**The Integration of Health Care, Religion, and Social Change**

PHI 815 – History of the Integration of Religion and Society

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Omega Graduate School

June 28, 2023

Professors

David Moser and Dr. Ward

Assignment

**100 Day – Essay Draft**

In this essay, the student should direct developmental readings from the 60-day assignment on the social movement of focus for this assignment.

* Write a 10-page essay that analyzes the following items:
  + Introduction of the Present Issue: Begin with a contemporary social issue that has a (probably unappreciated) history of positive Judeo-Christian response to it.
  + Body Sections:
    - Biblical Worldview Perspective: Locate the issue in the progress of Biblical revelation and explain the foundations of a Judeo-Christian perspective.
    - History of the Issue: Trace the development of the selected issue alongside the history of Christianity's social impact on it. Summarize the historical trend at different points in history with an eye to identifying significant causes of the social problem, identifiable processes at work, and enduring patterns that emerged. How did the problem/issue originate and develop? What were the causes of the social problem? What identifiable sociological or theological processes were at work? What enduring patterns emerged that recur?
    - Exemplars of Religion and Society Integration: Focus on one or several specific examples (e.g., key leaders or movements of socially and intellectually active Christians) of the integration of religion and society with regard to that issue. How did God raise up the leader or movement that changed the world? Are the patterns described in Hillman’s (2017) *The Joseph Calling* illustrated in any ways?
    - Applicable Principles: Distill the timeless principles of truth or leadership derived from the historical examples above. (Develop these based on the Body Sections #1-#3).
  + Conclusion: Provide a contemporary contextualization of the historical issue. Pose possible contemporary applications for the integration of religion and society in your field of influence. Discuss what impact this research had on your sense of calling to change your world.
* Structure (Paper Evaluation includes the following structure below).
  + Download the “OGS APA Course Assignments Template 7th Ed 2021” template from the General Helps folder in the AA-101 The Gathering Place Course on DIAL. Using the template create the following pages.
  + Title Page (not included in page count).

3.

c. Copy and paste the assignment instructions from the syllabus starting on a new page after the title page, adhering to APA 7th edition style (APA 7 Workshop, Formatting, and Style Guide, APA 7 Quick Guide).

d. Start the introduction on a new page after the copied assignment instructions. Be sure to meet the following expectations.

* Begin with an introductory paragraph that has a succinct thesis statement.
* Address the topic of the paper with critical thought.
* End with a conclusion that reaffirms the thesis.
* Document all sources in APA style, 7th edition (APA 7 Reference Example, APA 7 Quick Guide)
* Include a separate Works Cited page, formatted according to APA style, 7th edition (not included in page count).
* Use a minimum of fifteen scholarly research sources (two to three books and the remaining scholarly peer-reviewed journal articles).

Submit the completed paper to DIAL.

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**Introduction**

Christianity’s establishment of hospitals and healthcare released humankind from the grasp of inhumane pagan attitudes toward sickness and healing.

In modern times, as in the past, religious organizations shoulder much of the burden of tending to the sick and restoring health. Yet their secular counterparts (the public health agencies) adhere to ancient religious tenets whether or not they are aware of this fact.

Without the compassion of early Christians, it is doubtful that the concept of healing and alleviation of pain would ever have been allowed to exist. It is even possible that pre-Christian pagan views (letting the sick and weak die without compassionate care) might have eventually led to the demise of the human species itself. Hence we witness to this day the integration of religion and society in the healthcare realm––despite public prohibitions against such integration!

**Biblical Worldview of Health Care**

In Matthew 25:45, Jesus said, “Whatever you did not do for one of the least of these, you did not do for me.” Heeding His words, Christians not only opposed infanticide, abortion, and abandoning children, they cared for the sick. Their particular circumstance or who they were––Christian or pagan––made no difference. They followed Christ’s example of healing the blind, lame, deaf, palsied, and lepers. In every healing, Christ was also concerned for the individual’s spiritual wellbeing. This was in drastic contrast to the Greco-Roman world.

Biblical teachings are infused into the charitable acts of health and healing: “In everything I did, I showed you that by this kind of hard work we must help the weak, remembering the words the Lord Jesus himself said, ‘It is more blessed to give than to receive’” (Acts 20:35). This verse relates to Jesus’ model of *integration* of religion and society and advancing the kingdom. The concept of helping the weak––it is impossible to imagine anyone who is more fully embodied by this phrase than Jesus.

**History of the Issue: Christian Foundations of Health Care**

In his seminal book, *How Christianity Changed the World* (Zondervan, 2004), Alvin J. Schmidt lays the foundations of what can be argued as the rise of truly civilized human society. Schmidt addresses eight main points that Christ profoundly influenced: Transformation of people, Value of human life, Charity, compassion, hospitals, and health care, Education, Labor and economic freedom, Science, the Arts, Holidays, words, symbols, and expressions (p. 1). Because of the severe persecution during early Christianity, for three centuries Christians could only care for the sick as they found them. It was not until A.D. 369 that the first hospital was built.

Schmidt reminds the reader that, prior to Christ, our human world was in pagan hands.

Quoting Dionysis (Epistle 12.5), Schmidt asserts that “The pagans thrust aside anyone who began to be sick, and kept aloof even from their dearest friends, and cast the sufferers out upon the public roads half dead, and left them unburied, and treated them with utter contempt when they died” (p. 6).

Schmidt’s eight points are clear examples of how God raised up change agents from pagan depravity. Of particular fascination for me is the way that Christian thought changed humanity’s entire view of healing illness (p. 6). The fear and contempt towards the sick during the Alexandrian Plague reminds me of the way many in our contemporary society initially regarded sufferers of COVID-19. Mistrust of others led to social isolation; older people––due to their vulnerability––were scorned and blamed for causing the lockdowns of cities and towns. I believe that God’s “change agents” (medical researchers, public health leaders) created a rapid shift in prevention and treatment that protected our society from accelerated aggression against those ill with (or deemed susceptible to) the virus.

**Exemplars of Early Christian Health Care**

Certainly, the first and primary exemplar of health care was Jesus Christ. In Matthew 25:45, Jesus said, “Whatever you did not do for one of the least of these, you did not do for me.”

According to Schmidt, “Evidence indicates the hospital included rehabilitation units and workshops that allowed unskilled patients to learn a trade during recuperation. This shows an even higher level of humanitarian awareness, further exemplifying the spirit of Christ in His followers” (p. 6).

Christian hospitals continued to be built either as separate units or attached to monasteries and, by 750, had spread from Continental Europe to England. Christianity also initiated the establishment of mental institutions and the nursing profession. In addition, according to Schmidt, the Red Cross organization has its roots in Christian principles.

Abell (2019) discusses the provision of healthcare as a form of ministry, noting that “the Daughters of Charity are known for caring for individuals since 1633” (p. 2).

**Applicable Principles**

Dr. David Ward (2014) places the integration of religion and society (and thereby healthcare) within an *interdisciplinary* context. Ward views separate disciplines, such as sociology, biology and history as both specialized domains and traditions (p. 29). Ward argues for the need for a Christian approach to interdisciplinary research inclusive of Christianity’s historical relation to major intellectual movements. The social sciences created a bridge between natural sciences and the humane disciplines (p. 30). Christianity, as the original social science, is therefore well situated upon this interdisciplinary bridge of the integration between religion and society.

As described in the above section of this paper titled “History of the Issue: Christian Foundations of Health Care,” the very concept of caring for the sick (rather than casting them aside) forever changed human society by encouraging and fostering compassionate care.

In American society, healthcare is deemed a right. McIlroy (2021) asked probing questions regarding Christianity and human rights. According to McIlroy’s video lecture, the 17th century British philosopher John Locke’s philosophy became an unofficial guiding philosophy: to protect the rights that individuals possess. While his tenets were broad and did not specifically address healthcare, Locke brought human rights into sharp social focus. It can therefore be accepted that his philosophy contributed to the acceptance of healthcare as a basic human right.

The creation of hospitals and healthcare is one of the finest examples of positive social change. Social change is, as stated by the Reverend Ehisienmen Charles (2021) in his journal article titled Religion and Social Change, **“**Religion plays a significant role in the lives of people all over the world and religious practices of some sort are evident in every society. That makes religion a cultural universal along with other general practices found in every culture” (p. 38).

Reverend Charles puts a fresh perspective on the revival of Spiritual awakening and social reform. While I realize that OGS emphasizes Christian religious principles, I agree with Charles that religion truly is a *cultural universal*. And, since religion is evident in every society, I recognize religion’s power to influence social reform. However, there was a variant aspect pertaining to my uncertainty about what constitutes a “revival” of Spiritual awakening. Nonetheless, Rev. Charles has sparked in me a curiosity to further explore the “revival” aspect of Spiritual awakening.

Abell (2019) remarks that, “Throughout the history of the church, ministry to the members has played an important role. Early Christians ministered to those who were sick in order to demonstrate God’s love” (p. 2). Abell frames healthcare as a form of *ministry*. When viewed in this light, I can see how the motives for ministering to the sick might carry a higher purpose and calling than simply tending to the sick out of guilt or pity. Doctors sometimes refer to their choice of vocation as a “calling” which brings to mind Os Hillman’s seminal video lecture, *The Joseph Calling Overview* (2013). In this lecture, Hillman writes about adversity as a necessary step in discovering one’s true purpose or calling.

According to Iremadze (2020) “…an individual who does global healthcare work connects the concept of justice to Image of God and the dignity of all people in how he puts justice into action in his social enterprise” (p. 190). Through the provision of healthcare, one can witness the kingdom of God directly affecting social change.

Kumar (2022) asserts, **“**Religion is widely regarded as a social force that shapes entrepreneurship and business (EB) activity, behavior, and practice” (Abstract). Thus, although modern healthcare operates on a business model, it nonetheless remains a social force.

God raises up change agents for His purposes. Farhaj (2021) illustrates this fact, writing that the receipt of adequate healthcare in rural areas is largely based upon social determinants (e.g., lack of health insurance, lack of easy access to a health facility; mistrust of the medical system): “Evaluative research studies have been conducted, for example, of programs utilizing the resources of faith-based organizations to address the detrimental effects of these social deficits on health, and such programs have been largely effective” (p. 9).Farhaj also convincingly argues that faith-based organizations help reduce the disparity through religion’s positive effects on physical and mental health, along with the social support system inherent within a religious community (p. 9). Farhaj makes an outstanding point that “Faith-based organizations provide education, social services, rehabilitation of offenders, and other services that help to ameliorate the health effects of socioeconomic disadvantage” (p. 13). Faith-based organizations provide social resources. Thus, all healthcare––as a *direct linear descendant of Christian philosophy*, provides social resources and thereby perpetuates positive social change.

**Conclusion and Contextualization**

My research resources have helped me to think of healthcare in terms of ministry. When viewed in this light, I can see how the motives for ministering to the sick can carry a higher purpose and calling than simply tending to the sick out of guilt or pity.

The work I do with our Hospital Foundation is 100% voluntary. Our organization has no paid staff; we give of our time and money because it feels good to make a difference for our community. It warms the heart to know that we are helping the weaker among us––the sick and injured, many of whom cannot afford to pay for healthcare. We Foundation volunteers have aligned ourselves with something Higher than ourselves; we are aligned with Spirit.

Our Hospital Foundation is a nonprofit entity that raises money for a public, nonprofit community hospital. Therefore, in a sense, the Foundation is “entrepreneurial” because it was founded as a self-started enterprise. Similarly, the hospital is technically a “business” even though its primary role is that of a community resource that serves a clientele regardless of their ability to pay for those services. Thus, the Christian concept of providing charity care is consistent with that of our hospital. The concept of charitable health care therefore enables me to flourish in my role as a Hospital Foundation director. The hospital that I serve offers what it calls “charity care” to community members who are uninsured and cannot afford out-of-pocket medical care. Thinking back to the mission of the Daughters of Charity, I am personally proud to be carrying on a centuries-long history that is rooted in Christian principles.

Local politics can influence agencies that provide healthcare. Secular encroachment into public life has gained dominance. Mack (2016) [Seminal] writes that the American political system was founded on the belief that there is a need for the separation of church and state, but that hasn’t kept religion out of politics. On the contrary, religion still plays a huge role. According to the Pew Research Center, the majority of voters want their president to have strong religious beliefs, and those same voters also say a candidate's lack of faith, would influence their vote.

Specific religious references are prohibited in my professional interactions due to the secular nature of our public healthcare district. Nonetheless, I am comforted to know that the roots of today’s society and laws are rooted in sacred texts from Judeo-Christian history. As a volunteer director of our Hospital Foundation, I embrace a sense of calling; this will also help me maintain focus and handle challenges, reminding me that I am serving a higher power.

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