

# Some black and Latino Christians rely on religion for healing

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Christians who are comparatively well-represented in the medical field, like Korean-Americans, understand the relationship between faith and health differently than those who are not, like African-Americans and Latinos. Eighty percent of black and Latino Americans interviewed in a recent Rice University study said they believe in the potential healing power of religious faith, while nearly two-thirds of Korean-Americans interviewed said that a religious environment mainly provides support for individuals with regard to health decisions, but made few mentions of prayer or divine healing.

"Heaven and Health: How Black, Latino and Korean Christians View the Relationship Between Faith and Health" appears in an upcoming edition of *Review of Religious Research*. Rice Ph.D students Daniel Bolger and Cleve Tinsley co-authored the paper with Elaine Howard Ecklund, founding director of Rice's Religion and Public Life Program and the Herbert S. Autrey Chair in Social Sciences. The authors sought to learn more about how congregants view the role of church in health promotion.

Bolger, Tinsley and Ecklund examined views on the relationship between faith and health for two groups that are overrepresented in American Christianity and underrepresented in medical careers - African-Americans and Latinos. They also looked at the views of a group that is similarly religious but comparatively well-represented in medical professions - Korean-Americans. The authors said they were motivated to pursue this research by the growing number of studies on

collaborations between churches and [health care providers](#). Such partnerships are often established without consideration of how racial representation in medical professions might shape distrust of medicine in religious communities.

"Each of the groups emphasized the prevalence of health initiatives already taking place in their congregations, ranging from exercise classes to informational seminars," Ecklund said. "But while each group expressed optimism about potential partnerships between churches and medical providers, the groups differed in their views on the relationship between faith and health."

While the majority of blacks and Latinos interviewed expressed confidence in the potential healing power of Christianity, most Koreans interviewed said that a religious environment can provide support for individuals with regard to making [health decisions](#) (such as which doctor to visit for a specific condition), but they did not often mention prayer or divine healing.

Excerpts from interviews with each group are included in the paper.

"Every time that I'm sick, I believe that God can heal my sickness," said one member of a Latino church. Another member said, "I trust medicine a lot. But I think my first choice is God."

Ecklund said that the view of God as the creator of science helped congregants substantiate trust in medicine. One African-American church member said, "I think that God gives us access to certain things to help us to be better, to serve him more."

This did not preclude mistrust on the part of the interview respondents, however, as Tinsley noted: "Narratives regarding distrust of the medical community arose almost exclusively among African-American

respondents. The Tuskegee syphilis experiment seemed to have a notable legacy within this community's cultural memory, as the experiment came up unsolicited."

Korean-American respondents often saw the benefits of religion as practical, as they often downplayed the efficacy of prayer while highlighting the support of the religious community, support that often came from medical professionals within the church. One Korean-American surveyed said about the relationship between faith and health: "I think mostly in terms of just realizing that (congregation members are) not alone, that there is a community out there that will go through it with you type of thing. More of a support I suppose."

Another respondent said that while faith "plays a tremendous role" in coping with the stress that is related to [health](#) issues, it should not necessarily be the "primary way to deal with an actual ailment."

The paper included interviews with 19 church leaders representing 18 different organizations and 28 congregation members as well as observations from three different Christian congregations. The respondents were selected from the Religion, Inequality, and Science Education project, a larger study exploring how minority Christian congregations view science and medicine.

Provided by Rice University

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