Animistic and Western Perspectives of Illness and Healing

Missionaries often assume that Western practices of medicine is superior to all other approaches. This article reveals keys to understanding the deficiencies of our own worldview which can have devastating consequences on the mission field.

by Gailyn Van Rheenen

This article was first presented at a medical missions conference attended by doctors and nurses involved in short-term medical missions. The purpose of the presentation was to help doctors and nurses differentiate Western, animistic, and Christian worldview presuppositions concerning illnesses and suffering and, based upon these understandings, to guide them to develop a biblical theology of healing. Hopefully, this presentation will help medical missionaries to perceive how illness is viewed in animistic cultures, where most medical missionaries minister, as well as how illness is viewed in their own culture.

Ways of Interpreting Reality

Worldview presuppositions form the basis of how cultures understand illness and healing. Doctors and diviners, nurses and shamans, clergy and laity all bring their worldview beliefs to the variety of assumptions about illness and suffering. They each claim special insight arrived at by scientific observation, revelatory authority, intuitive understanding, or logical deduction or some mix of these epistemological sources. It soon becomes apparent that understanding worldview will help medical missionaries to perceive how illness is viewed in animistic cultures, where most medical missionaries minister, as well as how illness is viewed in their own culture.

Western Perception

It is time for Western doctors and nurses to admit that they have basic worldview assumptions about illness although they are seldom brought to the surface and overtly discussed and evaluated. What are some of these Western presuppositions about sickness and healing?

First, Westerners believe that they live in a closed universe. Illness is seen as a result of cause and effect within the physical world. In other words, people become ill because they come into contact with germs. The animist’s belief that spiritual beings and forces (gods, spirits, ancestors, witchcraft, sorcery, and magic) are the cause for illness is relegated to the arena of fiction or classified as superstition by Westerners.

Second, Westerners assume that the world is orderly. They expect consistency in the way things work, a normalcy which can be predicted and tested. In their orderly, predictable paradigm, Westerners have jettisoned the belief that the world can be disrupted by personal spiritual beings (such as ancestors or ghosts, both of whom, in the animistic world, have passed into the spiritual realm beyond death) or impersonal spiritual forces (like witchcraft or magic). This perception that the world is orderly and predictable is the basis of all modern science and experimentation. Western medical science is based upon a rational, empirical worldview.

Third, Westerners make a sharp distinction between the natural and the supernatural. This is a result of post-enlightenment dualism which sharply differentiates between the body and the spirit. This “Cartesian dualism” eventually drove a wedge between the natural and the supernatural. Illness is considered part of the natural realm; religion part of the...
supernatural. They are two distinct realms which do not impinge upon each other. How unnatural it would be for a doctor (even one who believes in the supernatural) to prescribe medicine for a patient and then say, “Let’s pray that God will use this medicine to facilitate your healing.” The doctor’s office is not considered the appropriate arena for speaking of religion or petitioning God for help.

The Christian physician/minister must guard against being so influenced by this type of Western thinking that he falls prey to Western secularism. This secularism holds to many Christian doctrines and uses appropriate Christian terminology yet, in reality, excludes God from healing. Thus God is gradually and imperceptibly fenced out of His creation and at best is relegated to the status of an observer. According to this perspective, the Divine tends strictly to spiritual concerns. God has created and ordered the physical world, which operates on its own, according to established “natural laws.”

Four, Westerners believe that the forces of the world are impersonal. They ask “what” caused the illness (which is always something impersonal, like bacteria) rather than “who” caused it or “why” someone is sick. These impersonal forces then are defined in terms of specific “laws of nature,” which are rational and can be demonstrated by experimentation.

The belief that personal spiritual forces cause illness is generally considered superstition: the scientific community scoffs at even the hint that such powers might influence illness. Because this world operates by impersonal cause and effect relationships, prayer and healing are seen to be divorced as if God has little to do with illness and healing. God then is virtually relegated to the otherworldly realm of the supernatural. The Great Physician is not petitioned for physical healing. Science and religion are thus disconnected. This can lead to the belief that humanity, with its scientific understanding, is self-sufficient, able to handle all obstacles in life, and does not really need God. Jeremiah’s words call the Westerner back to dependence on their Creator God: “I know, 0 Lord, that a man’s life is not his own; it is not for man to direct his steps” (Jer. 10:23).

**Animistic Perception of Illness**

Animistic worldviews are based upon radically different assumptions. Animists believe that personal spiritual beings (e.g. ancestors and ghosts, spirits and gods) and impersonal spiritual forces (e.g. karma, magic, witchcraft, curses) have power over human affairs. Humans, consequently, must discover what beings and forces are impacting them in order to determine future action and to manipulate these powers (Van Rheenen 1996:20). Contrary to what many Westerners think, animism in itself is a comprehensive belief system which is “logical” if one accepts its presuppositions. It usually makes little sense to Westerners who interpret animistic assumptions from their own worldview perspective.

What then are the basic worldview assumptions which underlie the animistic perspectives of illness? First, animists assume that the seen world is related to the unseen world—an interaction exists between the divine and the human. Personal spiritual beings and impersonal forces everywhere are thought to be shaping what happens in the animists’ world. 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.

Second, animists believe that they live in an interconnected world. They are intimately connected to their families, some of whom are living and some of whom have already passed on to the spiritual realm. They are also connected to the spiritual world: the ambivalent yearning of gods, spirits, ancestors, and ghosts impact the living. Animists feel a connection with nature. The stars, planets, and moon are thought to affect earthly events. The natural realm is so related to the human realm that practitioners divine current and future events by analyzing what animals are doing or by sacrificing animals and analyzing their livers, entrails, or stomachs. Animists also believe that they are connected with other human beings. They access the thoughts of other human beings through ESP or other types of thought transfer. The cosmos is like the interconnected, interpenetrating strands of a spider’s web. It is not surprising, given the interconnectedness of the animist’s universe, that illness is frequently understood as the result of the breaking of this interconnectedness—the result of disharmony in one’s life.

Third, animists seek power to control human affairs, especially during times of illness and death. The essence of animism is power. This power can be used malevolently to harm one’s enemy or benevolently to divine why one has become ill. There are many types of animistic powers: power of an ancestor to control those of his lineage, power of an evil eye to kill a newborn or ruin a harvest, power of planets to affect earthly destiny, power of the demonic to possess a spiritist, power of magic to control human events, power of impersonal forces to heal a child or make one wealthy.
Fourth, animists seek to determine by divination what powers and forces are causing illness. Divination consists of a twofold process: The animist first seeks to determine the source of the immediate everyday problems and then seeks to determine an appropriate response based on this knowledge. There are many methodologies of divination. Animistic practitioners divine while possessed by spirits in Brazilian Spiritism, Haitian Voodoo, and Puerto Rican Santeria. Astrology is the most frequently employed methodology in highly literate cultures. Ritual techniques are variously employed throughout the world. Diviners in Western contexts frequently use tarot cards, while practitioners in Africa frequently analyze how cowry shells fall when thrown on a mat. Other methodologies include interpretation of natural omens, reliance on the dead, and interpretation of dreams and visions.

Fifth, animists believe that illnesses frequently have personal causes. 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.

In addition to the causes of illness, animists seek personal motivations, asking, “Why did he do it?” If the sin is against ancestors, the living will seek to understand their wishes and appease them in order to reestablish harmony. If witchcraft or sorcery is the cause, the power will in some way be directed back to those invoking it. Because missionaries from a Western context seek the natural cause of disease, it is difficult for them to understand divination. They ask, “What caused the illness?” instead of “Who caused it?” and “Why did he do it?” Western missionaries naturalize what animists spiritualize. Animists would not object to these

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naturalistic explanations. They would merely assume that there is some spiritual power behind the secular explanation. For example, Burnett (Burnett 1988, 109) records a discussion between an African tribesman and a missionary:

Tribesman: “This man is sick because someone worked sorcery against him.”

Western Doctor: “This man is sick from malaria because he was bitten by an infected mosquito.”

Tribesman: “Yes, he was bitten by a mosquito, but who sent the mosquito?”

Theistic Understanding of Healing

How, then, should a medical missionary from the West effectively incarnate the mission of God in animistic contexts?

First, medical missionaries must make sure that they have accepted a Christian biblical worldview and can differentiate this worldview from other ways of perceiving reality. A Christian worldview presupposes an active God who rules over his world. He reigns over this world by right of being its Creator. The Psalmist says, “The earth is the Lord’s, and everything in it, the world, and all who live in it; for he founded it upon the seas and established it upon the waters” (Ps. 24:1-2). He created the physical body—breathing the breath of life into clay:

“The Lord God formed the man from the dust of the ground and breathed into his nostrils the breath of life, and the man became a living being”. Humans, therefore, are not mere flesh but living souls created by God (Gen. 2:7).

God is sovereign over life and hears the prayers of his people. God opens the womb of a barren woman like Hannah (1 Sam. 1), adds fifteen years to the life of a dying king like Hezekiah (2 Kings 20:1-6), and turns back evil which is about to come upon a disobedient people (Amos 7:1-6). Life and death, sickness and health are ultimately in the hands of God! The medical missionary must, therefore, determine the relationship between the divine and the material, between prayer and healing. He must determine what the relationship is between earthly physicians and the Great Physician. Without such integration, based on the Bible, the medical missionary operates as if God has no role in healing and virtually excludes him from the crises that inevitably come along in life.

A Christian worldview acknowledges that God both loves the people he created and expects them to live in a holy relationship with him. God’s core quality (attribute) is steadfast love. He is “compassionate and gracious, slow to anger, abounding in love and faithfulness” (Exod. 34:6-7, cf. Num. 14:18; Neh. 9:17; Ps. 86:15; 103:8; 145:8; Joel 2:13; Jonah 4:2). This quality is clearest demonstrated
when God sent Jesus to become flesh and to die for sinful humankind (John 3:16).

God, who is love, is also holy. A Christian worldview poses a moral God in charge of his universe. Isaiah called him “the Holy One of Israel” (43:8). God speaks through Isaiah to say, “I am the Lord, your Holy One, Israel’s Creator, your King” (Isa. 43:15). The heavenly hosts reflect this quality of holiness by proclaiming “Holy, holy, holy is the Lord God Almighty” (Isa. 6:3; Rev. 4:8). The sacrificial system described in Leviticus is based on a holy God desiring to unite sinful people with himself. Therefore, God identifies himself as “the Lord, who makes you holy” (Lev. 20:8). These two attributes define both why and how God relates to humankind. God did not merely create humans and then leave them. He loves them and desires to live in relationship with them. Nor does God desire just to heal them (physically) and leave them unholy (spiritually).

As the above discussion illustrates, a Christian worldview is radically different from both secularism and animism. Christians acclaim a personal loving and holy God. Westerners either deny God or believe that he is not actively involved in the world. Animists, on the other hand, look at God in one of three ways depending on their specific type of animism. He is either 1) a distant, unapproachable Creator, 2) the Supreme Being whose nature is refracted in lower spiritual beings to whom prayers and sacrifices are made, or 3) the impersonal power that permeates all of nature (Van Rheenen 1996:243-246, 298). Each of these perspectives stand in contrast to the true nature of the Creator God.

A Christian worldview, based on scripture, acknowledges that there are a number of causes for illnesses. Sometimes God uses illness to discipline those who have sinned. God disciplines out of love as a father corrects “the son he delights in” (Prov. 3:11-12; Heb. 12:4-11). Frequently Satan causes illness to tempt people to fall away from God. Paul’s thorn in the flesh was described as “a messenger of Satan to torment him” (2 Cor. 12:8). During Satan’s second meeting with God in the book of Job, Satan asked that God allow him to touch Job physically, believing that he would then reject God (Job 2:4-6).

Understanding illness from a Christian biblical vantage point is difficult because Christians are called to stand before God by faith without understanding all spiritual reasons for earthly causations. When God appeared to Job after his period of suffering, he did not explain to Job the cause of his illness. He merely asked Job question after question about his creative power. Under this barrage of divine questions Job was moved first to silence (Job 40:1-5) and then to repentance (42:1-6).

The book of Job thus teaches that God is in control. This is “our Father’s world.” There is purpose in what is going on although humans may not fully understand it. Christians, therefore, are called to stand before him in faith, worshipping God, even during illness and suffering.

Second, medical missionaries should practice a Christian worldview by praying and speaking the message of God within the healing context. While patients in the United States do not expect their doctors to pray, separating the physician’s healing and prayer, this is not the case in most areas of Africa, Asia, and Latin America. People in these areas do not divide reality into the natural and the supernatural. Medical missionaries must, therefore, pray for their patients, believing in the presence and power of God to interact and heal.

\section*{Conclusion}

Some years ago I underwent a hernia repair at Tenwek Mission Hospital in the Kipsigis area of Kenya. I will never forget how Dr. Ernie Steury held his scalpel between clasped hands and prayed with me before the surgery. I felt a confidence that God was working through the hands of this doctor and, since that time, have prayed for God’s healing both before and after going to a doctor. Dr. Steury significantly influenced hundreds of Kipsigis to become Christians because he continually prayed with his patients and exhorted them to follow the way of God.

Medical missionaries must realize that all of healing is based upon the graciousness of God. He has provided humans with the ingenuity and guidance to develop medicine and medical practices. He is also the Great Physician who listens to the prayers of his people and frequently heals when his people pray.

\section*{References}


\section*{Photo here of Van Rheenen

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