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*Evoking the Universal Human Family
in Public Acts of Healing:
Jesus of Nazareth and Virginia Satir*

BONNIE K. LEE*
University of Ottawa, Ottawa

Abstract

This article explores the significance of healing staged as public performances by Jesus of Nazareth and Virginia Satir. Two social science models, social construction of reality and anthropology of ritual, highlight the contribution of collectivities in the deconstruction and construction of worldviews and the legitimization of a change in social status and identity. The author argues that through publicly witnessed and experientially enacted healing acts, Jesus and Satir proclaimed and performed a universal human family that transcends the power of institutional definitions of persons. Within an expanded frame of cosmic and spiritual reference, Jesus' and Satir's public healing acts liberated individuals defined by their societies as displaced and deviant to a new identity of worth and belonging as reclaimed and esteemed members of a universal family of humankind sharing a spiritual heritage. In reconnecting persons to their personal, spiritual, and social resources, Jesus and Satir functioned not only as charismatic healers of their time, but also as spiritual leaders and agents of social change.

* Bonnie K. Lee, Ph.D. is a Lecturer in the Faculty of Education and Postdoctoral Fellow in the Department of Classics and Religious Studies at the University of Ottawa. The Satir material in this article draws from a chapter of her doctoral dissertation, *The Religious Significance of the Satir Model: Philosophical, Ritual, and Empirical Perspectives*. She is currently engaged in the research and development of a Congruence Model of couple therapy derived from the work of Virginia Satir for the treatment of pathological gambling. Correspondence can be forwarded to: Bonnie K. Lee, Ph.D., Department of Classics and Religious Studies, University of Ottawa, 70 Laurier Ave. E., Ottawa K1N 6N5, e-mail: bkleee@aix1.uottawa.ca

Résumé

Cet article explore la signification des guérisons effectuées par Jésus de Nazareth et Virginia Satir comme des performances publiques. Deux modèles issus des sciences sociales, soit celui de la construction sociale de la réalité et l'anthropologie des rituels, soulignent la contribution des collectivités dans la décomposition et la construction des perceptions du monde et la légitimation du changement dans le statut social et l'identité. L'auteur soutient que par la présence de témoins aux guérisons ainsi que par l'expérience qui s'y rattache, Jésus et Satir proclament une famille humaine universelle qui va au delà du pouvoir exercé par les institutions sur les définitions des personnes. À l'intérieur d'un cadre de référence cosmique et spirituel élargi, les gestes de guérison de Jésus et de Satir ont libéré les individus des étiquettes de déviance qui leur étaient apposées socialement et leur ont permis de revêtir une nouvelle image empreinte de valeur et d'appartenance à la grande famille humaine universelle dont le lot est un héritage spirituel. En connectant les gens à leurs ressources personnelles, spirituelles et sociales, Jésus et Satir agissent non seulement comme des guérisseurs charismatiques pour leur époque mais aussi comme des leaders spirituels et des agents de changement social.

Introduction

Healing staged as public acts goes against the grain of the contemporary Western view of illness and healing as individual and private affairs. Yet, performance of healing events in the witness of public audiences was central to the practice of two charismatic healers in their respective societies: a first century Mediterranean Jewish peasant, Jesus of Nazareth, and a twentieth century pioneer of family therapy, Virginia Satir (1916-1988). Although their work and lives were separated by a span of twenty centuries, their modes of operation bear some striking similarities.

Two social science models, a sociological model based on the theory of social construction of reality and a model of anthropology of ritual performance, will be used to explicate how Jesus and Satir utilized public acts of healing to challenge existing social and religious boundaries to introduce an alternative worldview of a universal human family into their society. A worldview is a set of fundamental taken-for-granted assumptions about reality that shape our perceptions, beliefs, feelings, expectations, interactions, and imagination of what is possible (Borg, 1994; Satir, Banmen, Gerber & Gomori, 1991). Implications of Jesus' and Satir's public acts of healing as vehicles of worldview

deconstruction and construction will be discussed in terms of their personal, spiritual, and social significance as well as their effects on the healer, the participants, and society.

To explicate the holistic significance of Jesus' and Satir's public acts of healing, the following points will be discussed:

1. Cultural norms are socially constructed.
2. Illness and health are embedded in cultural frameworks.
3. Jesus and Satir were non-institutional leaders who challenged the status quo.
4. Public acts of healing were events that challenged cultural boundaries, categories, and definitions of deviance and worth.
5. Healing restores individuals in a community of participant-observers appealing to an expanded framework of spiritual and universal significance.
6. Public acts of healing are events of personal, social and spiritual reconstruction.
7. Pastoral implications of this theoretical exploration of the significance of healing staged as public performances will be considered.

Culture as a Social Construction

Culture is a product of human attempts to form a meaningful cosmos out of the chaos of experience by ascribing to it meaning and values. This ordered universe is represented in society by symbols — words, objects, gestures, places, times and various classifications that are invested with specific meanings to render raw experience intelligible (Berger & Luckmann, 1967). The ordered universe or worldview poses itself as reality when it is legitimated by group consensus. This socially constructed universe presents as taken-for-granted fact as its representations are perpetuated and reinforced from generation to generation. We live and breathe in a cultural medium of ready-made meanings. In turn, this meaning system or worldview is internalized by us to shape a complex of motivations, perceptions, values, and beliefs that guide how we communicate and act in society. On one hand, culture as a socially constructed meaning system provides group norms, boundaries, and definitions that give stability to our functioning in society. However, culture also constrains our

interactions and identity in established roles and functions that are collectively accepted.

Illness Reflects Cultural Values and Constructs

Views and practices of illness and healing are embedded within larger configurations of values, meanings, and significations constituted by a prevailing culture (Good & Good, 1981; Pfifferling, 1981). Interpretations and perceptions of health and illness are prescribed by *cultural norms and values*. To understand illness and healing, a culture's normative and commonly shared patterns of meanings, values, thinking, and acting must first be discerned. This gives us a map of how health and illness are defined in a given society, and its correlated practices of treatment. Embedded in the values and norms of a culture, illness is not only a physical state, but has social, political, and spiritual meanings and ramifications. In order to grasp the radical nature of Jesus and Satir's contributions to the healing of persons in their societies, the normative cultural assumptions and beliefs informing illness and health out of which they operated will first be discussed.

Jesus of Nazareth's First Century Jewish Palestine

Illness in first century Palestine is to be understood in light of the cultural map of what is considered "clean" and "unclean." Anthropologist Mary Douglas pointed out that the concept "clean" and "pure" refers to things and people that remain in their proper place and boundaries, while "unclean" or "polluted" is that which falls outside of the culture's normative boundaries, that which straddles categories, is ambiguous and unclassifiable (Malina, 1981; Neyrey, 1991).

People, places, and time followed a hierarchical classification in first century Jewish Palestine. The Temple and its sacrificial system was the central and dominant symbol of Israel's culture, religion, and politics. Only a "holy" priest with the right blood lines and an unblemished physical condition in a state of ritual purity could participate in sacrifice. Within the Temple, priests, Levites, Israelites, women, and Gentiles were permitted to locate themselves in varying proximity to the Holy of Holies corresponding to their status on the social map. Time was classified with rules and actions for observing specific sacred times of the Jewish calendar, such as the Sabbath, Passover, and Atonement (Neyrey, 1991).

Contact with things and persons considered unclean rendered a person unclean. The unclean included Gentiles, the dead, the sick, lepers, the blind, the deaf, paralytics, menstruants, and sinners, such as

tax-collectors and promiscuous women (Neyrey, 1991). This map defined the orderly cosmos of Jesus' time and was socially legitimated by Israel's scriptures, ceremonies, religious leaders, and those who observed its laws.

The Torah, regarded as the divinely revealed constitution of Israel, comprised not only ritual law, but laws for cultural and political life (Borg, 1984). Hence religion and culture in first century Israel were inextricable. The symbolic universe of order and hierarchy created at the beginning of time gave definition to national, religious, social, and personal identity. In this classification system of "clean" and "unclean", illness equated with "unclean" meant not only disease, but a state of shame and marginalization with ramifications socially, and religiously.

Israel's sacred and cultural cosmos found itself in a precarious position in the first century Palestinian world with the Roman political and military occupation of Palestine and encroaching Hellenistic and Roman worldviews. As a result, various movements arose to define what it meant to be the people of God in that setting (Borg, 1984). In a situation where one's self-definition or identity is threatened, the tendency is to exercise greater exactitude and vigilance in guarding the lines or boundaries of one's cultural map to keep chaos at bay. The Pharisees, the strongest opponents to Jesus, upheld and intensified the interpretation of the letter of the Torah and observances of the law to reinforce Jewish identity as one set apart from its neighbours as a "holy" people. Socially, the emphasis upon purity was intended to insulate Israel from the practices of the Gentiles and to protect her against assimilation and corruption. The intensification of norms produced not only tensions with the Gentiles but also divisions within Jewish society. It sharpened the alienation of Jews who fell short of the legal definitions of holiness (Borg, 1984). Fear of identity loss engendered practices of oppression and ostracization. Illness therefore meant that those considered "unclean" were shamed and shunned socially, politically, and religiously. It was against the backdrop of these dynamics of Jewish society that Jesus spoke and acted in first century Palestine.

Virginia Satir's Mid-twentieth Century United States

The model of illness in the United States in the 1950s was a combination of a biomedical view focussing on diseases and their biological and anatomical causes and a psychoanalytic orientation in the treatment of mental disorders (Shorter, 1997). The biomedical system was preoccupied with the identification of pathogens, germs, viruses and the causes of malfunctioning body parts. Treatment of

“mental illness” was based on a medical-psychiatric model that was heavily invested in the classification of pathological symptoms (King, 1989). Psychiatry as practised at the time was influenced by psychoanalysis imported into the United States via the medical profession (Berger, 1965). Mental illness was construed largely as biologically-based in terms of brain or heredity and as psychiatric categories of deviancy. The prevailing biomedical, psychiatric model of the twentieth century reflects a value orientation that is a by-product of a scientific and mechanistic view of the world (Pilch, 1991). Values in this worldview are atomicity, linear causality, and functionality. The desired outcome of the biomedical model is “cure”, which means the removal or control of disordered biological processes or body parts, and isolation of individuals who are physically and mentally ill. Health is gauged by functionality and restoration to activity and productivity (Pilch, 1991).

Jesus and Satir as Charismatic Healers

Jesus and Satir gained recognition as healers in their respective societies not primarily on the basis of their institutional credentials but by the public’s acknowledgment of their successful healing performances. They fit with what sociologist Max Weber describes as “charismatic” individuals endowed with exceptional powers or qualities that set them apart from ordinary people (Weber 1922/ 1968). In contrast to the “priest” or “magician”, the figure of the “prophet” is a “bearer of charisma” who by virtue of his or her extraordinary, creative personal gifts acquires authority outside of tradition, hierarchy and institutions (Weber 1922/ 1968; 1947/1968). Jesus and Satir were charismatic healers who worked outside of mainstream institutions. By their social positioning outside of institutional ranks, they brought perspectives and practices that posed a challenge to the dominant structure and meaning system of their society.

Jesus the Folk Healer

The historical Jesus was believed to be a carpenter’s son, socially situated in the artisan class hierarchically below that of peasants and just above that of the outcasts (Crossan, 1994). His erudition, wisdom, authority, and power could hardly be accounted for by his station in life. He did not belong to the Jewish elite of the day, namely the scribes and priests. He likely learned the foundational narratives of his Jewish heritage through an oral tradition like the majority of his contemporary peasants and artisans (Crossan, 1994). Jesus’ extraordinariness was highlighted in Luke’s account of the wisdom and knowledge he

displayed at a young age evidenced by his astonishing ability to engage elders at the Temple in discussion of the Torah (Luke 2: 41-52).

Jesus was a self-proclaimed itinerant folk healer in his time, not a member in the class of professional healers who were trained and credentialed to practice (Pilch, 1991). He claimed his authority to practise as a preacher-prophet derived from being an agent of Yahweh the Healer (Luke 4:24, 13:33; Kee, 1986; Pilch, 1991). This separated him from physicians who practised medicine built on knowledge and observation of the natural order. It also distinguished Jesus' healing from magicians who practised on the assumption that there is a mysterious, inexorable network of forces which the initiated can exploit for personal profit or block for personal protection (Kee, 1986). Jesus' authority was not derived from office or institutional endorsement. He claimed to act from divine authority and revelation from God the Father, his higher patron. Jesus' identity as healer was not ascribed to him by birth or lineage. Rather it was acquired through his successful answering to public challenges in effecting healing which accrued him honour. Jesus' reputation depended on the acclamation of the public from dramatic and awe-inspiring acts of healing and extraordinary acts known as miracles. The fact that he performed healing in public without an institutionally legitimized status was a challenge to authorities and the cultural system of classification and values they upheld.

Virginia Satir the Social Worker

At an early age, Satir displayed qualities of a child prodigy. She reported starting to read at age three and by the age of nine she had read all the volumes in the school library and most of the books in the public library (King, 1989). She was close to six feet tall with an impressive bearing. Those who knew her and met her in workshops she conducted remarked on the power of her presence, her uncanny ability to remember physical and biographic details, and her immediate ability to establish rapport with people (Lee, 2001).

Among the pioneers in family therapy, Satir was the only woman and non-medical professional. She was first trained as a teacher and later as a psychiatric social worker. Her training and gender placed her in the margins of the mental health establishment in the 1950s. However, being located on the edge professionally gave her a unique vantage point from which to view and assess existing taken-for-granted theories and practices in mental health. It is not surprising that many leaders of social movements came from the fringes of society because their social experience and location in society gave them a vantage

point different from the dominant social perspective (Klandermans & Tarrow, 1988).

The reigning therapeutic model in the United States in the 1950s was psychoanalysis. Organized structures of medical psychiatry with its network of hospitals, research agencies, training centres and professional associations were informed by the psychoanalytic orientation (Berger, 1965). The medical psychiatric model as practised at the time was hierarchical, privileging the interpretation and diagnosis of medical professionals to determine a patient's pathology and the prescription of drugs to deal with symptomatology. Satir found that in her training as a psychiatric social worker, she learned an elaborate system of classification of pathology, but little of how to bring about health (King, 1989; Kramer, 1995).

Satir's own experience and observation led her to believe in human beings' innate potential for health and growth when given a nurturing context. In this regard, she was in the company of humanistic psychologists Carl Rogers and Abraham Maslow whose voices formed the "Third Force" in psychology in protest against the determinism of psychoanalysis and behaviourism. The humanistic orientation champions human potential, human agency, and self actualization. Unable to continue working in "a context where people were devaluing people," Satir took leave of institutions to begin her private practice in 1951 (Kramer, 1995, p.168). Her clients were the "rejects" whom other professionals deemed untreatable (King, 1989).

The departure from institutions gave Satir a free hand to experiment, observe, and invent. Her dictum was to give credence to her own observations and experience over that of established theory and practice (King, 1989; Kramer, 1995). Suspecting that problems were not entities that lodged in individuals but were produced and maintained in a context, Satir began seeing families as early as the mid-1950s, noting family members' communication and their reciprocal effects on one another. She joined Don Jackson and other researchers in Palo Alto in 1959 to form the *Mental Research Institute to study the relationship between family interactions and schizophrenia*. Out of these investigations evolved the theoretical formulations and practice of family therapy. The systemic understanding of family as a set of interacting variables leading to an outcome contrasts with the linear model of classical psychoanalysis that was primarily concerned with historical intrapsychic factors within an identified patient. Satir preferred using experiential workshops as vehicles for training and learning over academic research and publications. Her preference for

the vernacular, common sense language over academic jargon which she called "dirty language" (Kramer, 1995, p.167; Luepnitz, 1988) continued to place her outside of mainstream academic and professional institutions, including the profession of family therapy she helped form (Pittman, 1989).

Satir staged thousands of spellbinding experiential workshops around the world in the 1970s and 1980s in which she demonstrated an alternative way of viewing the self and the world (Avanta, 1996). In these workshops, she engaged participants in questioning old learning and created a safe context for them to experience new ways of interacting and being more human and fully alive. Her rising legitimation as a master therapist and visionary came from thousands of lay and professional people who attended her marathon workshops and retreats. *Until her death, Satir's legitimacy as a healer was constructed by the communities she worked with and transformed.*

The 1960s in the United States was an era of great social upheaval with the civil rights, women's, students' and peace movements underway. Values and conventions taken for granted for centuries were called into question. At the base of this unrest are the non-material needs for human significance and the cry for a map of a new social order. This was the context out of which Satir worked and her contributions reflected both a critique of an old model based on dominance and submission in human relations and a vision for a new world based on universal human worth (Satir, 1988).

Public Acts of Healing as Ritual Performance

Anthropologist Victor Turner identified "ritual" as a process by which society renews and regenerates itself (Turner, 1969). In Turner's view, society is made up of a dialectic of "structure" and "anti-structure". Structure refers to the hierarchy or status system of society which differentiates ranks and roles while anti-structure is the space-time in ritual performances which deconstructs and reconstructs social rules and personal identity. Turner delineates three phases of the ritual process as: (1) separation, (2) transition, and (3) reaggregation. Separation refers to the construction of a space-time that is outside of conventional social rules. "Liminality" is an anti-structural transitional space-time in which societal roles and rules are dissolved, allowing the "totality", "nakedness" and "equality" of essential humanity to be expressed (Turner, 1969). Reaggregation is the process by which individuals who have gained deep knowledge of their human condition or "gnosis" in liminality re-enter the structure of society with new eyes

and awareness as those "born again". Rituals are experiential, intentionally framed performances of transition involving a community under the expert guidance of an elder. As such, rituals serve as vehicles of personal and social reconstruction.

Jesus' Healing as Ritual Performance

Jesus' healings were symbolic challenges of the symbolic universe of first century Jewish culture. His healing crossed the boundaries of sacred time, places, and persons established by his society. He healed on the Sabbath, the day of rest (man with a shrivelled hand — Luke 6:6-10; man with an evil spirit — Luke 4:31-37). Many of his healings were carried out outside of the sacred sites of Temple and synagogues. He healed on the road (hemorrhaging woman — Luke 8:43-48; boy with an evil spirit — Luke 9:37; man with a mute demon — Luke 11:4; lepers — Luke 14:1-4), in houses (Peter's mother-in-law — Luke 4:38-39; man with dropsy — Luke 14: 1-4; Jairus' daughter — Luke 8:40-42; 49), and even in tombs (Luke 8:26-38), places considered profane in Jesus' time (Elliott, 1991; Malbon, 1986). Geopolitically, Jesus' healing extended well beyond the centre of Jerusalem and the Jewish territory of Judea and Galilee, crossing the boundaries of the River Jordan and the Sea of Galilee, into the foreign lands of Tyre and Sidon, country of the Garazenes, Bethsaida and Caesarea Philippi. The people he befriended, touched, and healed were those shunned by Israel — the unclean, blemished and outcasts, women, prostitutes, children, and Gentiles. In more ways than one, Jesus' healings put into question the ultimate significance of the structural markers of time, place, and persons in the symbolic universe of Israel. An example of the challenge Jesus intended to pose to institutional authorities who represented society's hierarchical norms was when he asked the leper whom he healed to show himself to the priest, who was credentialed to heal (Luke 5:14). His aim was to construct an experiential awareness of a larger cosmic frame of reference whose power is superior to institutionalized power and the social system of definitions and classifications.

Jesus posed his challenge to the existing power structure in his speech and action, epitomized in his public healing acts. Because practices and beliefs around illness and healing were embedded in the cultural and political maps of a society, Jesus' public healing performances were symbolic acts that relativized the preconceived structural hierarchy, status, and relationships of his society. The challenge and relativization of structural values correspond to Turner's "separation" phase of the ritual anti-structural process.

Relations in the ancient Mediterranean world were guided by a reciprocal patron-client relationship defined by benefaction and loyal discipleship (Moxnes, 1991). By claiming power from his patron, God the Father, Jesus was able to come into contact with the "unclean" and remain unharmed and unpolluted. Jesus' unassailability testified to his extraordinary power.

Liminality allows persons to appear in the "nakedness" of their human condition outside of the status and roles they assumed in society. Normally unseen and unheard, those dispossessed seeking Jesus for healing came out of their hiding to make themselves visible and audible. In a society with rigid social classifications, illness is a devalued state, not only physically, but socially and religiously. Those ostracized had little hope for change in their fortune or status. Casting a challenge to society's classification system, Jesus created a ritual space for the containment of the chaos these people brought into his presence. The containment Jesus constructed was no less than the presence of his power to see into the hearts and yearnings of those who sought his healing and his unconditional affirmation of their worth. Within this ritual space, the structural laws of society gave way to a different frame of valuation which Jesus articulated and demonstrated, a frame of reference that was no longer that of man or society, but of God. In this expanded cosmic frame, the criteria of valuation are not appearances and perfection through adherence to social codes, but God's assessment of the secret qualities of heart and his compassion for frustrated human longings.

Jesus made many comments that subvert the cultural understanding of what constitutes family (Luke 11:27-28; Matthew 23:9). People were asked to leave their mother, father and family to follow him (Luke 14:25). He was disobedient to his mother and father when as a young boy he stayed at the temple talking to the elders without their knowing (Luke 2:48-50). He considered those who do the word of God as his true mother and brothers who take priority over his biological mother and brothers (Luke 8:19-21).

Jesus' challenging remarks on the conventional cultural family can be understood in light of the universal family he evoked in his healing. This universal family knows no class or purity barriers. It is the family he came to establish, to remind the people that there is a larger reference for their identity. "Call no man your father on earth, for you have one Father, who is in heaven," proclaimed Jesus to those he healed and to the participant-observers of his healing (Matthew 23:9). Regardless of social classifications, each person has a place in the

cosmic family. Jesus created a liminal space in his public healing such that those disinherited in their own societies were reclaimed as having a place in a larger system, the universal family, as children of God and Jesus' brothers and sisters (Luke 8: 19-21). The disinherited received a new sense of their own status and worth through the dyadic patron-client relationship established with Jesus the healer, a representative of God himself. Deemed acceptable by a higher patron, the marginalized experienced a status transition from shame to honour, passivity to power, from a state of disinheritance to belonging.

Public healings are dramatic enactments of Jesus' parables and teachings. They are embodiments of the new worldview of human relations, values and ultimate significance he wants to impart. Public healing acts announce the good news of liberation of persons and relationships not only by talk, but by power. Public healing as ritual acts are processes that go beyond verbalization and cognition, engaging those who participate experientially, holistically, and existentially in the immediacy and impact of its enactment. The community of participants who subject themselves to this transformation, directly or vicariously, contribute to the continuous subscription and circulation of a refashioned worldview that gives rise to new possibilities.

Returning to structured society, both client and witnesses are no longer the same in their knowledge and perception of the world. They have experienced extra-ordinary power and an expansion of vision. Turner refers to this as "gnosis" or deep experiential knowledge (Turner, 1969; 1979). The new is anchored affectively and kinesiologically in the body, and socially validated by a community of witnesses. A new community that transcends sociological hierarchical lines founded on an experience of universal humanity in which each person has a place and sense of worth is being formed.

In summary, public enactments of healing by Jesus serve four functions. First, they legitimize Jesus' honour as a healer although his status, practice, and values fall outside of institutional accreditation. Leaders of charisma require audiences who resonate with their messages. The success of a healer and his message therefore is not determined only by the brilliance of the healer and his message, but by the resonance his message evokes in the hearts and minds of the audience, and how well it answers the deep need and hunger of the time. The success and legitimation of charismatic leaders rest on the reception of their following. Jesus' reputation thus grows from the public's acknowledgment of his message and the success of his extra-ordinary healing acts.

Second, Jesus' public healing recruits an audience to bear witness to an alternative expanded worldview and frame of reference for values, power, and status of persons. Members of the audience who witness the status change of the client become co-constructors of the client's new personal and social identity. Identity is not only a private and individual definition, but a "social and public achievement" (White, 2000, p. 62, 68). As such, it needs social validation for its stability and continuance. Witnesses contribute to the authentication of the claims of the healer and the healed. Healer, client, and witnesses together socially construct the new frame of reference for meaning and living. Engagement of a community of witnesses ensures the collective subscription and circulation of the new worldview and identity of those who have been transformed.

Third, the drama of public healing sets off reverberations in the witnesses. Witnesses participate vicariously in the healing. Witnessing the struggle and liberation of others draws out the shared yearnings for healing, significance, and empowerment in the observers themselves. Thus public healing creates a ripple effect in stirring up the desire in members of the audience for their own liberation. The demand for healing increases as the word of its efficacy spreads. When participants and witnesses of healing reach a critical mass, society shifts into a new key.

Fourth, those who have "seen and heard" and "touched" become "leaven" in their own society, challenging the existing worldview and structures by virtue of their changed perception, identity, behaviour, and status of higher worth. In reciprocation for the marvellous benefaction that has been granted them, those who are healed continue the teaching and healing work of their patron (Luke 8:2-3). They become disciples and bearers of the good news, acting as catalysts for change in their own society.

Satir's Workshops as Ritual Performance

Satir has been criticized for being more of a practitioner than a substantial contributor of theory to family therapy. This critique is likely attributable to the fact that she elected to use public workshops rather than academic publications as vehicles for the dissemination of her ideas and change process. Satir took therapy out of sterile clinics and offices on to the stage, engaging hundreds in the audience from all parts of the world (Satir, Banmen, et al., 1991). As early as the 1960s, Satir was conducting large-scale workshops and retreats in North America (Lee, 2001).

It is the contention of this article that workshops and public healing performances were deliberately chosen by Satir as vehicles of change because they suited her aims in mobilizing a "critical mass" of people towards social change and world peace (Satir, 1988, p.371). This is in line with observations by her closest professional colleagues, who saw Satir as more than a therapist, but as a visionary (Duhl, 1989; Brothers, 1991). Satir's starting point was the family, but her vision was global:

Families and societies are small and large versions of one another. Both are made up of people who have to work together, whose destinies are tied up with one another. Each features the components of a relationship: leaders perform roles relative to the led, the young to the old, and male to female; and each is involved with the process of decision-making, use of authority, and the seeking of common goals (Satir, 1988, p.360).

The change that is effected in families in terms of family rules, beliefs, stances of communication, ways of resolving differences and conflicts, and self-esteem, are translated into larger systems by those who embody and practise these values. Therefore Satir views her workshops as a way of creating a change process that not only establishes a new worldview and new practices to individuals and families, but through them as "change artists" (Satir, 1998), her workshops were a way of introducing deep structural change into society (Satir, 1988). About her broader aims for social change, Satir writes:

At this point, I squarely direct my therapy toward opening up awareness and presence of human potentials in human beings. My efforts are also going toward the larger families — communities, national, and political where the same ingredients appear as in the individual family (Satir, 1986).

Satir's workshops are contemporary ritual performances following Turner's ritual process of separation, liminality, and reaggregation. Most of Satir's workshops of week-long or month-long duration led by her and other Avanta trainers¹ were conducted in nature sites away from city centres. Situated at the edge of civic, commercial, and political centres of power, the geographical locations of Satir workshops signal their "anti-structural" and "liminal" orientation close to earth and nature, the great equalizer of all living things. Participants who travelled long distances to attend these workshops commented on their journey as a "pilgrimage" (Lee, 2001). Pilgrimage has been described by Victor Turner as a ritual movement through space, leaving mundane

structure behind to journey into liminality where human relationships are formed on the basis of the common essentials of being human (Turner, 1969).

Separation and containment need to be understood not only physically, but symbolically and psychologically. The psychological separation and containment is constructed by the congruent use of self by the therapist. It is Satir's belief that, over and above techniques, the use of the self of the therapist is of central importance in the change process. The therapist needs to be in a state of congruence with his or her self, to be "totally clear and in touch" with his or her own thoughts, feelings, expectations, hopes and wishes (Satir, 1987, p. 24). The therapist allows the client to see his or her inner congruence which creates a zone of safety. Congruence is flow, and it sets up an openness to one's healing potential:

The person of the therapist is the center point around which successful therapy revolves...The whole therapeutic process must be aimed at opening up the healing potential within the patient or client. Nothing really changes until that healing potential is opened. The way is through the meeting of the deepest self of the person, patient or client. When this occurs, it creates a context of vulnerability — of openness to change. This clearly brings in the spiritual dimension. People already have what they need to grow and the therapist's task is to enable patients to utilize their own resources (Satir, 1987, p. 24).

In other words, containment in the phase of liminality is constructed through congruence in the therapist which elicits the same from the client, creating a flow of deeper processes. Ritual is derived from the Indo-European word "ritus", meaning "flow" (Turner, 1979, p.143). For Turner, "flow" is merging action and awareness. It is this mode of being on the part of the therapist or ritual elder that facilitates the "flow" of ritual action, provides safety, and carries the healing process forward.

Performance involves the body and follows the values of an oral tradition as opposed to a textual tradition. Textual and oral discourses privilege different values with different kinds of effects (Ong, 1982). Textual discourse is planned, linear, logical, and organized, while oral discourse is spontaneous, intimate, vivid, and emotional (Ong, 1982; Lakoff, 1982; Tannen, 1982). Twentieth century was predominantly a

¹ Avanta is the organization Satir founded in 1977 to continue her mission. Its aim is to enable people to learn processes to promote peace and social justice in the global community. More information on Avanta available at www.avanta.net.

textual culture which overlooked the merits of oral traditions. Oral traditions communicate knowledge in a manner that is closely tied to the human lifeworld (Ong, 1982). Whereas writing traditions favour text, oral traditions favour context. In oral cultures, knowledge is transmitted through face-to-face encounters. The level of interpersonal relations is high. Attractions and antagonisms are both likely to occur (Ong, 1982). Action and interaction are emphasized. Oral performance promotes shared experience and unites its audience into a group. Therefore the oral and performative medium predisposes towards community; the textual medium, individuality.

Using the convention and strengths of an oral performative tradition, Satir constructs in her workshops a charged experiential space that places the human person, human interactions, and the existential lifeworld at its centre. Her workshops create a context that maximizes holistic engagement of the intellect and affect, past memories and present struggles, body and mind, for the tasks of unlearning and learning patterns that are vital to full human living. Satir suspected the limits of words. She therefore innovated collective processes involving the body and senses, altered states of consciousness, music and meditation, laughter and theatre, and sculpting physical representations of human relationships to surface awareness and play with change. The performative oral medium engages the audience in learning that is grounded in the concrete specifics of human lives.

Satir's workshops have the goal of initiating people into a new "worldview" (Satir, Banmen, et al., p. 14-15). This new vision of relationships, change, and personhood Satir describes as the "Growth Model" or "Human Validation Model" in contrast to a "Hierarchical Model" (Satir, Banmen, et al., 1991). The Growth Model is based on a systems way of perceiving the world and events, such that any event is the outcome of many variables. Instead of relying on the voice of authority, people are believed to have resources to find their own solutions if they look to themselves and to the context and its many contributing factors. Rather than thinking in dichotomies of right and wrong, a systems way of thinking generates discovery, information, patterns and connection. The Hierarchical Model views relationships in terms of dominance and submission. Roles and status are confused with identity. In contrast, the Growth Model views persons as being of equal value. Roles and status are distinct from identity. Roles imply a function in a specific relationship at a particular time, but a person is defined from an inner source of strength and worth and not limited by prescribed roles. Cultural contexts and beliefs can limit our ways of being and relating unless a "critical mass" of people subscribe to an

alternate set of beliefs and rules. It is therefore Satir's intent to bring about this "critical mass" of people who can unlearn old hierarchical values and processes and adopt the values and process of a way more conducive to growth, peace, and full human development.

In the Growth Model, illness is not seen as a permanent condition of defect or deficit within a person or as constitutive of a person's identity. In Satir's worldview, illness and symptoms are messages about the imbalances and difficulties found in the interrelated intrapsychic, interpersonal, and spiritual resources that have been blocked. In what she calls a "health-oriented approach", Satir sees the hub of healing as opening up the "untapped", "covered over", "out-of-reach" potential in a person within a certain context (Satir, 1986). By creating a safe therapeutic context, the energy and resources for health can be released. Labels of pathology are reframed into frustrated yearnings and blocked processes requiring new channels for health and vitality.

Satir workshops create a space for participants to discover their resources, freedom to choose, and their spiritual grounding. Her premise is that when human beings begin to love and value themselves, their inner security allows them to connect with one another through their sameness and to respect and grow from their differences. The experiential medium of Satir workshops supplies ample opportunity for people to practice through meditations a deepened connection with self and spirit, and interactions to practice new processes of congruent communication that convey respect for self and other within a given context. These workshops create a forum for people to practice going beyond the conventions of social discourse and interaction. Satir encourages people to expand on the range and depth of their communication with each other to include appreciation for oneself and other, to give oneself permission to ask questions, share information, express worries and concerns, make recommendations, and voice their hopes and wishes in a process she calls "Temperature Reading" (Satir, Banmen, et al., 1991). Old family rules of communication which Satir refers to as "survival stances" that were compromising of self or other are brought to light and challenged. As the family is a microcosm of society, family rules reflecting broader cultural rules are relativized in the anti-structural space of Satir's workshops.

In Satir's well-known vehicle of "Family Reconstruction", workshop participants role-play family members of the "Star" undergoing reconstruction. Through the experiential re-enactment of the relationship dynamics of one's past, the Star, role-players, and audience view the past with new eyes in accordance with a larger frame

of universal humanity. Inner motivations, struggles, and yearnings of one's parents and ancestors going back three generations are revealed and understood in light of the constraints and the historical and cultural context in which they lived. A new understanding of their human struggles, yearnings, strength, and spirit was experienced as participants role-play their identities and speak from their inner voices. Whereas these ancestral figures were once seen in their roles through the eyes and yearnings of a child, in the "reconstructed" family, the Star gains an appreciation for the deep humanity and dignity of these human beings in his or her heritage. The appreciation of one's past and the common universal human yearnings for love, belonging, and worth expressed through the voices of role-players bond the Star to his or her ancestors, the workshop participants to one another, as each experiences his or her own humanity deeply. The Star gains esteem and respect for his or her ancestors and hence for himself or herself in acknowledging the validity of human yearnings and the pain when human longings are denied and frustrated. In this liminal space bonds of connection are forged among participants as shared human yearnings are expressed and experienced, a phenomenon Turner calls "communitas" (Turner, 1969). Living with an increased sense of worth, inner security, and self-acceptance, participants grow in congruence or alignment and flow with their life energy and in the way they conduct themselves in the world.

Witnesses of these human dramas are put in touch with their own deep yearnings and stirred to reflect on their life narratives. It is not uncommon that group interactions trigger strong reactions in workshop participants as a result of old wounds flaring up. Group conflicts and antagonisms provide the fodder for healing for a large number of participants in Satir workshops. The ripples of change thus spread. Witnesses of these healing events help validate and stabilize the Star's new identity and offer support of the newly constructed reality. Satir workshop participants become agents of social reconstruction as they introduce a new worldview, interaction processes, rules of communication, knowledge and practices of working with differences and diversity into their society.

Meaning and values are socially constructed through shared discourse and symbolic action. Through the performative medium of experiential workshops guided by the values of Satir's Growth Model, new values, interactions, practices, and knowledge are appropriated holistically by Satir workshop participants. Healing, meaning to make whole, brings together disconnected parts: body, mind, spirit, and community.

Healing that affirms the person's potential and humanity contrasts with the "diagnosis" and "treatment" of a medical psychiatric system that produces documents and ceremonies of degradation according to a classification of pathology (White, 2000, p. 65). Labels and categories collectively subscribed to create identity. Social definitions of deviance and marginalization of individuals become synonymous with a person's permanent status and identity. Satir workshops collectively deconstruct a worldview and set of values that maintain superiority and inferiority, dominance and submission, and collectively construct an alternate worldview of a common, equalizing humanity. Experientially and in community, participants experience themselves as persons of worth with legitimate human yearnings who have the resources to satisfy as members of a universal human family.

Conclusion

This article sought to understand the significance of the use of public acts of healing in the work of Jesus of Nazareth and Virginia Satir. If healthcare is an arena of cultural life that both reflect and reinforce the dominant cultural worldview and its attendant values and social stratification, Jesus' and Satir's public healing brings symbolic and practical challenges to the institutionalized system. Since neither of them was classified with the elite, the legitimization of their role and status depended largely on the acclamation of a public who have been beneficiaries of their gift of healing.

Working from the margins of their society they allied themselves with the poor and dispossessed. While the elite were predisposed towards maintaining the status quo of their society, Jesus and Satir posed challenges to the values and practices of the dominant social and political hierarchy of their day. Their public healing events took participants through the phases of separation, liminality, and reaggregation described by Turner as an anti-structural ritual process which relativized conventional cultural values, definitions, and practices. As ritual process, their public healing acts also introduced an alternative worldview with new ways of seeing, being, and acting back into society. This alternative worldview is one that affirms human worth and human belonging to a universal family based on a common spiritual heritage. The new order is proclaimed and experientially performed to supersede the powers of institutions. The knowledge of this new reality is experientially marked in the participants of these healing events.

Collective and public healing acts mobilize a critical mass in society that contributes to the subscription and circulation of the new view of the world. Those who have "seen" and "heard" become messengers of the good news and catalysts for change in their society. Participants of public healing form communities that stabilize and legitimize what is emergent and counter-cultural. Public events of healing are intentional counter-cultural or anti-structural acts. These intentionally staged events break open the limitations of existing cultural values and definitions in order to liberate a critical mass in society towards a vision and practice that set the personal, social, and cosmic order in alignment. Evoking deep human bonds based on the experience of a universal human family, public healing is a holistic, systemic act that releases personal, social, political, and spiritual consequences. As such, Jesus and Satir functioned not only as healers in their societies, but as spiritual leaders and agents of social change.

Pastoral Implications

This article draws inspiration from Jesus and Satir who carried their healing work out of a liberating cosmic framework that breaks out of the cultural categories and institutional norms of their day. Theirs is a framework founded on an affirmation of universal human significance with the recognition that each person participates in divine life and relationship. What distinguishes pastoral care and counseling from other secular forms of institutional healthcare service is the pastoral acknowledgment of the intrinsic giftedness of each human being. This affirmation and acknowledgment of human worth and giftedness comes before any diagnostic categories or institutional judgment. With Jesus and Satir as role models, pastoral ministry develops our capacity to hear the human cry for meaning, liberation, restoration, esteem, wholeness, and fullness of life as the human yearnings that lie behind human suffering and manifest clinical symptoms. The pastoral worker draws out the resources of the human spirit of those who suffer in the contact made during the pastoral encounter.

Different from cure, healing is a holistic act that restores the relational connections of a person with oneself, with one's community, and with one's spiritual resources. Jesus and Satir hold forth a view and experience of healing that consists of holistic and systemic reconfigurations of personal, social, and spiritual dimensions. They both adopt a systemic framework in their praxis that penetrates psychological, spiritual, and social layers of experience. Their examples of healing challenge those of us in pastoral ministry to be both sensitive to and critical of the status, hierarchy, value orientation, and human

worth implicated in our institutionalized forms of constructing illness and health.

Studying the public healing acts of Jesus and Satir challenges us to raise our awareness and reflexivity of how we can creatively use the cultural symbols of language, gestures, space, and time to express our pastoral values to pose an expanded alternative perspective to the dominant institutional models of illness and the meaning of human suffering. The creative potential of groups as a context for deep experiential learning is evidenced by the powerful effects of Jesus and Satir's use of public acts of healing. Workshops, therapy and growth groups can be important contemporary vehicles for engaging collectives in the construction of new personal and social realities and in spreading and multiplying the ripple effects of healing and social change.

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Table des matières / Table of Contents

Éditorial / Editorial

Articles thématiques / Thematic Articles

BENOÎT BÉGIN

La famille: idéal et réalité

DIRK KOTZÉ & ELMARIE KOTZÉ

*Ethical-Political Practices in Pastoral Care and Counselling
with South African Families*

MISHKA LYSACK

*From Monologue to Dialogue in Families:
Internalized Other Interviewing and Mikhail Bakhtin*

FABIE DUHAMEL & FRANCE DUPUIS

*Le décès d'un enfant: intégrer une dimension spirituelle
aux interventions familiales*

BONNIE K. LEE

*Evoking the Universal Human Family in Public Acts of Healing:
Jesus of Nazareth and Virginia Satir*

SUSAN L. BEDFORD

*Crisis of Faith: Divorce, Belief and Self-help Support Group
Participation*

DENYSE CÔTÉ

*Le paradigme de l'égalité entre les sexes et la fragmentation familiale:
nouvelles pratiques de solidarité*

CHRISTIAN BELLEHUMEUR & BENOÎT BÉGIN

Le counseling pastoral au risque des défis de la famille contemporaine

Articles hors-thèmes / Regular Articles

GILLES FORTIN & LOUIS-CHARLES LAVOIE

*Aperçu de l'évolution de la place des valeurs religieuses
et spirituelles en counseling*

LOUIS ROY

Des expériences de transcendance à la conscience mystique

Recensions / Book Reviews

Ouvrages envoyés à la rédaction / Books Received

Politique rédactionnelle / Note to Contributors

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223 MAIN, OTTAWA, ON K1S 1C4