not lack of sleep. Usually I rose from a good night's sleep, or from a nap, every bit as fatigued as when I lay down, and sometimes more fatigued.

I struggled to do my work: to teach theology and ethics classes at Bethel Theological Seminary and to serve my students as best I could. Often I would return to my office after class, shut the door, and just sit at my desk breathing deeply to get sufficient oxygen. I tried to attend to such simple responsibilities as filing my teaching materials, answering phone messages, and handling mail. But on most days I had little strength. The adrenaline and excitement of teaching subject matter that I loved kept me going in the classroom, but the physical and mental fatigue between classes kept me from all but essential tasks. Even these were done by “pushing through” rather than by tackling my work with the ease of earlier years.

As time passed, my condition worsened. Eventually I was diagnosed with severe heart failure and, at age fifty-four, placed on the heart transplant waiting list. In order to continue the ministry I loved, I cut back my teaching load by 25%, withdrew from most committee responsibilities, discontinued my preaching and other church ministries almost entirely, and ceased most writing projects. I grieved deeply over these losses, and experienced discouragement and confusion daily. I knew, however, that these changes were the best way for me to continue the work God had given me.

QUESTIONS CHRISTIANS ASK ABOUT CHRONIC ILLNESS

Christians are not immune to the bodily ailments that affect the rest of humankind. Many Christians are afflicted with serious illnesses, and some who are reading this article have suffered to a much greater extent than I have. God's people experience chronic physical pain from such causes as cancer, emphysema, back and joint conditions, digestive problems, and severe headaches. There are other chronic illnesses and symptoms that do not involve physical pain as much as they produce other forms of suffering: ringing in the ears, eye diseases, loss of appetite, fatigue, breathing difficulties, mental disorders, emotional weaknesses, Alzheimer's, and the effects of strokes and heart attacks. While there may not be great physical pain, the suffering that accompanies these conditions may be intense and debilitating. It persists day after day and year after year, and this duration itself becomes a major part of the suffering.

I have thought often about the issues of chronic illness, especially from a Christian perspective. Why do these long-term afflictions come to God's people? Is my illness my fault, at least in part? How should we pray for healing? How aggressively should we pursue healing through traditional medicine? What about alternative medicine? How do we live as faithful

Christians when suffering continues and healing does not come? What is God saying to me through these trials, and how might I be a more effective servant of Jesus Christ because of them? Do I really want to be healed? While we cannot address all of these questions, we will look at some biblical materials on the subjects of health, healing, and faithful living in times of suffering.

PRAYING FOR HEALING

God is in favor of good health. We know this. John, the beloved disciple, wrote to those under his care: "Beloved, I pray that all may go well with you and that you may be in good health, just as it is well with your soul" (3 John 2). In the gospels we read "Jesus called the twelve together and gave them power and authority over all demons and to cure diseases" (Luke 9:1). Numerous other Bible texts reveal God's concern for physical as well as spiritual health (for example, Exodus 23:25-26; Psalm 103:2-5). We know, however, that not everyone who loves God and seeks to live a life that is pleasing to God enjoys good health. The apostle Paul explains that this is because "the whole creation has been groaning in labor pains until now," and that we are in "bondage to decay" (Romans 8:21-22). The entrance of sin into this world brought disease and decay to all of us.

God does not abandon us in our misery, but offers help for our physical needs just as he does for our spiritual needs. One of the clearest texts in the New Testament on the subject of healing was written by the brother of our Lord:

Are any among you suffering? They should pray. Are any cheerful? They should sing songs of praise. Are any among you sick? They should call for the elders of the church and have them pray over them, anointing them with oil in the name of the Lord. The prayer of faith will save the sick, and the Lord will raise them up; and anyone who has committed sins will be forgiven. Therefore confess your sins to one another, and pray for one another, so that you may be healed. The prayer of the righteous is powerful and effective.

James 5:13-16

Many Christians have agonized over this text, regarding both matters of interpretation and matters of application. (Interpretation is what the text meant to the original recipients of the writing, whereas application refers to the way we take that interpretation and put it to use in our present day contexts.) One question coming from the text is whether the oil was medicinal, as it was sometimes used in the first century, or was it symbolic of the Spirit's power to heal? Most commentators favor the latter interpretation, offering the helpful application that such a view does not rule out the

use of medical science, nor does it focus on the oil as the primary requirement for healing.

Another question concerns how we are to distinguish between those who are “suffering” (5:13) and those who are “sick” (5:14). The original word for “suffering” is a general term for experiencing affliction or misfortune. But the word for “sick” literally means “without strength.” While it may refer to any condition of weakness, in this context it most likely indicates serious illness, because the sufferer is apparently too weak to go to the elders. (We should not apply this text so rigidly, however, that we exclude those who come to church and request prayer there.)

THREE VIEWS OF THE “PRAYER OF FAITH”

The most difficult matter of interpretation and application is the unconditional nature of the promise: “the prayer of faith will save the sick, and the Lord will raise them up” (5:15). This seems to say that if the right kind of prayer is offered, the sick will be healed. Yet we all know this does not happen every time we pray. Even if we study and apply every word and phrase carefully, seeking to follow these instructions reverently and fully, we do not always see healing. How can we continue to believe in the inspiration and authority of God’s written word while knowing that this seemingly absolute promise does not always lead to recovery?

The text presents several conditions for healing: the elders of the church should be called to anoint and pray in the name of the Lord; there needs to be the “prayer of faith;” there should be mutual confession of sins; and those praying need to be considered “righteous,” not because they live perfectly but because they are “in

Christ”—the righteous One. If we meet these conditions when we pray for the sick, sincerely yielding to God in every way that we know how, we will see remarkable healings at times. Some who are reading this article will testify to this. Others, however, will report that, even after following the biblical conditions, they have not been healed and they have prayed for others who have not been healed.

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The crucial statement seems to be: “the prayer of faith will save the sick.” By “save” the context indicates that restoration to good health is intended. But what is “the prayer of faith?” If we can know what this means, surely we will see more healings than we do. While there are many explanations of this phrase, there are three that are among the most common. One view is that the ones asking for God’s help—whether the sick person or the elders or both—need to have the right kind of faith. This interpretation places the burden on the individuals involved. The sick person needs to believe “hard enough,” without the least doubt, that he or she will be healed. Or the focus is put on the elders: they need to believe “hard enough,” with the right quality and quantity of faith. Whether the primary responsibility is on the sick one or the elders, or both, it is up to them to know what the “prayer of faith” is and to offer this prayer properly.

With this understanding, which we may call the “proper faith” view, if the sufferer does not get healed, it is not God but people who failed. This is a commonly-held belief in many “faith-healing” circles, and it creates a huge burden of guilt for those, either sufferers or those who pray for them, who do not see the healing they desire. Sometimes it is said that if we would only return to the more simple and pure faith of the first-century Christians, we would see the healings that they experienced.

One problem with this view, however, is that it is difficult to believe that the first-century Christians were that dramatically different in their faith than the Christians of the twenty-first century. Many of us have known of very godly and faithful people who asked for healing prayer yet did not receive it. And many of us know of devout Christian leaders who have prayed for the seriously ill without seeing recovery to good health. Do we really believe that the early Christians were spiritually superior to those today who live for God and seek healing from him? No doubt some people are not healed because they, or those praying for them, are not living in harmony with God’s word, or do not believe that God is able to heal. However, “the prayer of faith,” whatever it is, cannot be something so elusive and difficult to attain that even the most spiritual Christians today fail often to obtain it when seeking God’s healing power. We need to be deeply grateful that God *does* answer our prayers for healing quite often, but we also need to recognize that, at times, the same people pray for healing in similar circumstances, yet see no healing.

Two other views of “the prayer of faith” are more satisfactory, even though each leaves us with some unanswered questions. I waver back and forth between these two explanations as I try to reconcile the seemingly absolute nature of the promise for recovery with the observable fact that many devout prayers for healing are not granted in the way the petitioners desire. The first view is that “the prayer of faith” is sovereignly given by God in those situations of illness that he chooses. In these cases, the elders

receive the gift of faith in order to pray for a specific person or persons at a specific time. Neither the sick nor those praying for the sick did anything particularly different from other times. On this occasion, however, God either gave them the confidence that the sick would be healed, or at least assured them that he would work on their behalf in some special way. However they believe and feel, they pray with faith in God's power to heal, and they see the sick recover. In this view, the seemingly absolute wording of the promise is upheld because "the prayer of faith" always results in healing. When God sovereignly chooses to heal, he gives the faith necessary for those praying. We may call this the "sovereign gift" view.

This explanation accords well with 1 Corinthians 12, where we read that certain spiritual gifts, including faith and healing, are given for the common good by the Spirit, "who allots to each one individually just as the Spirit chooses" (12:11). This view does not put undue stress on the sick or those praying for the sick. It honors God as the healer. But it still leaves us with the question of why the invitation of James 5 is presented in such a wide-open manner, urging the seriously ill person to call the elders for healing and expressing such confidence that the healing will come. The illustration from Elijah that follows our text, giving an example of how fervent prayer actually changed the course of nature's rain patterns (James 5:17-18), seems to reinforce the view that it is our faith and our fervency that will bring about miraculous events in the natural world.

The last position on James 5:13-16 states that, while the promise is seemingly absolute, it is, like all other promises in the Bible, subject to the will of God in each situation. We are instructed to pray with confidence, while knowing that God's

thoughts are not our thoughts, nor are our ways God's ways (Isaiah 55:8). We are to ask for healing, knowing that God is able to do what we ask. However, we are to leave the outcome with our wise and gracious God, who may or may not choose to heal in this

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or that specific instance. We may call this the "will of God" view. Jesus said to his disciples: "If in my name you ask me for anything, I will do it" (John 14:14). Here is another seemingly absolute promise that has, at its foundation, the truth that God alone decides what accords with divine principles and purposes in this world.

Both this view and the previous one emphasize the sovereignty of God

in healing. But, whereas the former view says that God gives special faith for healing in specific instances, the latter view holds that those praying are not necessarily aware of any special gift of faith, but simply offer their petitions to God to heal according to his will. The latter view does not consider it a sign of unbelief to add “if it is your will” to prayers for healing.¹

This “will of God” view is the most common among non-Pentecostal Christians, and even among some Pentecostals. It does not have to imply an attitude of resignation to sickness, nor does it necessarily connote a “whatever” attitude that shrugs and says, “Well, it doesn’t hurt to ask.” Properly, understood, this view affirms a disposition of deep trust in God. We come with confidence to the Great Physician, the one who healed the sick in the cities and villages of Galilee and Judea. We take seriously the words in the letter to the Hebrews: “Let us therefore approach the throne of grace with boldness, so

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that we may receive mercy and find grace to help in time of need” (4:16). We do not, however, claim to know precisely what God’s will is in every situation. We offer our prayers for healing, seeking to follow the full biblical teaching in James 5 and elsewhere, with the confidence that God does all things well, and works all things together for good for those who love God (Romans 8:28).

As true as these statements are in themselves, I must admit that this view still leaves me somewhat troubled by the seemingly absolute wording of the promise in James 5:15: “The prayer of faith will save the sick, and the Lord will raise them up.” If the “will of God” view is correct, why doesn’t the text say: “The prayer of faith will save the sick *if that is what God knows is best*”? This is why I tend to revert to the former view at times: God sovereignly gives the gift of faith for healing when he pleases. Yet, I wonder how often this “sovereign gift” really is given. One well-known pastor friend of mine, now in his fifties, said that he has never felt that he had been given this gift of faith for healing prayer, yet he holds the “sovereign gift” view. Similarly, I do not believe I have ever been given this gift,

although when a beloved young pianist from our church was dying of cancer, I did everything in my power to “believe” that she really would be healed as we anointed and prayed. She died several weeks later.

And so, after much intellectual and experiential struggling, I tend to favor the “will of God” view, accepting the explanation that God’s promises (as well as God’s prophecies) in the Bible are sometimes given in summary form, without the full statement of conditions and factors that may affect their fulfillment. It bothers my Western “logical” mind to affirm this, yet it seems to accord with the realities in God’s written word. We read, for example: “when the ways of people please the Lord, he causes even their enemies to be at peace with them” (Proverbs 16:7). We know from biblical history and from experience, however, that in some cases the relational harmony promised is never attained.

All of God’s promises are true, including James 5:14-16, but we cannot claim to understand every aspect of God’s divine plan nor every nuance of the biblical texts. I am to go on asking for my own healing, and praying for others to be healed according to James 5 and other relevant scriptures, knowing that God is mighty and gracious, and in favor of good health. Even though I cannot “make myself believe” what I do not know for certain (that I or someone else will surely be healed physically as I pray), I can live and serve each day with total confidence in my gracious and wise everlasting Father.

A PERSONAL CONCLUSION

On this note I am happy to say that my health has improved somewhat in recent years. I am reluctant to write of this, lest I discourage those readers whose condition seems to be worsening. I am also concerned that I do not present my situation in some self-congratulatory manner, as though I figured out the right way to get a measure of healing, which others need to follow to find improvement. Having offered these cautionary remarks, I want to give glory to God for his work on my behalf.

After being placed on the heart transplant waiting list, I became increasingly concerned that such a drastic solution to my problems might not be the best route to follow. Something within my spirit seemed to say that God had another way for me. I continued to follow the doctors’ instructions, however, regarding each step of the transplant process. I wore my beeper that would signal the time to go immediately to the hospital. But I also pursued seriously a number of therapeutic measures, most of which I had already been doing to some extent.

Chief among these measures was prayer—my own and the prayers of others. Numerous times I deliberately asked God for healing, seeking forgiveness and cleansing from my sin. Several times I requested the elders (in my own church and in others) to anoint me with oil and pray for my healing. I continued to cultivate a life of joyful intimacy with God, seeking

to “trust and obey” as I lived each day. Physical exercise (in my case, walking on the treadmill or outside) was also important, as was getting proper sleep. As I had for years, I continued to research the wide world of nutritional supplementation, spending considerable amounts for those products that seemed to provide some relief from my ever present symptoms. I cut back on all essential responsibilities, learned to say “no” even when it hurt,

Even though I still had to live with the symptoms that placed me on the heart transplant list, I celebrated the degree of healing God had given. While I continue to struggle daily with fatigue, light-headedness, and shortness of breath, I rejoice with deep gratitude to God. I live by God’s grace, putting one foot in front of the other as I move through each day.

avoided unnecessary stress in every way I knew how, sought to enjoy relaxation without feeling guilty, and focused on peaceful relationships with family and friends.

Surprisingly, and to my delight, my cardiologist discontinued most of my medications. (I had frequently wondered if these were part of the solution or part of the problem.) As time progressed, my heart began

to improve. While the heart failure persisted, there was enough of an improvement to have me removed from the transplant list. After nearly two years of wondering when my beeper would go off, I now felt free. Even though I still had to live with the symptoms that placed me on the list, I celebrated the degree of healing God had given. While I continue to struggle daily with fatigue, light-headedness, and shortness of breath, and even though the doctors are concerned about my heart rhythm (I now have a defibrillator-pacemaker implanted), I rejoice with deep gratitude to God. I live by God’s grace, putting one foot in front of the other as I move through each day.

Our God is a faithful and merciful God. We can trust him to do what is best for us, whether that means total healing, partial healing, continuing as we have been, further deterioration of our condition, or going home to glory.² Our Great Physician still stands with arms wide open, gently urging: “Come to me, all you that are weary and are carrying heavy burdens, and I will give you rest” (Matthew 11:28).

SUGGESTIONS FOR FURTHER STUDY

Not only the sick, but also their caregivers, suffer in the context of chronic diseases or debilitating conditions. Two helpful articles on caring for Alzheimer’s patients (with

applications for many other long-term illnesses) are: Robertson McQuilken, "Muriel's Blessing," *Christianity Today*, 5 (February 1996), 32-34; and Glenn D. Weaver, "Senile Dementia and Resurrection Theology," *Theology Today* (January 1986), 444-456.

I have struggled with the question of why these long-term afflictions come to God's people in "Why Does God Permit Suffering?" *The Standard* (October 1988), 8-11.

Two books helpfully develop the themes of this article: Peter Kreeft, *Making Sense Out of Suffering* (Ann Arbor: Servant, 1986), and Charles Olrich, *The Suffering God* (Downers Grove: InterVarsity, 1982).

NOTES

1 Douglas J. Moo presents this "will of God" view well (although he does not call it this), while recognizing the "sovereign gift" view as included within it. "Prayer for healing offered in the confidence that God will answer that prayer does bring healing; but only when it is God's will to heal will that faith, itself a gift of God, be present." *The Letter of James* (Grand Rapids: Eerdmans, 2000), 245.

2 Concerning our acceptance of chronic illness and even impending death, we sometimes need to have enough faith *not* to be healed!



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