

Miracles

Continued from previous page

more likely, but that's certainly not a guarantee.

PROFESSOR Brown believes that there are two basic views of the world and the nature of spiritual reality. "One of those can be described as a kind of a warfare view: that is, 'Thy enemy comes to steal, kill, and destroy, and Jesus came that we may have life and have it abundantly.' And Jesus said, 'The Kingdom of Heaven is near,' and that implies this sort of clash of kingdoms . . . and people are healed, but, as in any war, it doesn't come without some mess.

"The alternative view is sort of a blueprint view: that God has everything planned out from the beginning, and we have nothing to do but work out this preordained blueprint. And I think that view is in some ways comforting, because if someone's not healed, we can say that it must not have been planned."

He refers to the Canaanite woman who wouldn't take no for an answer. "I think most of us would say, 'Ah, I'm very sorry, I bothered you, Jesus. Thank you for making your will clear.' But she didn't get the memo. And she argued with Jesus, and wouldn't take no for an answer, and made somewhat of a nuisance of herself, and got her reward" in her daughter's healing.

This, he believes, is an argument for persistence. "I sort of take this

warfare view, that we may not be without casualties. But, if we are persistent, and continue praying, not give up, then I think we'll see more people healed. That's the approach I've taken, and I've seen God heal a lot of people who I think may not otherwise have experienced that, had we not been persistent."

Do people need to want to get better? "I think it helps, but I wouldn't say it's strictly necessary," he says. His wife's research suggests that there is not a great deal of correlation between expectation and outcome. "There are people who get healed who really didn't expect to, and I think in some ways that might surprise us. Some would argue that, you know, a lot of this is in your head, [and] expecting something to work should help that. But it's not so much a factor.

"I think persistence does seem to be a factor, but I've watched situ-

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ations in which people walk into a healing meeting at a church, not exactly sure why they're there, not having planned to go along, and they find themselves healed, and might be somewhat perplexed at the whole

thing. And I've also seen people who very strongly anticipate healing, and go for prayer lots of times, and they haven't experienced healing."

What about his case? "I would say that I desperately hoped for it. I'm not sure how much I expected it. I think there wasn't a day that went by for the first year after the diagnosis . . . there was hardly a moment that went by without me thinking that I might die, and that would be really horrible. I would leave behind a widow and a child without a father, and I hoped and hoped that I would find some healing, but, to be honest, I don't know."

Professor Brown has had various church affiliations; currently, he and his wife are part of an Assemblies of God congregation. What effect has his experience of healing had upon his faith? "The gospel as Jesus describes it hasn't changed. But, beyond that, almost my entire outlook on the nature of the Christian life has been dramatically transformed. I would never have imagined that I would be talking about miracles.

"If you had told me 20 years ago that this would be my experience, I would have said, 'You're clearly taking drugs now. Because this can't possibly be true.' But here we are . . .

"I think we talk about the love of God, and then we say, well, you know, God works in mysterious ways. And we probably shouldn't expect him to do much practical for us. You know we'll all go to heaven, and that's good, but [now] I see Christianity as much more about both hope for eternity and hope for now. Which isn't to say that life

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doesn't involve suffering and difficulty. But that there's real hope now."

MEANWHILE, he wishes that the Global Medical Research Institute had more resources. You can't assume that people will upload their stories in appropriate medical detail, he says; each case needs scrupulous checking by research assistants. The individual case studies are important, but proper testing is needed. (He is in perfect agreement here with the sceptics who criticise the robustness of the Institute's findings.)

"If you're a drug company, for example, no one would accept a claim that your drug works because you say you gave it to one person and they got better. That would be completely unacceptable in the pharmaceutical industry. I think we need proper randomised controlled clinical trials to really investigate these kinds of claims. There have been a few studies that have been done over the years, but I think that they're very few and the results are mixed. . . It would be really useful at this point to do things as properly as

possible and really do more clinical trials."

There is, he says, a degree of suspicion between scientists and Christians. "I think there's been this historic animosity between the scientific community and the Christian communities. And the upshot is that Christians have cast a bit of a suspicious eye on scientists and vice versa.

"I live in both worlds and I don't see a conflict. But I find that if I go to Christians and say, 'Well, look, you're making claims that prayer is effective, and no one outside the community of faith is going to take those claims seriously unless you invest in some research,' the response I get is, 'We don't need research, we need faith.' To which I would respond: 'Yes, you do need faith, but everyone else requires research and evidence of the same type that they would require of any other claim with some treatment.' That's a hard sell to the Christian community."

Christians would do well to take a leaf out of the book of Buddhists who have invested in research into mindfulness, he says. "I think that Christians in my view are behind the game. If you want to claim that whatever you're doing has an effect you need to invest in research. That's probably the single message that I would want to communicate to the broader Christian community.

"People talk about mission all the time. But I think if you want to convince the broader public in the Western world that what you're doing is effective, you don't need to support missionaries. You need to invest in science."

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