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Jesus Loves the Little Children: A Theological Reading of Mark 9:14–29 for Children with Serious Illnesses or Disabilities and Their Caregivers

MELANIE A. HOWARD

Pastors provide care to parishioners in many stages of life, and the resources on which the pastor can draw are as diverse as the parishioners she may encounter. One such resource, perhaps especially useful when counseling children with serious illnesses or disabilities and their caregivers,¹ is the Gospel of Mark with its three accounts of children whose parents appeal to Jesus for help. While the leap from these ancient stories to the circumstances of modern families is large, we may nonetheless find a path for making the journey from text to counseling session. The Gospel of Mark offers resources that, when used with care, can provide support to children with serious illnesses or disabilities and their caregivers. Here I will

¹Bonnie Miller-McLemore notes, “Scholarship on children has not been a high priority in twentieth-century theology, even though congregations and denominations have maintained important ministries for children” (“‘Let the Children Come’ Revisited: Contemporary Feminist Theologians on Children,” in *The Child in Christian*

The story of Jesus’ care for the boy mute since childhood offers insights for present readers who provide care for children with serious illnesses or disabilities. While the reader must take care not simply to exploit the ancient story apart from its original purpose, the biblical narrative provides a useful and hopeful conversation partner for contemporary parents, pastors, and caregivers.

examine one of these healing stories (Mark 9:14–29) through the bifocal lens of ability and disability and will outline the theological implications of this story, both positive and negative, for modern families.

Mark contains three stories of children whose parents ask Jesus for assistance: Jairus's daughter (5:21–24, 35–43), the Syrophenician woman's daughter (7:24–30), and the boy who has been mute since childhood (9:14–29). Despite the similarities of these accounts, this study limits its exploration to just one text: the tale of the boy who has been mute since childhood, which is the longest and the fullest of these stories. Modern parents and their pastors may be able to find points of intersection between the particularities of their stories and the particular story of this boy.

MARK 9:14–29 THROUGH THE BIFOCAL LENS OF ABILITY AND DISABILITY

We begin with an exploration of the tale of the healing of the boy who has been mute since childhood (9:14–29). This story raises the question of who is fully abled, and who disabled. Although the boy's disability is most evident, the disability of the disciples also features prominently. Not characterized as fully abled or disabled, the abilities and disabilities of both the boy's father and Jesus also arise around the area of faith. By uncovering the ways in which the text is concerned with issues of ability and disability (even though such language is not used explicitly), an understanding of how this text and the Gospel of Mark may be used as resources for children with serious illnesses or disabilities and their caregivers becomes more apparent.

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Figures characterized by disability

The most obvious figure with a disability is the boy. Mark uses lengthy descriptions of the boy's ailments to heighten the drama leading up to the healing. His father provides a vivid description of his symptoms: possession by a spirit and muteness (v. 17) and a tendency to fall, foam at the mouth, grind teeth, and become stiff (v. 18). Jesus adds yet another symptom: deafness. Such a long list of ailments emphasizes the boy's condition and serves to make the miracle appear all the more astonishing.

The boy, however, is not the only one who is characterized by disability. Jesus' disciples are likewise disabled characters. In the father's request to Jesus (v. 18), he announces that he had sought aid from the disciples, but that they were ill equipped to handle his request. The conclusion of this story (vv. 28–29) returns to

Thought, ed. Marcia J. Bunge, Terence E. Fretheim, and Beverly Roberts Gaventa [Grand Rapids: Eerdmans, 2001] 448). This observation draws attention to the odd disconnect between the congregation and the academy that my article attempts to bridge with one aspect of children's issues.

the disciples as they question Jesus concerning their inability and are told that this sort of demon can only be expelled through prayer. The implication is that the task that was set before the disciples was not an impossible one, but they lacked the ability to perform it. Thus, although they are unlike the boy insofar as they are physically abled, the disciples too are characterized by disability.

Ability, disability, and the necessity of faith

The question of ability and disability in relation to faith intersects with the characterization of the boy's father and Jesus insofar as a lack of faith is connected with disability. Rather than trying to disentangle the characterization of the father and of Jesus in relation to ability and disability, we may instead slightly reframe the question to inquire about the role of faith in determining a character's ability/disability.

The connection between disability and faith appears in v. 19 where Jesus, after learning from the father that his disciples could not cast out the spirit, exclaims "Oh faithless generation!" It is not clear if this pronouncement decries the crowd (but not the disciples), only the disciples, or the whole group.² However, the father is likely included, and the extent of his faith remains ambiguous as he cries out, "I believe; help my unbelief" (v. 24).³

The father's indeterminate belief mirrors a similarly ambiguous level of ability. In the father's desperate cry, Wendy Cotter also sees a request for healing of another sort: "He asks Jesus...to regard his doubt in another way: not as an impediment to helping his son...but rather as a weakness of his own that requires Jesus' help."⁴ Although this second request is overshadowed by the initial demand for aid (v. 22), even this imperative in v. 22 hints at the multiplex nature of the problem as the father demands not "help him/me" but rather "help us." While the antecedent of this "us" cannot be identified with certainty, it may not be too illogical to imagine that it includes the boy, his parents, any siblings, and his extended family. Thus, the father's plea for help is not limited to the rectification of the boy's disability alone.⁵ Rather, he seems to recognize that although he has more physical ability than his son, he too has a disability.

The effectiveness of the father's petition in obtaining the desired healing

²Robert H. Stein, *Mark* (Grand Rapids: Baker Academic, 2008) 433.

³Charles Hedrick contends that the father's faith does, in fact, play a role in this exorcism, but that this is the "only one" in Mark's Gospel where there is such a role for faith ("Miracles in Mark: A Study in Markan Theology and Its Implications for Modern Religious Thought," *Perspectives in Religious Studies* 34/3 [2007] 301).

⁴Wendy Cotter, *The Christ of the Miracle Stories: Portrait through Encounter* (Grand Rapids: Baker Academic, 2010) 187.

⁵Frederick Gaiser understands the child's illness affecting the entire family especially insofar as the disease might cause the entire family to incur social shame (*Healing in the Bible: Theological Insights for Christian Ministry* [Grand Rapids: Baker Academic, 2010] 141). Hans Dieter Betz suggests that it is not the boy at all who is the true focus of this story: "The main person is certainly not the boy to be healed but his father who is picked up from the crowd (v 17) and moved towards conversion: verse 24 'flips over' into a 'conversion story'" ("The Early Christian Miracle Story: Some Observations on the Form Critical Problem," *Semeia* 11 [1978] 79). If Betz's identification of two different forms is to be accepted, it is all the more telling that a larger sense of what "healing" means is operative.

raises questions about whether the father's faith had an effect on Jesus' ability to perform the miracle. The father's ambiguous confession (v. 24) suggests that whatever faith he has is not fully developed. Rather, "like the disciples who half see the truth, this man half believes in Jesus."⁶ The result of the miracle initially has a similar ambiguity. After Jesus' command to the unclean spirit (v. 25), the spirit departs but incapacitates the boy so that the crowd speculates that he is dead (v. 26). Only after Jesus grabs his hand (v. 27) is it apparent that the miracle worked.

The father's ability and disability in faith may be seen as intricately related with Jesus' own ability and disability in miracle performance. Commenting on the relationship between faith and healing generally, Frederick Gaiser suggests, "It is important to acknowledge the connection, but equally important not to try to quantify it or examine it analytically."⁷ While his ability is not entirely predicated on the faith of others, the incident in his hometown where his power is limited (6:1–6) suggests that Jesus' abilities are not wholly independent of the power of others' faith.

DISCOVERING RESOURCES IN MARK TO SUPPORT CHILDREN AND CAREGIVERS

Having explored the account of the healing of the boy (9:14–29), we may now turn to the constructive task of identifying Mark's resources for children with serious illnesses or disabilities and their caregivers. As with any biblical text, however, these texts cannot be adopted indiscriminately. While a number of positive resources emerge from the account in 9:14–29 and its counterparts in 5:21–24, 35–43 and 7:24–30, a careful reading of these texts reveals that not everything in them commends itself for use as a support to modern families. With this in mind, we may turn first to an examination of the positive contributions in Mark before issuing some cautions about other theological messages that should be handled carefully.

Mark's positive contributions

The success of the healing in 9:14–29 suggests immediately that Mark will be able to offer some positive resources for children with disabilities and their parents. As will be shown, Mark highlights the positive power of persistence, the strength of a holistic sense of healing, and the importance of taking suffering seriously.

In the story of the healing of the boy as well as in the other accounts of child healings, one may be taken aback by the parents' boldness in making their demands. Cotter observes, "Against the cultural backdrop of 'proper' manners, these petitioners are forward, pushy, and insistent. This is meant to introduce a tension in the listener, who wonders how Jesus will deal with this person."⁸ Modern care-

⁶Morna Hooker, *The Gospel According to Saint Mark* (Peabody, MA: Hendrickson, 1991) 224.

⁷Frederick Gaiser, "In Touch with Jesus: Healing in Mark 5:21–43," *Word & World* 30/1 (2010) 9.

⁸Cotter, *Christ of the Miracle Stories*, 8.

givers may find a note of consolation in this portrayal of pushy parents. The quest to arrange for necessary accommodations medically, financially, physically, emotionally, academically, and legally can often lead to caregivers wearing themselves out with endless letter-writing campaigns, petitions, and phone calls that are met with indifference or rejection. In the tales of the Markan parents, however, persistence is not denounced but is met with a positive answer to the parent's plea.

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The flip side of this positive portrayal of persistence is that the desired outcome is not dependent upon the parents alone. Rather, as in the case of the father of the boy, Jesus' deed is not wholly conditional upon the actions or beliefs of the parent. In spite of the father's own admission to an amount of unbelief (9:24), Jesus' abilities are undiminished, and he heals the boy. For modern parents, this may be a comfort. Whatever the outcome of attempts at advocacy on behalf of a child, parents can be encouraged that success need not be dependent on their own qualifications, and failure need not be attributed to personal shortcomings. Parents are freed to be persistent and to be absolved of guilt about the result of decisions made for their child.

Mark also highlights a holistic understanding of healing.⁹ Judith Gundry suggests, "Jesus' ministry of healing and exorcism for children is carried out both at the request of parents (Mark 5:23; 7:26; 9:17, 22) and for the benefit of parents, who counted on their children for future economic and other benefits."¹⁰ The father of the boy in 9:14–29 seems to understand this need for a healing that transcends merely physical aid for his son. The father's repeated use of the plural pronoun in 9:22 serves to emphasize this: "Have pity on *us* and help *us*" (emphasis added). The father, recognizing his own need, begs Jesus to include him in the miracle performed for his son. While the outcome of the miracle for the father is left unspecified, the happy result for the child may suggest a similarly positive result for the father. The father's request for an end of suffering for his family illustrates a holistic sense of healing, and Jesus' miracle provides relief for more than the individual child.

A final positive contribution is the concern to take human suffering seriously.

⁹This may be understood in relation to a similarly holistic understanding of disease. Gaiser observes that in addition to being viewed as an enemy to be fought, disease can also be seen as "an integral part of the human person" (*Healing in the Bible*, 147–148). The account in Mark 9:14–29 does not preclude either view, but it offers an understanding of healing that can be compatible with both notions.

¹⁰Judith M. Gundry, "Children in the Gospel of Mark, with Special Attention to Jesus' Blessing of the Children (Mark 10:13–16) and the Purpose of Mark," in *The Child in the Bible*, ed. Marcia J. Bunge, Terence E. Fretheim, and Beverly Roberts Gaventa (Grand Rapids: Eerdmans, 2008) 160.

Stories of child healings portray “Jesus as taking the pain and suffering of the children and their caregivers as worthy of his intervention, not simply for the sake of the parents, but for the children’s own well-being.”¹¹ Jesus’ question about the duration of the boy’s condition (9:21) suggests his desire to understand the situation fully and to consider it seriously. Gary Brock observes, “To know about children in general is not to know about a particular child. Until the particular child is understood, very little ministry can occur.”¹² For struggling parents, encountering a portrait of Jesus that depicts him sharing similar concerns may come as a comfort. In the face of daunting health care costs, endless paperwork, and unreturned phone calls, a healer who freely bestows miraculous gifts may provide a measure of encouragement to exhausted parents. In the character of Jesus, parents may discover a doctor who performs an evaluation of his patient, assesses the implications for the larger family structure, and immediately offers the precise care that the situation requires. When modern health care fails to provide these services adequately, parents can return to the biblical text to be reminded that not all treatments are susceptible to human failings and limitations.

Recognizing and overcoming problematic elements

Despite these positive contributions, a critical reading of the boy’s healing reveals that not all of the possible theological implications of the stories of child healings will be beneficial to modern families. Three areas of concern demand critical consideration: the silence of the child in the narrative, Jesus’ obstinacy, and the central concern of the Gospel with matters other than children. While each of these concerns must be given proper attention, I will also suggest that there may be ways in which these problematic elements can be viewed in a more positive light.

Perhaps the most problematic of the theological implications of the stories of child healings is the silence of these children in the context of their narratives. They do not speak before, during, or after the healing that is performed for their benefit. Horn and Martens propose, “Their silent acceptance of healing is a lesson to the adult readers and hearers.”¹³ Similarly, Gundry views this silence as exemplary: “The parents themselves are not models of receiving the kingdom of God.... Rather, the children, who do nothing, not even believe, and on the contrary resist, *are* models.”¹⁴ Despite these positive readings, however, one must ask if denying individuals the opportunity to speak for themselves, even in a narrative, should ever be upheld as an ideal.

Upon closer examination, one may find that the silence could be helpfully reframed by recognizing that the problem is on the level of the narrative, not on

¹¹Cornelia Horn and John Martens, *“Let the Little Children Come to Me”*: *Childhood and Children in Early Christianity* (Washington, DC: Catholic University of America Press, 2009) 93.

¹²Gary Brock, “The Chronically Ill Child,” in *When Children Suffer: A Sourcebook for Ministry with Children in Crisis*, ed. Andrew D. Lester (Philadelphia: Westminster, 1987) 117.

¹³Horn and Martens, *“Let the Little Children Come to Me,”* 263.

¹⁴Gundry, “Children in the Gospel of Mark,” 153.

the level of theology. Such a recasting suggests that even though Mark does not include the voices of healed children, this does not suggest that the silence is an imperative to quash children's voices. That such silence is consistent with recently healed characters in Mark suggests that healed children as a character type differ little from healed adults. This correlation between healed children and adults suggests that the children may be seen as narratively equal to their adult counterparts. Furthermore, one may discover that this silence affirms the strength of the parent/child bond as parents are entrusted with speaking for their children. Miller-McLemore contends, "Because they [children] possess such incredible trust in and love for their parents...they stand in need of adult advocacy and parental protection."¹⁵ Thus, rather than reading the children's silence as a theological detriment, one may instead interpret it as a positive imperative for parents to speak on behalf of children who are unable to advocate for themselves.

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The second problematic feature of these healing accounts is the twin problem of Jesus' stubbornness and the ubiquitous happy endings for the children despite this stubbornness. After hearing the father of the mute boy recount the disciples' failed attempts, Jesus responds with a frustrated rebuke of the faithless generation (9:19) and admonishes the father for his use of the phrase "if you are able" (9:23).¹⁶ Jesus makes the parents' access to his power difficult to achieve. The equally problematic extension of this stubbornness is that after displaying initial pugnacity, Jesus simply performs the requested miracle. This sort of "happy ending" challenges the experience of many parents. The reality of trying to procure various accommodations or treatments is often far more difficult than the Markan miracle stories would suggest, even when Jesus' obstinacy is taken into consideration. Often, cures will prove impossible, and the false hope that might be instilled by reading these Markan accounts should be checked.

These twin problems may be viewed as surmountable when regarded in Mark's larger context where Jesus himself is identified as a son, namely, the Son of God (e.g., 1:1, 3:11, 5:7, 15:39). Mark provides the disturbing counternarrative of Jesus' experience as a caution against easy answers. Jesus' own misery highlights the depth of suffering experienced by the children and their families in the untold history that precedes the healing accounts, which are intertwined with Jesus such that "stories of healing highlight the need for faith...Mark seems to align the suf-

¹⁵Miller-McLemore, "Let the Children Come' Revisited," 462.

¹⁶Similar obstinacy occurs in the tale of the Syrophenician woman's daughter. After hearing the Syrophenician woman's request, Jesus responds in 7:27 with a harsh reply that compares the woman to a dog.

ferings of those whom Jesus heals with Jesus' own torment, which can be redeemed only by God (10:45; 14:24).¹⁷ Thus, although the stories of these children end happily, their larger setting in a Gospel that climaxes with the death of the healer himself suggests that these stories may still be a source of comfort to families who do not meet with easy answers. In the words of Paul, Mark offers resources to "rejoice with those who rejoice, [and] weep with those who weep" (Rom 12:15).

The final problematic element of these healing accounts is that the children are not the main focus of Mark's Gospel. This concern may have negative implications in two ways. First, by attending to the children and parents in these stories, we risk doing injustice to a text whose primary concern is not with these issues, and we can exploit the text for our own purposes. Second, in recognizing that the text is more occupied with Jesus than with the lives of the parents and children, modern parents and children can feel slighted not only by their communities, but even by the text upon which they base their beliefs. These twin problems suggest that the mining of these texts for support must be approached carefully.

While the stories of healed children play a role in the Gospel for a short while, they are ultimately caught up in the larger plan of the book to tell "the good news of Jesus Christ." This immense vision serves to provide the proper perspective for the vicissitudes of daily life in which it is tempting to become enmeshed.

Like the other problematic elements, this issue too may be reframed so as to be less troublesome than it first appears. Mark's agenda may serve as a gentle reminder to modern families that the worries of the moment should not eclipse larger concerns. While the stories of healed children play a role in the Gospel for a short while, they are ultimately caught up in the larger plan of the book to tell "the good news of Jesus Christ" (1:1). This immense vision serves to provide the proper perspective for the vicissitudes of daily life in which it is tempting to become enmeshed. While this may not diminish the day-to-day struggles of a child or her caregivers, it does suggest that there exists a hope that transcends even the appearance of death (see Mark 5:35, 9:26, 15:37).

The sum of all of these problematic elements may raise concern about just how many positive contributions Mark offers. At the very least, such concerns caution against the wholesale adoption of these texts as resources. Nonetheless, as the explication of positive contributions and the possible responses to these problems suggest, there remain numerous resources in these texts that *can* be a source of support and hope. Thus, the possibly negative consequences should serve only as a warning—not as a prohibition—against the exploration of these texts between pastor and family in which parents and children alike can be encouraged to see

¹⁷C. Clifton Black, "Does Suffering Possess Educational Value in Mark's Gospel?" *Perspectives in Religious Studies* 28/1 (2001) 95.

their own stories mirrored in the text. As the pastor explains the text, parents and children can be directed to place the narrative of their own experiences in conversation with the biblical one. This process may reveal that the hope reflected in the Gospel can enlighten what may appear to be an otherwise dark time in the life of the family.

This project has attempted the bold task of finding resources in an ancient text that can be used profitably for a particular modern demographic. Such an undertaking risks doing injustice both to the text itself and to the very demographic for which it is working. These risks are not to be taken lightly. Nonetheless, Mark contains positive resources for children with serious illnesses or disabilities and their caregivers, and the extraction of these resources can still remain faithful to the original text. These previously undiscovered resources can benefit today's children, their caregivers, and the pastors who provide care and counseling for both. ⊕



KIM SCHMIDT

MELANIE A. HOWARD is a PhD student in biblical studies (New Testament) at Princeton Theological Seminary. She holds a BA degree in biblical studies from Messiah College (2007) and an MTS degree in biblical studies from the University of Notre Dame (2010). She is an adjunct instructor at Messiah College and a teaching assistant at Princeton. Howard is a member of the Mennonite Church USA and has served congregations as a worship coordinator. A marathon runner, Howard was born and raised in central Pennsylvania; she now lives with her husband Jeremiah in Princeton.