ORAL ROBERTS’ THEOLOGY OF HEALING

A JOURNEY FROM PENTECOSTAL “DIVINE HEALING” TO CHARISMATIC “SIGNS AND WONDERS” TO SPIRIT-EMPowered “WHOLE PERSON HEALING”

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Abstract

This paper traces the development and articulation of Oral Roberts’ theology of healing through three discernible stages. From the perspective of a participant observer during the final stage of Roberts’ healing ministry, the author examines Roberts’ writings to show that his healing theology moved from a classical Pentecostal theology of divine healing of his roots to a theology of “Holy Spirit in the Now” that emphasized signs and wonders befitting the Charismatic Movement he led, to a final stage that might be characterized as a Spirit-empowered theology of whole person health. Attention has been given to Roberts’ conceptual and linguistic contributions of point of contact, seed-faith, and prayer language, as well as the rise and fall and impact of the City of Faith Medical and Research Center as a laboratory for whole person health care.
According to Vinson Synan, eyewitness historian of the modern Spirit-empowered movement, Oral Roberts was a son of Pentecostalism and father of the Charismatic Movement. According to Synan, Oral Roberts was a son of Pentecostalism and father of the Charismatic Movement. Oral Roberts was born in a Pentecostal Holiness pastor’s home in Oklahoma where he grew up to become a young preacher with the testimony of a dramatic healing from tuberculosis. He was ordained in 1936 and pastored four churches between 1941 and 1947, but was not satisfied with the local pastorates and the state of his denomination at that point. Although he had the promise of a bright future within his denomination, multiple ministerial experiences and a sense of calling led him to launch a healing ministry in 1947 with a crusade in Enid, Oklahoma. Held in the civic auditorium, this meeting was attended by 1,200 persons. Roberts was willing to let go of the local pastorate permanently and continue the crusade model of evangelistic healing ministry if the first crusade drew 1,000 people, the expenses of the meeting were fully met, and at least one healing took place. The crusade in Enid fulfilled all three “fleeces” to his satisfaction and he was ready to proceed. A failed attempt later by a strange man to kill him at a crusade in Tulsa, where a bullet missed his head by just eighteen inches, unexpectedly gave Roberts and his ministry significant national recognition.

Roberts began to hold healing campaigns across America in large portable tents. The first tent seated 3,000 people and as the crowd grew, the largest one, which he called his “traveling cathedral,” seated more than 12,500 people! Several crusades were held outside the United States. Through his monthly magazine Healing Waters, which later was named Abundant Life, nationally-heard radio programs, and widely-read syndicated newspaper columns, Roberts’ ministry and message spread across the country and around the world. His first book on healing, If You Need Healing Do These Things, was also published in 1947, which unfolded the initial rubrics of his theology of healing.

Oral Roberts conducted over three hundred healing crusades and personally prayed for multitudes of people. His Sunday morning television program was the number one syndicated religious program in America for almost three decades. Since the publication of his first
book, he has written extensively about healing, the Holy Spirit, and the principles of seed-faith, which helps one to notice the development and articulation of a comprehensive theology that undergirded his healing praxis. The thesis of this paper is that in reviewing his work, one can see the integration of a theology of divine healing based on the atonement from his Pentecostal roots with a theology that emphasized the charismata and “signs and wonders” from the Charismatic Movement he led, forming a comprehensive theology of Spirit-empowered whole person healing.

**Pentecostal Divine Healing Roots**

The modern Pentecostal movement embraced the doctrine of divine healing from its very beginning in the early twentieth century. Adherents accepted this position as their legacy from pre-Pentecostal holiness and healing movements and the Wesleyan-Holiness tradition. They believed that God had given a remedy for all the effects of sin in the atonement and this included healing of both physical and spiritual issues. The conviction that “healing is provided in the atonement” produced several healing ministry practices in the nineteenth century, which included holding prayer meetings, conducting healing conferences, and developing care facilities called faith homes. These homes provided the sick residents compassionate care, prayer, and instruction on restoring and maintaining health. In some circles, the commitment to divine healing required the denial of any medical treatment for the patient. There were some segments, on the other hand, that advocated integrating prayer with medical practice.

Pentecostals were committed to the “full gospel,” which required them to proclaim the name of Jesus as savior, healer, Spirit-baptizer, and soon-coming king. Some were also committed to preaching Jesus as sanctifier, but all of them believed that healing was one of the things that “follow them that believe” (Mark 16:16). This theological commitment to divine healing has remained a major theme in classical Pentecostalism and it is credited for its unmatched growth.4

Born and raised in abject poverty as a person of Native American heritage in a small town in Oklahoma, Oral Roberts was familiar with
scarcity and sickness. His own healing from tuberculosis as a teenager had a great impact on his outlook on sickness and health. As a Pentecostal preacher’s kid and young minister, he believed in divine healing and felt a calling to offer it to hurting people everywhere. His vision of healing and health was not limited to the members of his congregation or denomination alone, but extended far beyond the walls of the church. The year 1947, which produced his first crusade and the first book on healing, was a crucial year in this journey of faith.

The foundation of Oral Roberts’ healing theology is a simple biblical concept: God is a good God (Ps 107:1) and he wants to heal the sick. Roberts called the devil a bad devil.) The nation seemed to be unprepared for such an unconditional declaration about God, but Roberts believed it and proclaimed it across the world. His straightforward and simple statements were frustrating to people who looked for theological nuances, which resulted in misunderstanding, persecution, and rejection, even from his own denomination. But Roberts found an audience elsewhere that was responding very positively to his message.

Roberts added other planks to his foundational theological platform. In *Better Health and Miracle Living* he presented six steps of healing:

1) Know that it is God’s will to heal you and make you a whole person;
2) Remember that healing begins in the inner man;
3) Use a point of contact for the release of your faith;
4) Release your faith;
5) Close the case for victory;
6) Join yourself to companions of faith.

He taught,

1) You will be in a great position to have health and success if your relationship with God your source is right;
2) Your life will be completely different if you learn to plant good seeds with God and with people you like or dislike;
3) You can expect many miracles for yourself if you have a right relationship with yourself and with God.
Roberts considered healing a believer’s “covenant right.” He stated that from the front of the cross we see forgiveness and from the backside we see “the full measure of God’s desire to heal us.” At the cross, Jesus received upon himself our sins and with them all our diseases by absorbing them to himself. His commentary on the Bible says, “Our sins HAVE BEEN forgiven. Our diseases WERE HEALED. The victory has been won by Jesus and by our FAITH we can receive of God’s redemption, the full measure of our deliverance.”

Roberts saw all sicknesses in the context of a great battle between Satan’s destructive forces and God’s power that is ready to heal, especially for those who claim their covenant right of healing. Satan comes to steal, kill, and destroy, but God’s will is our restoration and healing. Roberts connects the spiritual battle to the idea of a “point of contact,” a concept he introduced to Pentecostal healing ministry and vocabulary. He illustrates point of contact in his commentary on the healing of Jairus’ daughter: “You are in between. Jairus held onto his point of contact, and it worked to keep his faith operating. When you ask God to heal you, if you are serious, there will be a tremendous conflict. But if you continue to look to God, your source of healing, He will give you the courage you need . . . . He had SAID, ‘Lay your hands on her and she will be healed.’ SAYING it started his point of contact.”

The healing process involves believing, fighting one’s fears, not doubting, and saying words of faith as a point of contact. “Point of contact” is a major component of Roberts’ theology of healing. A point of contact makes faith “a definite act of believing.” This act of believing can be seen in the actions of the woman with the issue of blood who touched Christ’s garment. She was not simply “finger touching,” he said, “instead she was touching Him with her FAITH.”

“Faith for healing is a definite transaction. It springs loose what God has already made available for you and me in the covenant. HE HAS ALREADY DONE IT.” A point of contact sets the time for one’s faith to be released. “There is a definite time when you put your faith into action.” “A point of contact is something you do . . . and when you do it you cause your faith to go up out of your heart TO God. It’s not enough to have faith. Your faith is in you to be turned loose—to be sent to God, your Savior and Source.”

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Releasing one’s faith is the central issue in healing, and the key to opening up this process is the point of contact. It appears that a point of contact is a concrete action, but it has both tangible and intangible dimensions. Consider Roberts’ explanation:

Your point of contact can be one of several things. Mine is my right hand. Though there is no healing virtue in my right hand, God spoke to me and told me that I would feel His power through my right hand. It is a sensation of God’s presence. When I lay my hand on the head of the person seeking God’s healing and begin to pray, I often feel this power going through my right hand. The moment I feel it, my faith is very strong. This point of contact helps me to release my faith to God. Also, it helps the person seeking healing. When my faith and his faith contact with God, the healing begins. This is the point of contact we have used in our crusades, either through my hands or those of our team members. However, there are many other ways—such as the anointing oil of James 5:14, 15, the laying on of hands in Mark 16:17, 18 and the blessed cloths of Acts 19:11, 12. What does it matter what the point of contact is if it helps you release your faith?

Later on, he connected point of contact with the idea of seed-faith, another conceptual and vocabulary contribution he made. There are three steps involved in seed-faith:

1) Make God your source (Phil. 4:19);
2) Give (“plant a seed”) and it shall be given to you (Luke 6:38);
3) Expect a Miracle (Mark 11:24).

Roberts’ seven “rules of healing” provide practical steps for those seeking healing:
1) Recognize that sickness is the oppression of the devil and that God wants you to be well and happy;

2) Believe the message of deliverance, no matter who is God’s messenger;

3) Go where the power of God is even though you may have to change your attitude and way of life;

4) Put your faith in God, not man. Remember, the man of God is the instrument. God is the Healer;

5) Accept God’s correction, for He knows best;

6) Lose yourself, for then you can become a new person;

7) Use a point of contact and be healed, a whole person again.\textsuperscript{16}

A nine-step prescription incorporates faith, seed-faith, and point of contact:

1) Get God into your life in a way He has never been there before;

2) Get your attitude in the direction of living instead of dying;

3) Put your attitude into action. DO SOMETHING. Make some decisions and get going;

4) Plant. Take your life—your money, your time, your love, your good attitude—and invest it in God’s fertile soil;

5) Make your seed-planting a Point of Contact for each point of need in your life;

6) Grab hold of each burst of healing you receive;

7) Place the name of JESUS above the name of anything that causes you to have disease;

8) Run toward the goal of whole health that God has for you;

9) Decide today that you are going to carry out this prescription.\textsuperscript{17}
Healing is related to faith and faith comes by hearing of the word of God. Therefore, preaching of the word is central to Roberts’ teaching on healing. To him, healing faith is directly related to the hearing of the word of God. He was a very dynamic preacher. His faith-stirring sermons in the crusades prepared people for healing. “The Fourth Man” was one of the most preached sermons with great impact on the listeners in terms of increasing their faith. They lined up to be prayed for by Roberts by the hundreds as he prayed like a man whose very existence depended on the outcome of his prayers. He declared his own faith in God as he prayed for each person. Anyone seeing the old black and white tapes/videos of the crusades will witness a man of compassion who was moved by the ailments he encountered.

Roberts sought biblical insights regarding unanswered prayers. He tried to understand God’s “no” in light of his love and goodness. He concluded that God’s “no” is not necessarily no. It means he has a better way. God’s refusal is subject to change when we conform to his will. He wants what is ultimately best for us. God had a better way for Paul. His thorn became an instrument to keep him humble and dependent on God. “When God says wait, it means that in a special way His will or purpose is involved . . . . When Jesus told Mary and Martha to wait, His will was to perform a greater miracle that so many more would believe on Him.”

A classical Pentecostal understanding of divine healing that was built on the atonement was central to Oral Roberts’ theology of healing. It formed his theological foundation, but he added the new concepts of point of contact and seed-faith to enhance that theology to increase the faith of his listeners. This new version recognized the sovereignty of God, but left open the possibility and expectation for healing due to actionable faith called point of contact and seed-faith.

Charismatic “Signs and Wonders”

Television entered the American living room in the 1950s and rapidly began to change the national culture. While Pentecostals denounced the new invention as a tool of the devil, Oral Roberts saw the opportunity to bring his crusades to the living rooms of America through this new
medium. He pioneered televangelism and maintained a continuous ministry presence on television beginning in 1954.\textsuperscript{19} Millions of people belonging to multiple Christian traditions and many unchurched witnessed the miracles of healing taking place in his crusade tents on television. They sought his prayer and sent money to support his ministry. Oral Roberts became a household name and Oral Roberts Ministry became a formidable spiritual force in America. His growing ministry of healing evangelism embodied a particular theology, a theology rooted in Pentecostal healing theology supplemented by his own new theological constructs. This theology was enhanced by Oral Roberts’ personal experiences and the dynamics of the expansion of Pentecostalism into the mainline denominations and the founding of and resources of organizations like the Full Gospel Business Men’s Fellowship, and later Oral Roberts University (ORU). At the heart of this theology was Pentecostal divine healing, wrapped up in a pneumatology that Roberts taught as “Holy Spirit in the Now!”

Oral Roberts was instrumental in removing the stigma of Pentecostal “tongues” by introducing the new vocabulary of “prayer language,” thereby facilitating the growth of Pentecostalism into the mainline church world. It is only reasonable to say that the Charismatic Movement came mainly out of the fires of Pentecostal healing evangelism led by Oral Roberts. This pentecostalization of mainline churches through the Charismatic Movement required theological adaptations. Divine healing was too Pentecostal to be charismatic! Manifestations of the charismata and signs and wonders, on the other hand, with no such Pentecostal baggage, became more palatable, especially when traditionally non-Pentecostal concepts of point of contact and seed-faith were added.

While the Pentecostals enjoyed the blessed assurance of “healing in the atonement,” charismatics were growing by emphasizing the charismata and promoting healing as it relates to the gifts of the Spirit and as signs and wonders. Howard M. Ervin, in his panoramic view of the Pentecostal-Charismatic Movement, saw healing as a sign of the Kingdom of God confirming the preaching of the gospel and as a love gift of God to his beloved children.\textsuperscript{20}

As a charismatic healing evangelist, Roberts de-pentecostalized
speaking in tongues (now called prayer language) and divine healing (now emphasized in the charismata). While the Word of Faith movement was gaining strength within the Charismatic Movement, Roberts remained ecumenical in his approach to ministry and invited well-known healing ministers like Katharine Kuhlmann, Vineyard Fellowship founder John Wimber, and Catholic healing practitioner Father Francis MacNutt to minister on the campus of Oral Roberts University. Holy Spirit conferences were held on the ORU campus on a regular basis. Under the deanship of Larry Lea, a charismatic Baptist pastor from Texas who followed the founding dean Jimmy Buskirk, a Methodist, the School of Theology and Missions (former name) at ORU was promoted as a “signs and wonders” seminary. The Word of Faith preachers led by Kenneth Hagin, Sr., of Rhema Ministries in Broken Arrow, Oklahoma, assigned great power to the spoken word of the believer in terms of receiving or thwarting healing. Roberts remained committed to a ministry of healing and miracles with signs and wonders and did not emphasize the teaching of Rhema regarding the power of verbal confession as a major theme of his theology of healing.

Unlike many in the Pentecostal movement, Roberts was not afraid to address the issue of unanswered prayer. He also addressed the issue of death and dying in the context of a healing ministry.

“It is appointed unto men once to die, after this the judgment” (Hebrews 9: 27). Death is a divine appointment. Death is classed as an enemy, our final enemy. But even in the process of dying I have seen miraculous things happen—release from pain, even the disappearance of the disease. You may ask, how then could the person die? Because there is a time to die, as well as a time to be born (Ecclesiastes 3: 2). Sick or well, you are going to die. Sickness unchecked can hasten it. However, when death’s time comes nothing will hold it back. We must be prepared to go at any moment (right in our heart with God and people).21

He called death an appointment and considered it the only card the devil has. Roberts’ theology of death was sober and biblically sound. He
was a realist and a healer at the same time. In *Better Health and Miracle Living* he recaptured a conversation he had with a physician regarding patients who die after prayer for healing is offered. He compared his healing work as an evangelist to that of a physician who tries hard to heal the patients, but is not successful always. He said,

\[\ldots\] there have been times I have prayed for persons I felt would recover; some did and some did not. But I know that I am not God, only His instrument. My part is to pray, His is to make the final judgment. I pray for healing because I believe it is God's purpose to make people well. However, I don't always know when a person is going to die, or shall we say, is going to meet his divine appointment—so I pray with all the faith I have just as you, as a physician, use all your skill to make the person well.\(^{23}\)

Oral Roberts was not just a man of faith; he was also a man of hope. He expressed his theology of hope in his well-known slogans: “Expect a miracle” and “Something good is going to happen to you!” It is fair to say that his healing theology of “Holy Spirit in the Now” and signs and wonders was rooted in a Pentecostal theology of divine healing based on the atonement and a charismatic theology of hope. With the conceptual addition of point of contact and seed-faith, this theology went beyond possibility of healing to expectation of healing where the sick could participate in their own healing through the principles of seed-faith and point of contact. “You have to go after wholeness,” he said, “It doesn’t just happen automatically.”\(^{24}\)

**Spirit-Empowered Whole Person Healing**

Oral Roberts was a healing evangelist, a man who believed in miracles and prayed for them earnestly. He had a well-defined faith-based healing theology that appeared to be simplistic on television. As a master communicator, Roberts did not believe that a half-hour TV program was the place to cover all the theological nuances. However, he did not hesitate to give the full version of his theology in his teachings.
on the campus of Oral Roberts University and in some of his books. Many still do not know that Roberts was not a “traditional” Pentecostal faith healer who rejected medicine as a natural means of healing. He was open to both natural and supernatural ways of healing. In fact, Oral Roberts did not separate the natural from the supernatural. To him, he was dealing with a continuum, allowing easy movement from the natural to the supernatural and vice versa. “I never have, and don’t now, and never expect to make a major difference between supernatural and natural healing. Jesus told me that we can’t put even a piece of tissue paper between His natural and supernatural power.”

To Oral Roberts, all healing is divine. “Both natural and supernatural healing powers work together for the healing of people, thus demonstrating that ALL HEALING IS DIVINE . . . . So we have Jesus healing not only by faith but also by putting within that sphere of healing the physician, which means from our Lord’s standpoint, ALL HEALING IS DIVINE whether it’s medical or by prayer and faith.” He advised his followers to value the instrument of healing but worship the Source—God.

Classical Pentecostals and some charismatics who initially revolted against Roberts’ position on medical treatment eventually found it generally acceptable. Many old-time Pentecostals experienced real relief from condemnation poured out on them by their faith communities for reaching out to the medical profession for help.

Oral Roberts University has its roots in healing evangelism. Founded in 1963, the university soon became a fully accredited institution built on a well-defined educational philosophy called Whole Person Education. ORU seeks students who are on a quest for wholeness. Education at ORU is seen as a journey toward wholeness. Unlike other higher education institutions, ORU is a unique place of learning and development in body, mind, and spirit, where students are required to develop intellectually, spiritually, and physically with intentionality and assessments. The ORU Catalog states, “Since the key distinctive of Oral Roberts University is healing . . . all of the university courses seek to educate students toward healing and restoration in every facet of society.” In the founder’s own words to the first class on September 7, 1965:
Wholeness is a way of life here. It’s something you can get; it’s something you can become. You can leave as the whole person God intended you to be . . . while we are innovators in educational techniques, we are definitely old-fashioned when it comes to Christian morals and character . . . . Along with your academic progress and your physical fitness, we expect you to be open to the creative activity of the Holy Spirit in your inner man, indeed in your whole person. The focus is to assist students to develop a Christian worldview . . . .

The university was not only replacing the earlier tent ministry; it was also reproducing healers with an expanded definition of healing. As the medical, dental, nursing, and law schools were added, statements like “lawyers are healers too” began to be heard on campus. The founding of the university gave Oral Roberts many opportunities to articulate his philosophy of whole person education and his understanding of healing as wholeness through the power of the Holy Spirit.

City of Faith

Out of the necessity to have a place to train doctors and nurses and to return to the healing roots of his ministry, the City of Faith Medical and Research Center was opened in 1981. The founding of the ORU Medical School and later the City of Faith Medical and Research Center were bold initiatives built on the confidence Roberts had in what he had learned and practiced about healing. Healing teams of doctors, nurses, ministers, and others functioned with full institutional support in the sixty-story City of Faith complex on the ORU campus. The sixty-foot tall healing hands made of bronze (similar to praying hands, but not the same) established at the entrance of the tower (now moved to the entrance of the university) symbolized the merging of prayer and medicine, the natural and the supernatural. To Roberts, one of these hands represented the Apostle Paul’s hand (minister) and the other Luke the physician’s hand. In spite of local controversies related to Oklahoma politics and the sheer resistance against an evangelist being
involved in medical education, the initiative to “merge medicine and prayer” was watched by the whole nation and caught the attention of Christians everywhere. People were moved by the concept and with the sacrificial financial support of the Oral Roberts Ministry partners, the institution was built with user-friendly floor plans and the latest available technology. It opened on November 1, 1981.

Along with highly skilled medical professionals, the City of Faith had clinically trained professional chaplains who were called prayer partners. At one point, there were nearly fifty professional chaplains and counselors working in the clinics and the hospital. They were supported by hundreds of trained lay prayer partners from Tulsa area churches. Students from the ORU Seminary joined them to learn and to practice healing ministry in an institutional context. The City of Faith had an approved Clinical Pastoral Education (CPE) program led by the former president of the College of Chaplains (now Association of Professional Chaplains), Herbert Hillebrand. The entire Spiritual Care Division was led by a retired army chaplain, Col. Duie Jernigan, Ph.D. This writer joined the staff of the City of Faith two weeks before the hospital opened in 1981, and later became the leader of the Pastoral Care Department (chaplains) of the Spiritual Care Division, which included both chaplains and professional counselors. Modern Lukes (physicians) and Pauls (ministers) were working together there, Roberts told the world. He joined the prayer partners from time to time to pray for the sick and added credibility to the work of the healing teams. Patients and families from all parts of the United States and many parts of the world came to receive whole person medical care at the City of Faith.

The City of Faith was a dynamic place of medicine, prayer, and healing teams. Speedier healings and expedited discharges were common events at the City of Faith, but it was also a place of pain, suffering, and death, like any other hospital, but Oral Roberts had a balanced theology of life and death. He believed that healing could take place through God’s natural and supernatural streams and it could happen instantly, gradually, or ultimately in the resurrection. Medical, nursing, and theology students were enrolled in training programs to prepare them for healing team work around the world.

The training of fourth-year medical students was unique at the City
of Faith as they were required to take a course titled “Healing Team Concepts,” which required students to read theological materials and the history of medical missions in addition to their normal medical assignments. It was co-taught by a physician and a chaplain. This writer had the opportunity to be the teaching partner in this course. Medical students were required to visit patients in their traditional white coats during morning hours. They were to visit the same patients later in the day wearing the gold colored gowns assigned to the chaplains. Finally, they were to write papers comparing and contrasting their experiences as physicians and ministers and integrating their insights into their practice as physicians. Students routinely reported hearing mostly lists of physical symptoms and medical complaints in the mornings and hearing stories of losses and heartaches during their ministerial visits. They felt forced to see the patients as vulnerable human beings and to listen to their compelling stories to offer them the best medical response from a whole person perspective. Many students considered this a life transforming experience of dealing with the social power assigned to them as physicians and learning to include other healing team members in meaningful ways to merge medicine and prayer. To many, it was an exercise in dealing with the social power and privilege of physicians and the role-related powerlessness of other professionals for the benefit of their patients.

Prayer was a part of everything that happened at the City of Faith. Patients were prayed for at all important areas within the clinic and the hospital. Admission staff prayed for patients at the entry points. Doctors and nurses prayed. Prayer partners prayed day and night. The social workers and pharmacists prayed as patients were discharged. Healing testimonials abounded. Speedy healings, unexplainable recoveries, and plain miracles were happening, but pain, suffering, and death were also present. Oral Roberts reminded the staff to consider the City of Faith as the modern invalid tent that accompanied his larger tents to accommodate patients who were too sick to be brought into the big tents.

It is well known that the City of Faith did not succeed as a financially viable institutional initiative. Many things contributed to its closing in 1989. The local civic power centers were against it, claiming the city did not need additional hospital beds, although thousands of beds have been added since then. The 1980s mega-scandals of
televangelists cast a shadow on every evangelist, including Oral Roberts. The hospital reimbursement system drastically changed nationally to what was called Diagnostic Related Groupings (DRGs), which limited payments to hospitals based on each diagnosis and predetermined number of payable days for hospitalization regardless of the actual cost of treatment. Medical education was also a very costly business impacting the university’s budget. There may be many other reasons for the failure of the City of Faith, but the underlying philosophy of whole person healing was not one of those. In fact, in recognition of his pioneering work as a promoter of whole person health, the College of Chaplains (now Association of Professional Chaplains) invited Oral Roberts to be the keynote speaker at its annual conference held in San Diego in 1983. This writer as a prayer partner (chaplain) at the City of Faith was certified as a Fellow in the College of Chaplains at that convention.

Many people who severely criticized Roberts for his fundraising efforts related to the City of Faith did not know that he was raising those funds to give full-tuition scholarships to medical students to let them sign up for medical missions after graduation. Seeing that the medical graduates of ORU were not electing to go on missions due to their large school loans, Roberts promised tuition-free education to medical students, one year of tuition paid for one year of post-graduation commitment to the mission field. This writer knows individuals who benefited from this offer and fulfilled their obligations after graduation from the medical school.

Although the City of Faith experiment failed, its impact—the impact of a healing evangelist on the medical field—has been tremendous. Graduates of ORU Medical School are practicing whole person medicine in several nations. Many of them are involved in training medical residents in whole person medicine and conducting medical missions. The story of the former City of Faith physician Dr. John Crouch and the In His Image Family Practice Residency he founded in Tulsa with three other colleagues from ORU School of Medicine faculty is one case in point. Dr. Crouch was the head of Family Medicine at the City of Faith. When the City of Faith closed, he led the founding of the In His Image Residency Program to continue the legacy of whole person medicine in his medical group practice and through a certified family medicine
residency training program. According to Dr. Crouch, the mission of In His Image is to improve health and meet spiritual needs of patients by: 1) Training Christian physicians in Family Medicine Residency Program; 2) participating in worldwide medical missions and medical education; and 3) serving the local underserved populations in the greater Tulsa area. Several former City of Faith physicians are practicing family medicine and training medical residents in “missions minded medicine” at In His Image. They have created a network of global medical residencies in multiple nations, including Kazakhstan, Afghanistan, and China, to promote whole person health care. Conferences and consultations are held to train native doctors as a part of seeing whole person medical education as missions in places like Aswan, Egypt, and Horn of Africa. Second- and third-year residents in Tulsa are encouraged to join the International Medical Conference teams. Many of them do by preparing and presenting lectures and teaching workshops. They interact with local medical students and residents with an eye to exploring if God is calling them for medical ministry to that people group! They have been involved in disaster relief work in Rwanda (massacre), Indonesia (tsunami), Pakistan (earthquake), Myanmar (hurricane), China (earthquake), Haiti (earthquake), the Philippines (refugees), and Northern Iraq (refugees). In His Image Residency graduates now serve as ambassadors of whole person medical care and healing in many nations in Asia, Europe, Africa, and Central and South America.

This is the story of just one former department of the City of Faith. Similar stories of global impact involving individuals and organizations connected to the City of Faith abound. Meanwhile, holistic medical care has become a matter of concern for the entire field of medicine since the days of the City of Faith. Those who scoffed at the prayer and medicine conferences held at ORU in the 1980s are no longer laughing at spirituality and healing conferences held now at places like Harvard University. The field of medicine was challenged by Oral Roberts not to consider the patient as just an organ or disease. He challenged them not to see patients as one-dimensional entities with symptoms, but to see them and treat them as whole persons. Unlike the pre-1980s, spiritual care and chaplaincy are no longer an appendix in most medical facilities in America. A whole person perspective is routinely discussed today at major medical
and nursing schools.

It appears that Roberts’ encounters with the interdenominational charismatic world impacted his theology of healing—both Pentecostal and Charismatic—and that impact was reflected in his teaching on wholeness. He became a champion of whole person education and healing. Fully incorporating his Pentecostal theology of divine healing into the mid-twentieth-century charismatic emphasis on the charismata and signs and wonders as the manifestations of the “Holy Spirit in the NOW,” Roberts articulated a theology of whole person healing. Some of the new emphases of the theology of whole person healing as taught by Oral Roberts are summarized and listed here:

• Health and illness are both dynamic in nature. Health is not merely the absence of illness, but a wholeness of being.

• Wholeness involves every aspect of one’s life: physical, spiritual, emotional, relational, economic, and environmental.

• The human body, mind, and spirit are interwoven at profoundly deep levels. Each aspect of human life interacts with and influences every other aspect.

• Personal attitudes, priorities, and choices are significantly related to one’s wholeness or lack of health.

• The faith of an individual is a great resource for health. An individual can contribute to his or her own healing by implementing a point of contact or initiating a seed-faith process.

• God is a good God and he wants his creation to be whole.

• God is the source of all healing. Whether healing results from medical intervention, faith-filled prayer, natural biological restorative processes, or a combination of these, all healing comes from God.

• The Holy Spirit is at work in a believer’s life and divine intervention in his or her life during times of need is always a possibility.
• God determines the timing of healing. God heals in three different ways: instantly, gradually, and ultimately in the resurrection.

• Some people are not healed physically; every individual must die once. Death is acceptable to the believer when it happens at the appointed time (Heb 9:27).

• Suffering is a reality of life in this fallen world; suffering of believers cannot always be explained.

• Healing ministry is not limited to some selected individuals. Spirit-filled Christians are called to go into every person’s world with God’s healing power.

Conclusion

Oral Roberts was a servant of God who was used to spread the message of God’s healing power across the world in the twentieth century. He is considered the premier healing evangelist who experienced God’s miraculous healing power in his own life. Coming from socially and economically poor circumstances, he caught a vision of the possibility of being blessed with salvation, health, and prosperity in the name of Jesus and through the power of the Holy Spirit. He developed revolutionary theological concepts such as point of contact, seed-faith, and prayer language, envisioned the use of television as a powerful medium for ministry, and founded a university to “impact the world with God’s healing.” He was a man of faith and hope, a gifted communicator, and a pioneer practitioner of whole person education and healing. His healing ministry was motivated by his love for suffering humanity and his willingness to obey a sense of calling and the command of Jesus to preach, teach, and heal. His life and ministry have touched the globe and the impact will be felt for many generations to come. His theology of healing was truly Pentecostal, charismatic, and global. Oral Roberts was a practical theologian who developed a well-defined theology of whole person healing that can be characterized as Pentecostal, charismatic, and Spirit-empowered.
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Notes


7 Roberts, Better Health and Miracle Living, 11–23.


11 Roberts, *Holy Bible; Personal Commentary*, 27.


18 Roberts, *If You Need Healing Do These Things*, 30–33.


21 Roberts, *Better Health and Miracle Living*, 188.
31 This section on the City of Faith hospital is written from the perspective of a participant observer and based on conversations with and a formal presentation made by Dr. John Crouch on ORU campus during 2015, fall semester.
32 Dr. John Crouch was chairman of the ORU School of Medicine Family Practice department when the school closed. The founding of the In His Image Residency Program took visionary cooperation and considerable efforts by three of his colleagues: Dr. Pat Bolding, who had been a resident at ORU and was then a faculty member, Dr. Mitchell Duininck, who was an ORU medical school graduate who had done residency at ORU and was a faculty member, and Dr. Ed Rylander, who was also an ORU medical school graduate who had done residency at ORU and was a faculty member.
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