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# THE PERCEPTION OF GASHUA CHRISTIAN COMMUNITY ON DIVINE HEALING

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## ABSTRACT

*Divine healing is one of the controversial belief systems in Christianity. Several studies have examined the concept of divine healing but neglected the individual perceptions of the Christians in the northern part of Nigeria on the subject matter. This study, therefore investigated the perceptions of Gashua (Yobe State) Christian community on divine healing. The study was anchored on health belief model and theory of care-seeking behaviour and adopted descriptive survey design. Data were collected through quantitative method. This involved questionnaire survey of 102 respondents. The questionnaires were analysed using frequency distribution. Form the analyses of the sampled respondents, 59.80% were male; 40.20% were between the age of 20 years and 29 years; 17.65% were members of the Evangelical Church of Wining All; 39.22% were Choristers; 34.31% claimed their health were very good and 68.62% engaged in prayer and hospital as means of getting healing-Further analyses show that 67.65% were strongly aware of divine healing; 62.75% said it is healing through prayer; 29.41% strongly agree that sickness brings glory to God and benefit to the sick; 42.16% strongly agree that divine healing should be sought by Christians; 65.68% strongly agree that divine healing is more perfect, 73.53% strongly agree that divine healing is part of salvation plan of God; 41.17% agree that God uses prerogative of mercy in giving divine healing 56.86% strongly agree that sin hinders divine healing and 50.00% strongly agrees that churches have roles to play in divine healing. Practice, teaching and preaching on divine healing as well as re-orientation of Christians on divine healing were recommended in the study.*

**Keywords: Perception, Gashua Christian Community, Divine Healing, Faith, Miracles.**

## INTRODUCTION

The concept of divine healing is one of the most controversial concepts in Christianity as a religion and Christendom as people who practice it. The other most controversial concepts are speaking in tongues and tribulation at the end times. Divine healing meant different thing to different Christian denominations and to different persons that are practicing Christianity. Some Christians are ignorant of what divine healing is and therefore cannot claim divine healing when sick. There are also some churches that do not believe in divine healing; therefore, they do not practice it, teach it or preach it in their churches. Some churches believe in divine healing but do not practice it due to one reason or the other. It is based on the above, that this study investigated the perceptions that Christians living in Gashua community of Yobe State have about divine healing. The study investigated their awareness on divine healing and their different perceptions on it.

## LITERATURE REVIEW AND THEORETICAL FRAMEWORK

This section discusses the literature relevant to the study. Christians' wrong view on sickness, meaning of divine healing, divine healing: part of salvation plan, views and models on divine healing, reasons divine healing is becoming increasingly popular, methods of divine healing. types of divine healing, hindrances to healing and types of healers, churches responsibility in divine healing were discussed. Finally, theoretical framework was also discussed using health belief model and theory of care-seeking behaviour

### Christians wrong views on sickness

In the beginning, it was not the will of God that man should die spiritually or physically. But, the sin of man brought spiritual and physical death. Man was under the sentence of death. Anderson and Talchow (n.d) argued that the very day that Adam sinned, his spiritual life ceased. His relationship and communion with God who gave him life of his immortal spirit was broken. Adam became spiritually dead. The spirit of Adam was not extinct but he was separated from God who provided him life. Adam's body was placed under sentence of death but did not die until many years afterwards.

Since the time of fall of man, sickness has been what devil and his cohorts are using to inflict pain and sorrow on human beings. Hence, personal sin, curses, witches, demons and other forms of evil are responsible for ill-health (Agbaji and Landman, 2014). Sickness emanates from spiritual curses (Sharpley and Kauda, 2020). According to Anderson and Taichow (n.d). God never sends sickness to men. All sickness comes from Satan. For Christian to have any form of sickness is to fall under temptation of Satan. However, healing was part of Christ's glorious gospel for a sinful and suffering world for all who believe and receive his word (Curtis, 2007).

Human body is the temple of the Holy Spirit. It serves as hallowed inhabitance. It must get rid of every iniquity and corruption. Body is either the dwelling place of God or the dominion of the devil (Curtis, 2007). To Curtis (2007) sickness represents devil.

There is a wrong belief among some Christians termed passive resignation. It has been attributed as a requisite way for Christians to cope with bodily suffering. It has been linked with acceptance of physical affliction as a spiritual holiness (Curtis, 2007).

It was a wrong conviction that illness brought glory to God and benefit to the afflicted. Some Christians believe that sickness has been sent for good. It is an erroneous understanding of God's will regarding bodily illness and health. God is willing for the health of his people not their hurt. The only way to glorify God in sickness is to give Him a chance to manifest his power in destroying the sickness (Curtis, 2007).

**Meaning of divine healing**

Healing, according to Klaasen (2023) is the process, procedure and methods towards an improved state or position of a person within a community. It is a wholistic movement from suffering and illness to a state of well-being which includes both physical and spiritual restoration. However, various ways exist through which healing from suffering and illness can be achieved. Divine healing or faith healing is one of them.

Divine healing or faith healing is one of great importance and of universal interest. This is the reason many sick people who have long been searching vainly for a cure of their physical ills look upon healing mission or to person who claims to have healing power (Wick, 1958). Divine healing is a form of alternative therapy that arouses strong emotion (Martin, 1986). Divine healing is the healing without the use of drugs (Folarin, 2017). It is a central component of all religious systems and aims to restore health and wholeness and alleviate suffering. It involves physical, psychological, social and spiritual dimensions. It involves miraculous supernatural interventions to manipulating metaphysical energies to re-ordering human relationships and societies. It is the presence of a supernatural power which can restore the natural order (Dein, 2020). It involves fixing human problems within divine principles (Amunnadi and Arum, 2022).

Divine healing or faith healing is a method of treating illness through faith rather than medical methods (Sharma et.al., 2020). It involves using divine power to cure mental or physical disabilities (Sharma, et al, 2020). Divine healing is now part of a much more extensive effort to revise the ways Christians interpreted and dealt with illness and somatic distress (Curtis, 2007). Secular organizations such as world health organization are increasingly embracing spirituality as one of the social determinants of health and now encouraging the physicians to ascertain the religious orientations of their patients (Sharpley and Kaunda, 2020).

**Divine healing: part of salvation plan of God**

Curtis (2007) explained that divine healing is part of the glorious gospel of salvation to the suffering and sinful world for all who believe and receive his word. According to Dein (2020), sickness is often attributed to demonic activity. These demons are seen as servants of Satan. The health of the body, in which God takes great interest is linked with the welfare of the soul. Divine healing is connected with the inner spiritual life as well as the other physical life God healed both body and soul. He renewed body with a new hope (Vick,1958). Physical and spiritual prosperity are often mentioned together in the Bible (Vick,1958). The prosperity gospel interprets health and material prosperity as evidence of faith- health and wealth are viewed as gifts of the spirit and central to charismatic worship. The health and material prosperity are the rightful rewards for the Christian faithful but these need to be claimed as part of the salvation packaged provided by Christ (Sharpley and Kaunda, 2020)

**Views and models on divine healing**

There are views about divine healing. The views can be broadly categorized into three groups. Some people, doctors in particular, regard all healing as a biophysical process and deny the possibility of any kind of divine or supernatural intervention. To these people, where divine healing is claimed, any change in a sick person's state of health is assumed to be ultimately understandable in physical, psychological or social terms (Martins, 1988).

The second group of people considered divine healing as "fill in the gaps". It is considered as acts of healing which are not explicable in terms of our current knowledge of medicine. They are believed to have been mediated by God. Unfortunately, as research closes the gaps in medical knowledge, God appears to be edged out or at least to become less active (Martin, 1986).

The third view of healing is that God does not have to be specially induced to act in selected cases but is continually involved, working through the laws of nature to bring about the healing process. Atonement with God through prayer is seen to provide a flow of energy to the patient, doctors and clergy could work in partnership in everyday healing practice (Martin, 1986).

In Africa, African world view on divine healing does not place spirit and science in a hierarchy in terms of healing. Many African religions (including Christianity) refute the scientific healing process and replace it with supernatural approach that places the spirit above the biomedical dimension of sickness and illness.

The new Christianity takes seriously the African world view when the spiritual, the psych-social and biomedical are formed in a continuous whole within the context of healing (Klaasen, 2023).

Models also exist in divine healing. Two models developed after the emergence of Pentecostalism. The first model is called "Revelation Model". Practitioners of the revelation approach came to expect that God would give them special knowledge. He would show them what need were present or who was being healed. God reveals information upon which the healer can act (Folarin, 2017).

Kathryn Johanna Kuhlman was one of the proponents of this model. She claimed she had nothing to do with the healing in her ministry, to her, God performs miracles according to his purposes and plans about what she knew absolutely nothing. The Holy Spirit only gave the revelation to her only what God had done (Folarin, 2017).

The second model is called "soteriological model". According to this model, Christ has paid for Christians healing through his atoning work. The model locates the attack on illness within the doctrine of salvation. Example of the proponents of this model is Oral Roberts. According to him, healing is in the atonement of Christ. According to him, certainty and sovereignty exist in process of divine healing. Certainty is the state of the mind of the patient where the sick is convinced that God is able and willing to heal now. Sovereignty though painful and disappointing, is the prerogative of God to decide who, at the end of the day, is healed. To

Oral Robert, divine healing is more than spiritual, more than mental and more than physical (Folarin, 2017).

**Reasons divine healing is becoming increasingly popular**

More people are turning to Christian faith healing now. Christian religious healing has therefore become an increased acceptance (Kpobi and Swartz, 2018). The increasing using of faith healing services could be partially attributed to the rising awareness in its complete healing process (Peprah et.al., 2018). In Africa, the African world views influence on the rapid rise of new forms of Christianity formed the basis for emerging approach to divine healing (Klaasen, 2023). Curtis (2007) argued that the teaching and practice of faith cure played a crucial role in shaping how some evangelicals conceptualized and carried out their services. Hence, faith cure is made popular by evangelism.

The Pentecostalism movement emphasizes healing. Divine healing has been a central tenet of faith and practice. Healing is an important factor in attracting people to the movement and is also responsible for its wide spread appeal. Pentecostalism, therefore, is responsible for increase in divine healing and vice-versa (Dein, 2020). The epidemic and other sickness in the western world was other factors responsible for the spread of divine healing after the World War I. From that time, many holiness and Pentecostal churches began to canvass for complete reliance on the power of God for healing without using medicine (Folarin, 2017). Furthermore, the limitation of scientific approach to healing, such as neglect of spiritual dimensions of sickness also plays important role in spreading divine healing (Klaasen, 2023).

Although, divine healing is a reaction to a modern health care culture that clearly ignores the religious value on healing (Agbaji and Landman, 2014). Yet many still engage inmedical pluralism. For instance, Kpobi and Swartz (2018) reported that in a study conducted in the past, 89% of Ghanaian tertiary students had utilized more than one form of health care in the past (using herbs, spiritual healing and biomedical drugs). This is medical pluralism. Sharma et.al (2020) argued that African countries typically involves making use of multiple healing systems, including indigenous and faith healing as well. This is putting trust in religious practice as a source of healing alongside biomedical modes of cure (Bosire et. al., 2021)

**Methods of divine healing, types of divine healing, hindrances to healing and types of healers**

The methods involve in divine healing in Pentecostal and faith healing churches are similar. Peprah et.al. (2018) argued that healing in a divine way involves prayer, laying of hand on patients and providing holy-water. Ademiluka (2023) explained that divine healing is gotten through fasting, prayer and spoken words especially from the recitation of psalms in the Old Testament. Munsi (2019) argued that divine healing comes to pass through miraculous supernatural interventions and the manipulation of metaphysical energies. Dein (2020) on his ownreinstated that use of prayer, oils and holy-water alongside spiritual counselling for patients will bring divine healing. Dein (2020) also included ritual and the reading of religious texts. Agbaji (2014) argued that approach of faith healing is centred on prayer, prophesy, vision, music and protection from evil.

Bosire et al (2021) posited that methods of divine healing involves reading portions of the Bible, praying, going to church and water rituals, which are forms of healing used within

Christian traditions. Kpobi and Swartz (2018) explained that methods employed during divine healing include prayers, fasting, deliverance/exorcism, as well as spiritual directives of required behaviours. Sharma et al (2020) strongly mentioned prayer and other divine interventions as ways through which divine intervention can be gotten.

Types of divine healing also exist. Divine healing according to Dein (2020) is divided into three categories. The first is spiritual healing, while Pentecostals believe in physical and social-emotional healing, they are only secondary aspects. The major healing is becoming closer to God. It involves overcoming perceived barriers to divine intimacy which include personal sins and demonic influence.

The second stage type of healing is inner healing. It results in greater acceptance of self, emotional healing and healing of interpersonal relationships. It can also be termed healing of memories or emotional healing. The third is the ability to discern the presence of evil spirits or other causes of illness. It is seen as gift of prophecy. It operates on the level of spiritual intuition rather than human mind.

Divine healing can be hindered. Sin is one of the hindrances to access divine healing. Vick (1958) argued that the person seeking healing must be prepared to put away sin and must commit himself to God's will. Unbelief or lack of faith is another hindrance. There is a correlation between belief and healing (Klaasen, 2023). The sick must have faith in the word of God. Faith influences the notion of health and healing. Good health is a consequence of faith in God (Sharpley and Kaunda, 2020).

Divine healing is usually validated in the western countries of the world like United States of America, Britain and Scotland. This can be done through committee of the local church who judge whether the gift and healing are genuine. In America, divine healing is formalized and validated by a professional organization known as Association of Christian Healers most who are medical doctors (Marim, 1986).According to Vick (1958), there are seven tests by which it can be decided whether healing is of divine origin and by divine power or not. They are highlighted below according to Vick (1958):

1) Does the occasion of the healing bring conviction of sin and desire to turn away from it?
2) Is everything done with solemn dignity and without sensationalism?
3) Were any preliminary inquiries made as to the prospects attitude to sin?
4) Is genuine faith and a desire to do God's will exhibited?
5) Are the Bible conditions of prayer followed?
6) What attitude does the healer take toward the medical profession?
7) What sort of attitude does it produce in the minds of those who believe in it?

Two types of healers have been identified as related to Graeco-Roman context of the first century. The first are the so-called professional healers. Professional healers healed people through therapeutic regimes of self-analysis, confession and forming correct beliefs about the world. The second type of healers is "folk healers" who were the ordinary people who knew the folk wisdom and utilized it for healing. Jesus's role is commonly understood as that of a folk healer who acted perfectly according to folk's tradition of his Middle Eastern Culture (Ademiluka, 2023).

**Churches' Responsibility in divine healing**

Churches have responsibilities to carry out in divine healing. God works out divine healing through his body (churches) which are the channels through which he ministers healing to his ailing people. Churches have roles to play both physically and spiritually. God has given every believer a special gift so that they can all come together to serve Him very well. The churches have the function of meeting both the physical and spiritual needs of the believers (Bawa, Ayim and Basiru, 2021). Of all these needs, the spiritual needs are the most important since they manifest in the physical and emotional needs of the people (Bawa, Ayim and Basiru, 2021).

In ministering divine healing to believers, believers do believe that their pastors had been given the power by God to overcome illness. It is usual for pastors to call for those who need healing and deliverance to come forward for the laying of hands on them so that they can receive healing and good health (Sharpley and Kauda, 2020). Pentecostal faith healers didn't charge any money for the healing. If the healed person wanted to give, some might take the money, while some refuses to take or said to donate such to church (Sharma et al, 2020).

**Theoretical Framework**

This study was anchored on health belief model and theory of care-seeking behaviour.

**Health Belief Model**

Health Belief Model was originally developed to explain preventive behaviours, but also has been used to study illness behaviour. The variables central to this model include: perceive susceptibility and perceived severity of a disease or condition barriers and benefits to action, a cue to action and general health motivation (Lauver, 1992).

According to Lauver (1992), sick people would be more likely to engage in behaviour if they had high perceptions of susceptibility to and severity of a disease or condition, low barriers and high benefits to engaging in a related preventive behaviour, a cue to act, and a high motivation for health behaviour in general.

**Theory of care-seeking behaviour**

A theory of care-seeking behaviour was developed based upon Triansi's theory. Theory of care-seeking behaviour explains that the probability of engaging in health behaviour is a function of psychosocial variables (affect, expectations and value about outcomes, habit and norm) and facilitating conditions regarding the behaviour (Lauver, 1992).

Affects refers to feelings associated with care-seeking behaviour i.e. anxiety about a serious diagnosis or embarrassment about an examination. Expectations refers to beliefs about the likelihood of relevant outcomes of care seeking and values refer to the importance of those outcomes (Lauver, 1992).

Normative influences according to Lauver (1992) include social and personal norms as well as interpersonal agreement to engage in care-seeking. Personal norms are one's own beliefs about morally correct behaviour regarding care-seeking and social norms are others'beliefs about care-seeking. Habit, according to Lauver (1992) refers to how one usually acts when one has symptoms. Habit reflects one's usual care-seeking behaviour and reflects past experience with care-seeking. Facilitating conditions are specific, objective, external conditions that

enable one to seek care. The below is the theoretical framework which emerged from the two theories.

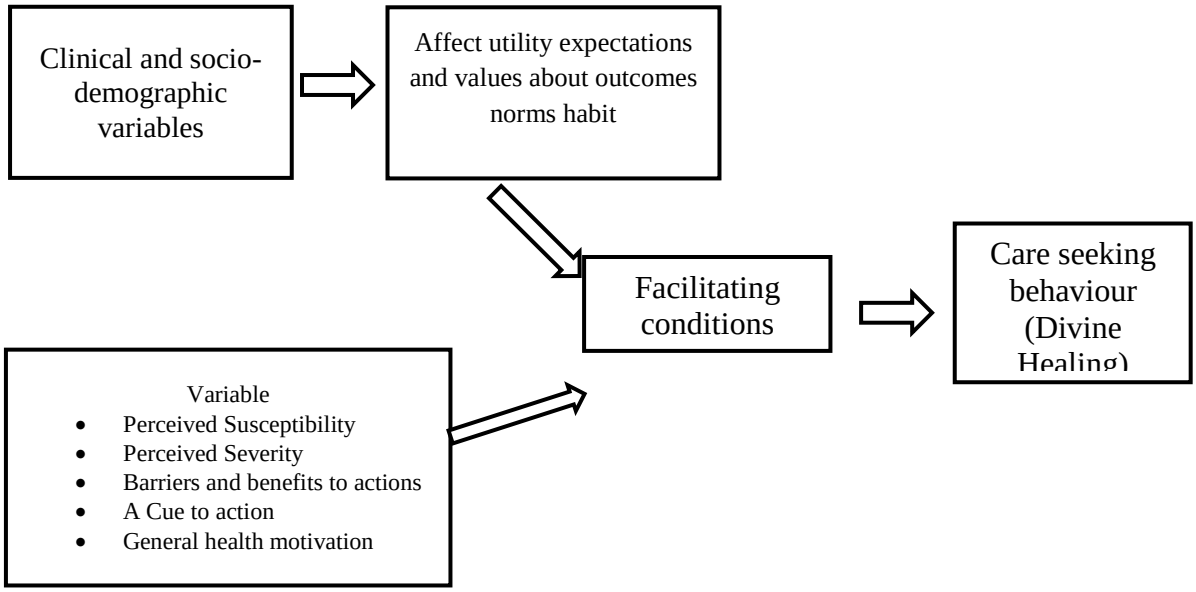



Fig 1: Emerging Theoretical Framework

Under care-seeking behaviour theory, clinical and socio-demographic variables (Box A) will determine the affect, utility (expectations and values about outcomes, norms and habits (Box C). These will in turn determine the conditions that will facilitate care-seeking condition (Box D) and eventually the care-seeking behavior e.g divine healing.

Under health belief model (Box B) variables like perceived susceptibility, perceived severity, barriers and benefits to action, a cue to action and general health motivation are the factors which determine the facilitating conditions that will make believers to seek for divine healing which is a care-seeking behaviour.

## METHODOLOGY

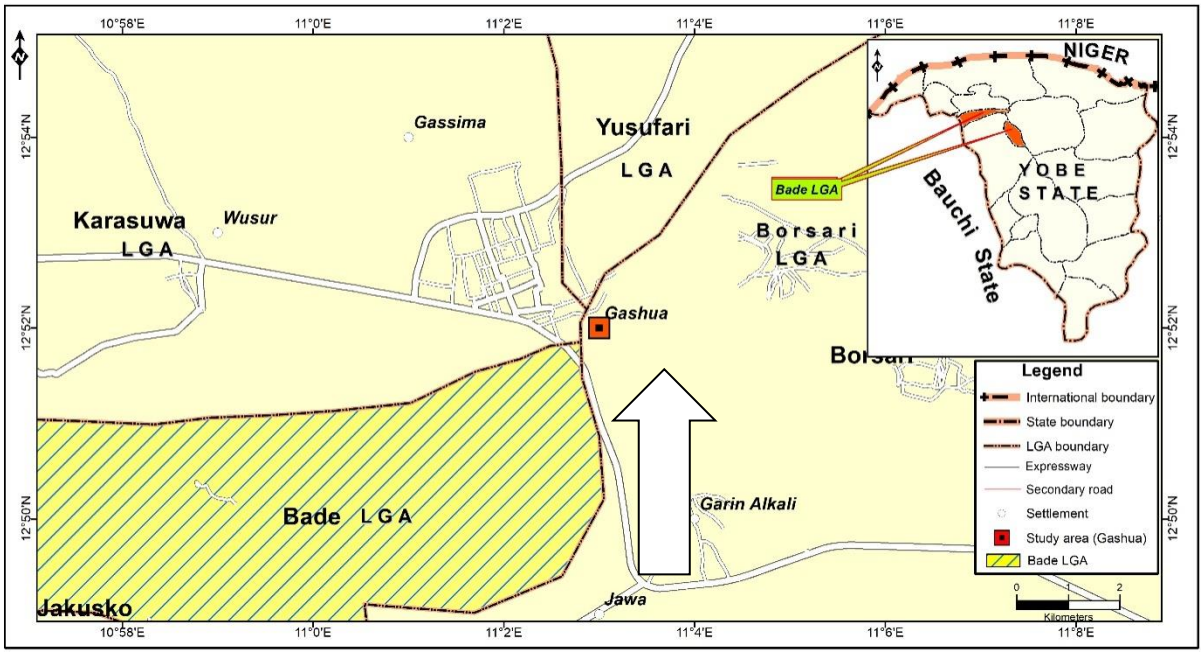
This section discusses the research design used for the study, the study area, the study population, sampling technique/method and the sampling size, method of the data collection for the study, the method of data analysis employed for the study and the ethical issues observed.

### Research design

This study adopted survey design. Collection of information from a sample of individuals was involved (Schutt, 2004). Quantitative technique was employed in the study.

### The study area

The research was carried out in Gashua community of Bade Local Government Area of Yobe State. The MAP below shows the community where the study was carried out.




**Arrow indicating the community where the study was carried out**

**The study ppopulation**

The population of study comprised of all Christians adults living in Gashua community of Yobe State. These were Christians both male and female, 15years and above who were indigenes and those who came from various ethnic groups in Nigeria to settle in the community.

**Sampling technique and Sampling size**

Sampling was necessary for the study because studying every single instance was beyond the means of the researcher. Sampling helps to improve the quality of the data. Multi-stage sampling was used in this study.

**Churches**

The sampling procedure started with the churches. Probability sampling technique (Simple random sampling method) was used to select the ten churches which participated in the study. Lottery method was used under simple random sampling. Under simple random sampling, each church was given equal probability of selection (Adler and Clark, 1999).

**Respondents**

The respondents who participated in the study were purposively selected because they served the interest of the research. Purposive sampling uses the judgement of an expert in selecting cases with purpose in mind. In purposive sampling, the researcher selects sampling units based on his/her judgement of what units will facilitate an investigation (Adler and Clark, 1999 and Neuman, 2003). For the sample size,one hundred and two respondents were selected for the study.

**Method of data collection**

The primary data were collected with the use of questionnaire. One hundred and two (102) copies of questionnaire were administered among the church members from the selected churches.

**Method of Data Analysis**

The quantitative data were from the questionnaire administered. Copies of the questionnaire for the study were first sorted and those that needed cleaning were attended to. In order to minimize errors, data from the questionnaire were coded. The analysis of data emphasized relative frequencies. Univariate analyses were used in interpreting socio-demographic characteristics of the respondents and their responses to the questions in the questionnaire by using frequency tables.

**Ethical Issues**

Ethics refer to the abstract set of standards and principles that are used to determine appropriate and acceptable social conduct (Adler and Clark, 1999). In the study, the consents of the respondents were sought before the questionnaire was administered. The anonymity of the respondents was also strictly followed. The questionnaire did not require names, signatures, addresses or telephone numbers. The reports from the research were presented in aggregatedata, not in personalized and recognizable form. All the information were strictly kept confidential and used only for the purpose of this study.

**DATA PRESENTATION, INTERPRETATION AND ANALYSIS**

This section discusses the presentation, analyses and interpretation of the data which were collected from the questionnaire administered among the Gashua Christians community. The socio-bio data of the respondents were discussed first before their responses to the various questions which bothered on divine healing.

**Socio-Bio Data of Respondents**

The first Socio-bio data variable examined was the sex of respondents. Table 4:1 below shows the presentation and the analyses of the respondents.

**Table 1: Respondents by sex**

| Sex | Frequency | Percentage |
|---|---|---|
| Male | 51 | 59.80 |
| Female | 41 | 40.20 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

From the above table, 59.80% of the respondents were male while 40.20% were female. Sex/gender is an important factor of health. It is a general health belief that men are healthier than women. Woman biological being is believed to be susceptible to various disease than men. Hence, women tend to have more health challenges than men.

The study also considered the age of respondents. Table2 below depicts the presentation, analyses and interpretation on this.

**Table 2: Respondents by age range**

| Age Range | Frequency | Percentage |
|---|---|---|
| 15 – 19years | 05 | 4.90 |
| 20 – 24years | 41 | 40.20 |
| 25 – 29years | 17 | 16.67 |
| 30 – 34years | 09 | 8.82 |
| 35 – 38years | 09 | 8.82 |
| 40years & Above | 21 | 20.59 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

The above table shows that the respondents between 20 years and 24 years were the highest with 40.20%, this was followed by those who were 40 year and above (20.59%). Those between 25 years and 29 years were 16.67%; those between 30 years and 34 years were 8.82% likewise those between 35 years and 38 years. Lastly those between 15 years and 19 years were 4.90%. Age is an important factor in health-related issues. People that are young are considered healthier. Old age usually causes a lot of health challenges for the elderly people. Hence, health delivery system often factors in age in consideration of health matters.

The study also considered whether respondents were indigenes of Yobe state or not. Table 3 below shows the presentation, analyses and interpretation on it.

**Table 3: Respondent by indigenes**

| Indigenes | Frequency | Percentage |
|---|---|---|
| Indigenes | 09 | 8.82 |
| Non - Indigenes | 93 | 91.18 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

A cursory look at the table above shows that 91.18% of respondents were non-indigenes while 8.82% were indigenes of the state. Gashua community is a host to other people from other states of the Federation. The Federal University in the community has made it a center of attraction for education and job provision. Hence, the influx of other people from other states of the Federation.

The Church denominations of respondents were also taken into consideration in the study. Table 4 below shows the presentation and analyses.

**Table 4: Respondents by church denomination**

| Denomination | Frequency | Percentage |
|---|---|---|
| Anglican | 10 | 9.80 |
| Baptist | 10 | 9.80 |

| | | |
|---|---|---|
| CAC | 11 | 10.78 |
| RCCG | 11 | 10.78 |
| Catholic | 06 | 5.88 |
| COCIN | 09 | 8.82 |
| DLBC | 01 | 0.98 |
| ECWA | 18 | 17.65 |
| EYN | 07 | 6.86 |
| Living Faith | 13 | 12.75 |
| RCCG | 11 | 10.78 |
| Others | 06 | 5.88 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

From the table 4 above, Evangelical Church of Winning All had the highest percentage with 17.65%, this was followed by Living Faith Church (Winners Chapel) with 12.75%. both Christ Apostolic Church and Redeemed Christian Church of God had 10.78% each. The Anglican Church and the Baptist Church had 9.80% each. COCIN (Church of Christ in Nations) had 8.82%; EYN (Church of Brethren in Nigeria) 6.86%; Roman Catholic Church and respondents from other denominations whose churches were not in Gashua community had 5.88% percent each. Finally, respondents from Deeper Life Bible Church had 0.98%. Denominations of the respondents were very important to the study. Different Church denominations have different doctrines pertaining to Biblical belief and practice, which also included divine healing. Hence, the study cut across different church denominations with different doctrinal belief and practice regarding divine healing.

The positions occupied by respondents in their churches were also considered. Table 5 below depicts presentation, analyses and interpretation of data on this.

**Table 5: Respondents by position held in church**

| Position | Frequency | Percentage |
|---|---|---|
| Pastorate | 0 | 0 |
| Eldership/Deaconship | 15 | 14.71 |
| Chorister | 40 | 39.22 |
| Usher | 06 | 5.88 |
| Teacher | 07 | 6.86 |
| Ordinary Member | 28 | 27.45 |
| Others | 06 | 5.88 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

A cursory look at the above table 5 shows that 39.22% of respondents were choristers; 27.45% were ordinary members; 14.71% were elders/ Deacons; 6.86% of them were teachers and 5.88% of them were ushers and 5.88% occupied one position or the other not listed in the questionnaire. No pastor featured among respondents who participated. Positions in churches carry responsibilities and this is often based on the spiritual maturity of the

occupants. Belief in divine healing comes with spiritual maturity and this can be aided by positions occupied in the church.

The study investigated the health conditions of respondents. Table6 below contains the presentation, analyses and interpretation of data on it.

**Table 6: Respondents' health condition**

| Health condition | Frequency | Percentage |
|---|---|---|
| Excellent | 33 | 32.35 |
| Very Good | 35 | 34.31 |
| Good | 25 | 24.51 |
| Averagely Good | 08 | 7.84 |
| Poor | 0 | 0.00 |
| Very Poor | 01 | 0.98 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

Table 6 above shows that 34.31% of respondents claimed that their health conditions were very good; 32.35% said they were excellent; 24.51% said their health conditions were good, 7.84% said the they were averagely good and 0.98% said it was very poor. The perceptions people have about their health conditions will determine susceptibility, severity and motivation to seek healing (Lauver, 1992).

The study also investigated how respondents get healing when sick. Table 7 shows the resultsof analyses.

**Table 7: Respondents' ways of handling healing**

| Ways of healing | Frequency | Percentage |
|---|---|---|
| Prayer, Faith, Grace | 05 | 4.90 |
| Orthodox medicine | 05 | 4.90 |
| Prayer & Orthodox | 20 | 19.61 |
| Hospital | 02 | 1.96 |
| Prayer & Hospital | 70 | 68.62 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

The analyses from the table 7 show that 68.62% of them combined prayer and hospital treatment together; 19.61% said it was through prayer and orthodox ways; 4.90% said it was through prayer, faith and grace and finally, 1.96% relied on hospital treatment. The highest number of respondents who combined divine healing (prayer) with hospital treatment/orthodox shows that many of them engaged in medical pluralism. Sharma et. al (2020) claimed that African countries make use of multiple healing system which include indigenous and faith/divine healing as well. It is a way of trusting in religious practice as a means of healing alongside with bio medical modes of care as noticed by Bosire et. al (2021).

**4.2: Respondents Perceptions on divine healing**

The awareness of respondents on what divine healing is,was questioned in the study. Table 8 depicts the results of the findings on this.

**Table 8: Respondents'awareness about divine healing**

| Level of awareness | Frequency | Percentage |
|---|---|---|
| Strongly Aware | 69 | 67.65 |
| Aware | 27 | 26.47 |
| Somehow Aware | 06 | 5.88 |
| Strongly not Aware | - | - |
| Not Aware | - | - |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In table 8 above, 67.65% of respondents were strongly aware of what divine healing is, 26.47% of them were aware and 5.88% were somehow aware. It can be concluded from the analyses that all respondents had the knowledge of what divine is. This corroborated with Peprah et. al (2018) that divine healing awareness is rising because of its complete healing process and the new form of Christianity (Pentecostalism) formed the basis for its emerging approach (Klaasen, 2003).

The study requested respondents to signify what divine healing really is. The questionnaire allowed respondents to choose more than one option, hence the total frequency was 153 as against 102 respondents who participated in the study. The excess 51 came from those that chose more than one response. Table 9 below shows results of their responses

**Table 9: Respondents what divine healing is**

| What divine healing is by respondents | Frequency | Percentage |
|---|---|---|
| Healing through prayer, fasting and faith only | 96 | 62.75 |
| Healing by taking herbs | 07 | 4.57 |
| Healing through modern medicine (tablet, injection, etc.) | 09 | 5.88 |
| Healing through Meta-physical power | 01 | 0.65 |
| Healing through the move of the Holy Spirit | 40 | 36.14 |
| Total | 153 | 100.00 |

Source: Field Survey, 2024

In table 9 above, 62.75% respondents were of the opinion that divine healing came through fervent prayer, fasting and faith. Among the respondents, 36.14% believed that divine healing occurs through the move of the Holy Spirit in Church services or in another gathering. However, 5.88% opined that it is through modern medication, 4.57% said divine healing came by taking herbs and 0.65% said it is through meta-physical force/power. According to Peprahet.al (2018), healing comes from prayer alongside with fasting and reading of portions of the Bible. The uses of anointing oil and holy (prayer) water may also be involved (Dein, 2020).

Divine healing can also come through the supernatural move of the Holy Spirit. This is miraculous supernatural intervention which involves the manipulation of metaphysical world (Munsi, 2019).

The study requested whether respondents' churches practice divine healing or not. Table 10 contains the results of data on this

**Table 10: Respondents' churches on practice divine healing**

| Response | Frequency | Percentage |
|---|---|---|
| Yes | 96 | 94.12 |
| No | 04 | 3.92 |
| I don't know | 02 | 1.96 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In Table 10 above, 94.12% of respondents claimed their churches practice divine healing while 3.92% said their churches do not practice it and 1.96% do not know whether it is being practiced in their churches or not.

Teaching of the divine healing was also investigated in the study. Table 11 shows the results of analyses.

**Table 11: Respondents' churches on teaching of divine healing**

| Responses | Frequency | Percentage |
|---|---|---|
| Yes | 95 | 93.14 |
| No | 05 | 4.90 |
| I don't know | 02 | 1.96 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

From above table 11, 93.14% claimed that divine healing is taught in their churches; 4.90% said it is not taught and 1.96% cannot really say whether it is taught in their churches or not. Preaching divine healing was also investigated. Table 12 depicts the results of the finding.

**Table 12: Respondents' churches on preaching of divine healing**

| Response | Frequency | Percentage |
|---|---|---|
| Yes | 90 | 88.24 |
| No | 10 | 9.80 |
| I don't know | 02 | 1.96 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In table 12 above, 88.24% of respondents claimed that divine healing is often preached in their churches; 9.80%, however, said it is not usually preached while 1.96% cannot really say whether it is preached or not.

The study sought the opinion of respondents on whether sicknessbrings glory to God and spiritual benefits to the sick or not. Table 13 shows their responses.

**Table 13: Sickness brings glory to God and benefits the sick**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 30 | 29.41 |
| Agree | 28 | 27.45 |
| Somehow Agree | 14 | 13.72 |
| Strongly Disagree | 18 | 17.64 |
| Disagree | 11 | 10.78 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

The table 13 above shows that 29.14% strongly agree that sickness brings glory to God and spiritual benefits to the sick. For the same statement, 27.45% of respondents agree; 13.72% somehow agree with the same. However, 17.64% strongly disagree and 10.78% disagree. It can be deduced from the analyses above that large numbers of respondents hold the belief that sickness brings glory to God and benefits to the sick ones. Curtis (2007) however, was of the opinion that Christians' belief on passive resignation which means Christians should cope with bodily suffering and accept their physical affliction as spiritual holiness is totally wrong. It is a wrong conviction that illness brought glory to God and benefit to the afflicted. God is willing for the health of his people not their hurt (Curtis, 2007): Sickness emanates from spiritual curses (Sharpley and Kauda, 2020).

The study finds out whether Christians should seek for divine healing or not seek for it. Table 14 shows their responses on this.

**Table 14: Sick Christians should seek for divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 43 | 42.16 |
| Agree | 31 | 30.39 |
| Somehow Agree | 16 | 15.69 |
| Strongly Disagree | 11 | 10.78 |
| Disagree | 01 | 0.98 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

From the table 14 above, it can be deduced that 42.16% of respondent strongly agree that Christians should seek for divine healing; 30.39% agree with the same belief; 15.69% somehow agree; 10.78% strongly disagree and lastly 0.98% disagree. Divine healing should be sought by Christians when they are sick. It is part of the salvation plan for the suffering and sinful world (Curtis, 2007). The health of the Christians bodies is linked with welfare of the soul. Divine healing involves healing of inner spiritual life as well as physical life. God's plan is to heal Christians bodies and souls (Vick, 1958). The health and material prosperity rightful

belongs to Christian's faith as part of the salvation plan of God (Sharpley and Kauda, 2020). The submissions of the authors above agree with the findings in this study

Whether the divine healing is more perfect than other methods of healing was also investigated in the study. Table 15 below contains the responses on this.

**Table 15: Divine healing is more perfect**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 67 | 65.68 |
| Agree | 28 | 27.45 |
| Somehow Agree | 06 | 5.88 |
| Strongly Disagree | 01 | 0.98 |
| Disagree | 0 | 0.00 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In the above table 15, 65.68% of the respondents believed that divine healing is more perfect than other means of getting healing when sick; 27.45% of respondents also agree with the same belief; 5.88% somehow agree and 0.98% strongly disagree. From the analyses, large number of respondents believed that divine healing is better and more perfect that any other means of getting healing. This was in tandem with Peprah et .al (2018) that people turning to faith/divine healing because of its complete healing process. Hence, there should be a complete reliance on divine healing without using medicine (Folarin, 2017).

The respondents were also asked whether the divine healing is part of salvation plan of God or not. Table16 shows the analyses on this.

**Table 16: Divine healing is part of salvation plan**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 75 | 73.53 |
| Agree | 23 | 22.55 |
| Somehow Agree | 04 | 3.92 |
| Strongly Disagree | - | - |
| Disagree | - | - |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

From the table 16 above, 73.53% of respondents strongly agree that divine healing is part of the salvation plan or work of God for humanity. In the analyses, 22.55% of respondents also agreewith same statement. This corroborated Curtis (2007) that divine healing is part of the glorious gospel of salvation. Hence, divine healing should be claimed as component of the salvation plan provided by Jesus Christ (Sharpley and Kauda, 2020).

Faith as a prerequisite for divine healing was also investigated in the study. Table.17 shows the responses of those who participated in the study on this.

**Table 17: Faith in God and His word are prerequisites for divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 77 | 75.49 |
| Agree | 25 | 24.51 |
| Somehow Agree | - | - |
| Strongly Disagree | - | - |
| Disagree | - | - |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

It is shown clearly in table 17 above, that 75.49% of respondents strongly agree that faith is necessary for divine healing to occur and 24.51% also agree with the same. Faith is important before divine healing can occur. Unbelief can hinder divine healing. There is a strong link between belief and divine healing (Klaasen, 2023). Good health is as a result of faith in God (Sharpley and Kaunda, 2020). Hence, the findings in this study agree with these authors . The spiritual potency of prayer and fasting in bringing to pass, the divine healing, was also investigated in the study. Table 18 shows the responses made on this.

**Table 18: Prayer and fasting can release power for divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 80 | 78.43 |
| Agree | 19 | 18.63 |
| Somehow Agree | 02 | 1.96 |
| Strongly Disagree | 01 | 0.98 |
| Disagree | - | - |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

A cursory look at table 4.18 above shows that 78.43% of respondents strongly agree that prayer and fasting are crucial in divine healing; 18.63% of them also agree and 1.96% somehow agree with the statement. Lastly 0.98% strongly disagrees with the statement. This was in tandem with Kpobi and Swartz (2018) who emphasized prayer and fasting in divine healing, likewise Dein (2020) and Sharma et.al (2020). Prayer and fasting cannot be ruled out when seeking for divine healing because they are spiritual catalysts in getting divine healing.

The use of anointing and holy water for divine healing was also investigated in the study. Table 19 depicts the analyses on this.

**Table 19: Using anointing oil and holy water can produce divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 55 | 53.92 |
| Agree | 31 | 30.39 |
| Somehow Agree | 08 | 7.84 |

| | | |
|---|---|---|
| Strongly Disagree | 03 | 2.94 |
| Disagree | 05 | 4.90 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In table 19 shown above, 53.92% of respondents strongly agree that anointing oil and holy water can give divine healing to the sick; 30.39% of them also agree; 7.84% somehow agree with the statement. However, 2.94% strongly disagree and 4.90% disagree with the same statement.

Anointing oil and holy water or prayer water are sources through which God works divine healing. Dein (2020) mentioned anointing oil and water as means of getting divine healing and Bosire et .al (2012) emphasized holy water as a form of healing within Christian's traditions. The findings in the study, therefore align with the findings of the above authors.
Laying hands on the sick is another method of getting divine healing. The study also investigated this Christians tradition. Table 20 below shows the analyses of responses on this.

**Table 20: Laying of hands on the sick by an anointed pastor can produce divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 57 | 55.88 |
| Agree | 34 | 33.33 |
| Somehow Agree | 7 | 6.86 |
| Strongly Disagree | 02 | 1.96 |
| Disagree | 02 | 1.96 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In table 4.20 above, 55.88% of respondents strongly agree that when anointed men of God lay hands on sick, they will get healed. From the same table, 33.33% also agree with the same statement; 6.86% somehow agree with it; 1.96% strongly disagree with this and 1.96% also disagree. Peprah et .al (2018) mentioned that laying of hands on sick by anointed men of God can bring divine healing to pass. Hence, it is away of getting through to divine healing. The findings supported Peprah et .al (2018).

The supernatural move of the Holy Spirit in provision of divine healing was also investigated. Table 21 captured the findings on this.

**Table 21:Move of the Holy Spirit can bring divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 75 | 73.53 |
| Agree | 23 | 22.55 |
| Somehow Agree | 01 | 0.98 |
| Strongly Disagree | 01 | 0.98 |

| | | |
|---|---|---|
| Disagree | 02 | 1.96 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

It is clearly shown in the above table that 73.53% of respondents strongly agree that supernatural move of the Holy Spirit can bring about divine healing. In the same table, 22.55% agree with the same statement; 0.98% somehow agree; 0.98% strongly disagree and 1.96% disagree. Most of the respondents, from analyses, believed that the supernatural move the Holy Spirit can bring divine healing to people. This agrees with Munsi (2019) who mentioned thatsupernatural intervention and the manipulation of metaphysical world by Holy Spirit can bring divine healing to the sick.

God uses prerogative of mercy in giving divine healing. This means God may decide to heal some people and not heal some people. Healing depends on his will. The prerogative of mercy in divine healing was investigated in the study. Table 22 shows the results of the findings on this.

**Table 22: God uses prerogative of mercy in divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 38 | 37.25 |
| Agree | 42 | 41.17 |
| Somehow Agree | 7 | 6.86 |
| Strongly Disagree | 3 | 2.94 |
| Disagree | 12 | 11.76 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In table 22 shown above, 37.25% of respondents strongly agree that God uses prerogative of mercy in giving divine healing to people; 41.17% of them also agree with the same statement; 6.86% of respondents somehow agree with the statement. In the same table, 2.94% strongly disagree with the statement and 11.76% disagree with the same. God exercises His sovereignty in deciding who, at the end of the day is healed. He exercises His prerogative of mercy in divine healing cannot be questioned (Folarin, 2017). Hence, the finding in the study corroborated that of Folarin (2017).

The study also considered sin as a hindrance to divine healing. Table 23 shows how respondents responded to this.

**Table 23: Sin can hinder the sick from getting divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 58 | 56.86 |
| Agree | 30 | 29.41 |
| Somehow Agree | 10 | 9.80 |
| Strongly Disagree | 04 | 3.92 |

| | | |
|---|---|---|
| Disagree | 04 | 3.92 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In table 23 above, 56.86% of respondents strongly agree that sin can hinder divine healing; 29.41% of them also agree; 9.80% somehow agree; 3.92% strongly disagree and 3.92% disagree with the statement. God hates sin. Hence, sin must be dealt with to get divine healing. This supported Vick (1958) when he argued that people seeking divine healing must be ready to put away sin and commit themselves to God's will. Otherwise, divine healing being sought may not be provided by God.

The study was of the opinion that churches have responsibilities to perform in process of divine healing. Table 24 clearly shows how research participants responded to this.

**Table 24: Churches have responsibilities to perform in process of divine healing**

| Level of agreement | Frequency | Percentage |
|---|---|---|
| Strongly Agree | 51 | 50.00 |
| Agree | 40 | 39.21 |
| Somehow Agree | 06 | 5.88 |
| Strongly Disagree | 01 | 0.98 |
| Disagree | 03 | 2.94 |
| Total | 102 | 100.00 |

Source: Field Survey, 2024

In table 4.24 above, 50.0% of respondents strongly agree that churches have responsibilities to perform in getting divine healing; 39.21% of them also agree with the same statement and 5.88% of them somehow agree. However, 0.98% of them strongly disagree and 2.94% disagree. Churches have responsibilities to carry out in divine healing. It is a spiritual need of the believers to be divinely healed. Bawa, Ayim and Bastini, (2021) argued that churches have the duty of meeting both the physical and spiritual needs of the believers. The spiritual needs are even more important because they show in the physical and emotional needs of the people (Bawa, Ayim and Bastini, 2012). Many church members do expect their pastors to minister divine healing to the sick (Sharpley and Kauda, 2020).

Respondents who participated in the study were asked to give their brief perceptions on divine healing in an open-ended question. The brief perceptions given were collated and summarized as follow:

1. Divine healing required faith in God and His promises of healing in His words.Without faith it is difficult to get things from God, divine healing included.
2. Divine healing is through the mercy of God. God heals the sick through His mercy and even Sinners because the divine healing may turn them to God. He can exercise His prerogative of mercy to heal, even unbelievers.\
3. Holy spirit causes divine healing to occur. The move of the Spirit of God brings divine healing. It is work of miracle
4. Payer, fasting accompany with faith can bring divine healing to the sick.

5. Divine healing is a result of the suffering of Jesus Christ. His stripes earned us right to divine healing.
6. Divine healing is beyond the human understanding. It cannot be scientifically verified.
7. Divine healing brings comfort, consolation and total restoration to individuals that experience it.
8. Anointed ministers of God carry the anointing that can cause divine healing to occur. God works through His faithful ministers.
9. Some Pentecostal churches do not practice divine healing, yet some their members strongly believe in divine healing.
10. Divine healing is the right of the children of God (their bread). Jesus set example for us. He was moving around, preaching, teaching and healing those that were sick. We should follow his example.
11. God provided herbs for human healing too. It is part of Gods plan for healing. Christians can also exploit the same along divine healing.
12. Divine healing is good but that does not mean that sick Christians should not go to hospital for treatment. God does not like negligence.
13. Divine healing is a practice that the churches should encourage and practice. It is more perfect healing than any other healing.
14. Divine healing is real. However, many men of God and church members are abusing it.
15. Divine healing is part of salvation plan of God that comes through the move of the Holy Spirit.
16. Divine healing is the demonstration of God's power over situations of life and the entire universe.
17. Conventional drugs and medication can cure; it is only divine healing that can heal and make whole permanently.
18. God is a great physician and there are records of how he has healed people in the Bible. He still doing the same today.
19. Divine healing gives a lastly impression that Lord is a might healer.

## SUMMARY OF THE FINDINGS, RECOMMENDATIONS AND CONCLUSION

This section presents the summary of the findings, recommendations and conclusion.

### Summary of the findings

The findings of the study reveal that a very large number of respondents were quite aware of what divine healing is. The answers to followed up question, asked to verify whether they were aware of what divine healing is or not, truly showed that the Gahusa Christian Community were really aware of what divine healing is. A large number of them claimed that divine healing is healing through fervent prayer and the move of Holy spirit.

It was also discovered in the study that churches in the Gashua community practice, preach and teach divine healing. However, a respondent claimed that divine healing is not practiced in the church he/she attends but he/she strongly believed in it.

Many respondents believed that sickness bring glory to God and spiritual benefits to the sick. However, this is Biblically wrong. This is a passive resignation that needs to be discouraged

in the Christendom. God does not willingly inflict sickness on His people. Sickness comes from the devil and the only way to bring glory to God is to allow God to heal the sick.

The study also discovered that a very large number of Gashua Christians community were in support that Christians should seek for divine healing. The responses they made in the study also showed that they believed that divine healing is more perfect than other methods of healing.

A quite large number of respondents believed that divine healing is part of salvation plan of God through the suffering, death and resurrection of our Lord Jesus Christ. Furthermore, they also held the belief that faith is very important and a prerequisite for divine healing.

In the study, a large number of respondents believed that prayer and fasting are also necessary to release the power of God that will bring divine healing. The same was the use of anointing oil and holy water (prayer water). Laying of hands on the sick by anointed ministers of God was also believed by a large number of respondents, to cause divine healing to happen to the sick.

The move of the Holy Spirit was also largely acknowledged by large number of respondents as another divine way through which people can get divine healing. Moreover, it was overwhelmingly acknowledged that God uses prerogative of mercy in healing the sick. He chooses those he wishes to heal among the sick. Not all sick will get divine healing.

Majority of respondents however, believed that sin can hinder provision of divine healing to the sick. Hence, sinners need to repent and be in right standing with God before they can get divine healing.

Finally, large number of respondents believed that churches have responsibilities to perform in process of divine healing. It should be seen as a spiritual need of the believers in churches.

**Recommendations**

The recommendations of this study emanated from the findings of the study. The concept of divine healing should be awakened in churches. Although, many of the respondents claimed they practiced, preached and taught divine healing in their churches. However, it does not seem that they understood the real Biblical concept of what divine healing is. Many of the respondents combined divine healing with other methods of haling. Divine healing is a total healing from God without orthodox or modern medication or the use of herbs. Hence, churches need to go back to the Biblical divine healing by teaching it, preaching it and practicing it.

Secondly, churches need to be re-oriented on the concept of sickness vis-à-vis its origin. Many believers hold the belief that God allows sickness in the lives of the Christians to bring glory to His name and improve the holiness of the sick. Church members should be re-oriented that sickness comes from the devil not from God and God wants His people to be healthy in spirit, soul and body so that they can serve Him with joy and happiness. Portions of the Bible where God promises healing and divine health should be frequently taught to the congregation.

Christians should be encouraged to seek divine healing when sick because it is more perfect and last them other methods of healing. In order to encourage them, the faith of church members regarding divine healing must be built up because faith is prerequisite to access divine healing. Faith for divine healing must be encouraged.

The church members should be made to understand that divine healing is part of the salvation plan of God. The same grace that brings eternal life for the Christians is the same saving grace that is available to heal them of their sicknesses and infirmities. All the means of getting divine healing acknowledged by respondents were Biblical. Churches are encouraged to intensity their practices i.e. use of anointing oil, water, laying of hands, reading portion of the Bible, move of the Holy Spirit, prayer and fasting.

Members should be made to understand that God may often use prerogative of mercy in giving divine healing. He knows better than human beings. Hence, when divine healing is withheld by God, he may have a better plan for the sick. His will should be allowed to prevail. Church members should be discouraged from the living life of sin. Sin hinders divine healing and sin brings sickness to people.

Finally, churches should wake up to their responsibilities both physical ones and spiritual ones. It is the responsibility of the churches to assist the sick to see reasons for the divine healing. The sick should be guided and encouraged to get divine healing.

**Conclusion**

The concept of divine healing still remains a conflictual issue among the Christians. It still remains the area of hot debate. However, Bible should be our guide. The provision of divine healing provided by God as part of the salvation plan of God, through the atonement of Christ remains undisputable. The choice for the Christians whether to claim divine healing provided by God or seek other alternatives when sick, is a matter of individual preference. This depends on the faith and the level of their spiritually. However, it should be understood that for the fact that some Christians opt for the alternative ways of healing does not mean that God has done away with divine healing. God cannot deny His word on divine healing.

Christians should be made to understand that Christ who died to save their souls from eternal destruction also died to heal them. His body was broken with stripes so that those who believe in him can be healed of their sicknesses, diseases and infirmities.

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