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2017

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Pillay, Dhanashree (2017) Supernatural healing: narratives of individuals who report on the healing of a sensorineural hearing loss, University of the Witwatersrand, Johannesburg, https://hdl.handle.net/10539/26280

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Supernatural Healing: Narratives of individuals who report on the healing of a sensorineural hearing loss.

A thesis submitted to the Faculty of Humanities, University of the Witwatersrand,

Johannesburg, South Africa.

In the fulfilment of the requirements for the

Degree of Doctor of Philosophy

By

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2017

Abstract

Background: Science and Religion have been debated for centuries. Healthcare assessments and management have traditionally focused on the medical model of detecting and curing a disease, facilitating a narrow focus on the physical needs. There is little consideration for the psychological, social and spiritual factors that affect a human life. Healthcare however should operate in both the temporal and the spiritual spheres. More inclusive models of healthcare are becoming favourable as diversity of patients and health practitioners becomes more evident, hence this applies to the practice of Audiology services too. Hearing loss the 'hidden disability' is regarded as the number one disability in the world thus a significant proportion of the world's population is affection directly or indirectly by this communication hindering disability.

Prior to rehabilitation, finding a cure was the ultimate goal when considering any medical pathology. Presently there is still no surgical method available to replace the damaged hair cells of the cochlea that cause a sensorineural hearing loss (SNHL). The culturally diverse South African population comprises of individuals who belong to various ethnic and religious groups, thus the melting pot of rehabilitation techniques for any illness may vary from the predominantly used medical model. Supernatural healing may occur in various forms and from various sources within the South African population, including traditional healers, spiritual healers or religious leaders. Hence this study explored the narratives of individuals who claim that they have been healed supernaturally of a sensorineural hearing loss.

Methodology: This study aimed to fulfil three main objectives: to identify the recurring themes within the narratives of participants who reported a healing, with the purpose of deconstructing the aspect of healing amongst participants; to describe the cultural, religious, spiritual and social influences that impact the individual with a hearing loss; and to design a proposed working Audiological Model: An Integrated Model of service delivery in Audiology. There were three sub-objectives: to document the diagnosis of the sensorineural hearing loss; to identify the 'turning point' event or events that caused the reported healing; and to explore the influences of the healing on the participant's life. This study was an

exploratory case-study design within a qualitative paradigm. Snowball sampling was employed. Semi-structured interviews were conducted with seven participants, six of which were female and one male. Two of the participants' mothers were interviewed as the reported healing occurred when the participants were children. All ethical parameters were maintained. The data analysis included a narrative inquiry into the *context* of the main event which was the supernatural healing. Thereafter the *content* associated with the participant's life before and after the event was analysed and discussed. Thematic content analysis was employed to identify the common categories and themes within the narratives of this study.

Results and Discussion: This study identified four main categories and 13 themes within the narratives obtained. Categories included: Identification, assessment and management of a hearing loss; cause of a hearing loss; the healing event and the areas of a participant's life that changed by the healing event. Major themes included: Hearing loss and its relation to sin and curses; physical and non-physical healing; the life of prayer and reactions to the healing. The narratives illustrated that individuals with a hearing loss are seeking alternative healing practices in conjunction with Audiological care. There is a barrier between the audiologist and the individual with a hearing loss as there appears to be a lack of freedom to discuss pertinent aspects such as alternative care. There is a need for change within the service delivery model in Audiology, a shift from the medical model of practice to a more holistic and integrated model of service delivery that encompasses all areas of life into the assessment and management process.

Conclusion: A cohesive, integrated referral system and collaboration between professionals and caregivers are often the dictators of the assessment and early diagnosis of the hearing loss. A service delivery model that incorporates all aspects of life is therefore recommended within the profession of Audiology. The argument for a change in the current service delivery model in Audiology is supported by the evidence in the narratives obtained in this study. Individual's with a hearing loss are seeking for alternative means of healing and it is negligent and divisive to disregard the interconnectedness of the medical, psychological, social and spiritual facets that affect the individual being seen by an audiologist. The diversity in South Africa must be embraced and incorporated into the healthcare service delivery model to ensure that the individual with a hearing loss is receiving contextually

based services that are appropriate and necessary. Training of future audiologists must include multicultural and multidisciplinary areas as audiologists need to be equipped for success when they are faced with areas that are not familiar to the current medical model of practice. Healing is multidimensional and clinical practice in the field of Audiology must consider and include the aspects of healing that are relevant to the individual seen. A proposed case history section was developed from the evidence obtained in this study. The section allows the audiologist to explore religious and spiritual beliefs of the individual with a healing loss and his/her family. This study is one of the first studies that explore the relationship between medicine, religion and spirituality however these areas have been intertwined for centuries. The findings and recommendations in this study will assist audiologists in managing individuals in an integrated holistic manner.

Keywords: Healing, Supernatural, Hearing loss, Audiology practice, Alternative Practices, Biopsychosocial-Spiritual Practice.