Did Paul Hallucinate on the Damascus Road?: Defeating the Delusion Hypothesis with Cumulative Model of Evidentialism.

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Abstract

Paul's role in the historical setting of the Resurrection is far more than a matter of theological curiosity. The Christian justification for rational belief in the Resurrection is in large part anchored in Paul's justification for rational belief in the authenticity of his own experience. In Paul we find the earliest and best attested documentary evidence for a historical investigation of the miraculous event. Moreover, his epistles are an indispensable source of independent corroboration of the gospel narratives.

While critics of the Resurrection have attempted to explain Paul's experience on the Damascus Road by a number of naturalistic accounts, contemporary variants of the *Delusion hypothesis* (DH) offer perhaps the most promising of such skeptical alternatives. The article that follows argues that contemporary versions of DH fail to satisfy the criteria of a superior historical description. Further, the epistemic model of *cumulative evidentialism* is applied to show that Paul's claim to have encountered the risen Jesus would resist a strong potential defeater.

Paul and the Doctrine of the Resurrection

Consider the role of Paul in the historical setting of the Resurrection. Though last among the apostles to encounter the risen Savior, the story of his own visionary experience is the most salient (Acts 9:1–9, 26:12–32; 1 Cor. 15:8; Gal. 1:11–24). Paul tells us that saving faith hinges on the historicity of the Easter miracle (1 Cor. 15:14): Christ was raised as the "firstfruits" of the church's corporate redemption (vv. 20–23), and it is his victory over death that justifies the believer's hope for personal immortality. It was apostolic practice to "contend for the faith" (Jude 1:3) by making an *apologia* of the Resurrection in dialogue with unbelievers; and for Paul, this was especially the case. The Resurrection was the centerpiece of his preaching ministry; and in a variety of kerygmatic situations, his proclamation of the gospel was complemented by a rational defense of the supernatural occurrence (Acts 17:2–3, 26:1–29).

While the meaning and implications of Jesus' return from the grave are informed predominantly by Paul, his contribution to biblical writ is far more than a matter of theological interest. The believer's justification for rational belief in their Lord's miraculous return is in large part anchored in Paul's justification for rational belief in the authenticity of his own experience, as well as the experiences of his fellow believers. In Paul we find more than a key feature of the Resurrection narrative; he provides us with the primary source material of historiographical analysis. Paul furnishes the earliest and best-attested evidence for the Resurrection, and his epistles are indispensable as independent corroboration of the gospel narratives.

The Delusion Hypothesis

Since our knowledge of the Resurrection depends so critically on Paul, it is to be expected that the origin of his faith persists as a central focus of skeptical challenges to the claim that "[Jesus] was that he was raised on the third day in accordance with the Scriptures" (1 Cor. 15:4). Among the most enduring and formidable of such critiques of Paul's belief in the Resurrection (PBR) is the *Delusion hypothesis* (DH). Proponents of this view survey the biblical data to conclude that Paul's revelation can be reduced to the contents of his own consciousness, not an objective occurrence of divine origin. Stated in terms of medical science, the apostle suffered from an undiagnosed pathology, and his belief in the Resurrection should be attributed to an ecstatic hallucination, bereavement vision, or other psychiatric symptom.

Hypotheses subsumed under this category of Resurrection accounts may enjoy popularity among critics of the present, but their pedigree is by no means recent. The second-century Greek philosopher Celsus (d. 177) thought that the disciples "through wishful thinking had a hallucination due to some mistaken notion."¹ Persuaded likewise was the nineteenth-century German theologian David Strauss (d. 1874), whose *A New Life of Jesus* (1879) argued for visionary projections as the provenance of early Christian belief in the Resurrection. Of Paul, he writes, "Paul saw him as it were in a vision, that is through the medium of his own enraptured power of imagination."²

In the 20th century, the general conception of Paul's experience as a strictly mental event developed under the analytic paradigms of psychology and psychiatry. Modern variants of the DH draw from these fields to explain the apostle's testimony as a disordered state of mind. Let us now consider a brief overview of four such variants.

Alternative Forms of the DH

We begin with Gerd Lüdemann (d. 2021), who interprets Paul's Damascus road experience as a *subjective vision*. Lüdemann substantiates this contention by drawing on Jung's depth psychology to psychoanalyze Paul as suffering from a guilt complex.³ His latent attraction to Christianity manifested in zealous obedience to the Law and persecution of the church. Paul's state of inner conflict culminated in a hallucinatory impression and subsequent conversion to the faith he once oppressed:

If one had been able to analyze Paul prior to his Damascus vision, the analysis would probably have shown a strong inclination to Christ in his subconscious; indeed, the assumption that he was unconsciously Christian is then no longer so farfetched. The guilt complex which had arisen with the persecution was resolved through the certainty of being in Christ.⁴

¹Henry Chadwick, *Origen: Contra Celsum* (Cambridge: Cambridge University Press, 2003), 109. This account is provided by the early Christian theologian, Origen (d. 253).

² David F. Strauss, A New Life of Jesus, vol. 1 (London: Green and Sons, 1879), 381.

³ Carl Gustav Jung's (d. 1961) *depth psychology* is an approach to research and therapy that focuses on the unconscious and transpersonal aspects of the human mind and experience.

⁴ Gerd Lüdemann, *The Resurrection of Jesus: History, Experience, Theology* (Minneapolis, MN: Fortress, 1994), 26–27. Of his own vision (1 Cor. 9:1), Paul uses the word ὀράω ("to see with the eyes" or "perceive") and describes the resurrection appearances of Peter, the Twelve, and the five hundred brethren in the same language (15:3–7). For Lüdemann, Paul's experience is thus paradigmatic for the historian's assessment of the other apostles' experiences and subsequent beliefs.

By a contagious religious ecstasy and common psychological disposition, the earliest believers came to experience similar hallucinations,⁵ their faith engendered by a "shared hallucinatory fantasy."⁶

For Jack A. Kent, Paul's claim to have seen the risen Jesus should be explained as a case of *conversion disorder* (or *functional neurological symptom disorder*).⁷ He theorizes that this condition was engendered at Paul's consent to the execution of Stephen, the first Christian martyr (Acts 7:57–59). In this state of inner turmoil, Paul's emotional stress was converted into neurophysiological symptoms, including temporary blindness. Says Kent:

This is consistent with what happened to Paul. He was walking along the road and suddenly fell to the ground and was blinded. This was not under voluntary control. This characteristic of conversion disorder is very important because it led Paul to believe that what happened to him was an act of God. Also Paul would never have known what really happened to him...This is consistent with the involuntary nature of conversion disorder.⁸

Intersecting streams of thought in Lüdemann and Kent is Michael Goulder (d. 2010). His hypothesis draws from Jung's theory of neurosis to propose that Paul's persecution of the church led to internal conflict and, eventually, a "conversion vision."⁹ As Goulder explains:

The incident on the way to Damascus marks the moment when the unconscious complex of Christianity broke through into the consciousness. Unable to conceive of himself as a Christian on account of his resistance to Christ, he became blind, and could only regain his sight through complete submission to Christianity.¹⁰

⁶ Lüdemann, Resurrection of Christ, 176.

⁸ Jack A. Kent, The Psychological Origins of the Resurrection Myth (London: Open Gate, 1999), 56.

⁹ Michael Goulder, "The Baseless Fabric of a Vision," in *Resurrection Reconsidered*, ed. Gavin D'Costa (Oxford: Oneworld, 1996), 49.

¹⁰ Goulder, 52.

⁵ Lüdemann explains this as follows:

If we return to the relationship between Paul's Easter experience and that of Peter it has to be said: (a) both experience an 'original' revelation, whereas all the other Easter revelations are dependent revelations. Peter's vision of Christ shaped all the other visions of the exalted Lord in the circle of the disciples, with the exception of the vision of Paul, who had not known Jesus and Peter at all in his pre-Christian periods. (b) For both, furthermore, the vision of Jesus is indissolubly connected with the denial of Jesus or the persecution of his community. (c) In both cases the guilt feeling is replaced by the certainty of grace. (d) Both may have shared a similar doctrine of justification, even if these did not completely correspond...Where grace is understood in the power of its invitation, the notion of forgiveness is understood in unobtrusive simplicity. Peter had transgressed or sinned against Jesus by denying him. But under the impact of Jesus' proclamation and death, Peter, through an experience of the 'risen Lord', related to God's word of forgiveness present in the activity of Jesus once again to himself, this time in its profound clarity. (See Lüdemann, *Resurrection of Jesus*, 96.)

⁷ Conversion disorder is a condition consisting of neurologic symptoms or deficits that develop unconsciously and nonvolitionally and usually involve motor or sensory function. The manifestations are incompatible with known pathophysiologic mechanisms or anatomic pathways. Onset, exacerbation, or maintenance of conversion symptoms is commonly attributed to mental factors, such as stress.

The agonizing forces of Paul's psyche found outward expression in psychogenic blindness and a subjective revelation that offered a "new self-image and way of life." His conversion experience was a resolution that redefined his self-understanding and reoriented him toward Christ.¹¹

A more recent psychohistorical explanation is offered by Richard Carrier, who identifies symptoms of a relatively rare mental illness—*schizotypal personality disorder* (SPD)—as commonplace among the first Christians: "Christianity began as a charismatic cult in which many of its leaders and members displayed evidence of schizotypal personalities. They naturally and regularly hallucinated (seeing visions and hearing voices)."¹² He expounds further,

For example, where we find cults that socially integrate schizotypals or even elevate them to positions of leadership, we find that schizotypals begin to congregate and socialize...[I]n antiquity, where schizotypals would routinely be regarded as prophets and holy men (and not seen as insane, as they are in modern cultures), we can expect schizotypals will actually gravitate into religious cults that socially integrate them or even grant them influence and status.¹³

On this basis, it is inferred that Paul was a schizotypal personality who hallucinated an appearance of Jesus:

In Acts 9, Paul hallucinates a booming voice and a beaming light from heaven (and suffers hysterical blindness as a result)...In Gal. 1.11–12, Paul says he learned the gospel only from a hallucinated encounter with Jesus (a "revelation") whom he experienced "within" himself (Gal. 1.16).¹⁴

Evaluating the DH

Though it may remain popular among doubters of the Resurrection, the DH lacks the explanatory power and plausibility required to adequately account for PBR.¹⁵ From the outset, hypotheses of this kind are predicated on the highly controversial research genre of *psychobiography* (or *psychohistory*), which renders them significantly less plausible than their denial. Episodes of hallucination are symptomatic of disordered mental states arising from alterations of brain structure and function, disturbances of neurotransmission, or intrusions of the

¹¹ Goulder, "The Explanatory Power of Conversion-Visions," in *Jesus' Resurrection: Fact or Figment? A Debate between William Lane Craig and Gerd Lüdemann*, ed. Paul Copan and Ronald K Tacelli (Downers Grove, IL: InterVarsity, 2000), 87.

¹² Richard Carrier, On the Historicity of Jesus: Why We Might Have Reason for Doubt (Sheffield, UK: Sheffield Phoenix, 2014), 124.

¹³ Carrier, 128-29.

¹⁴ Carrier, 135.

¹⁵ A now standard process of historical inquiry utilizes a method of logical inference known as *abductive reasoning* or, more frequently, *inference to the best explanation*. On the abductive model, descriptions of the past are conceived upon the basis of accessible evidence and then tested in terms of various conditions. Among such conditions. The condition of *explanatory power* requires that a hypothesis must make the observation statements it implies more probable than any other. On the condition of plausibility, a hypothesis must be implied to some degree by a greater variety of accepted truths than any other and be implied more strongly than any other, and its probable negation must be implied by fewer beliefs and implied less strongly than any other.

unconscious into the conscious mind.¹⁶ An accurate clinical assessment would require knowledge of etiologic and pathologic factors associated with the foregoing categories, as well as proper diagnostic conditions. The insuperable obstacle here is that diagnoses of mental disorder from a historical and cultural distance are speculative at best. Not only can the patient not be examined under the sort of controlled conditions that favor an accurate clinical impression, but the text contains only scant information of diagnostic relevance.¹⁷ It is for this reason that psychobiography is rejected by a vast majority of historians as a reliable mode of inquiry. In recognition of this, Martin Hengel remarks, "Lüdemann…does not recognize these limits on the historian. Here he gets into the realm of psychological explanations, for which no verification is really possible…The sources are far too limited for such psychologizing analyses."¹⁸

While the drift of academic discourse on the Resurrection has undeniably been influenced by Lüdemann's guilt-complex and subjective-vision hypothesis, it can be confuted on multiple grounds. For the sake of argument, let us suppose that his psychobiographical approach is sound and that the biblical data are sufficient to his investigative task. We may then proceed by asking, "Can it be cogently argued that Paul was overwhelmed by a guilt complex while persecuting the early followers of Christ?" Judging by what may be gleaned from his autobiographical information, quite the opposite should be concluded! Rather than being conflicted, Paul fully intended to continue his persecution of the church by traveling to Damascus (Acts 1, 2). Even when describing himself as a "persecutor of the church," he assures his reader that he was "found blameless" as to "the righteousness which is in the Law" (Phil. 3:5–6 NASB).¹⁹ In what is perhaps his most self-denigrating remark, Paul speaks of himself as "the least of the apostles, unworthy to be called an apostle, because I persecuted the church of God" (1 Cor. 15:9 ESV).

¹⁸ Martin Hengel and Anna Maria Schwemer, *Paul between Damascus and Antioch*, trans. John Bowden (Louisville, KY: Westminster John Knox, 1997), 342; cf. 40–41.

¹⁶ When assessing explanatory power of the disorder defined by the hallucination hypothesis, it can be helpful to distinguish among three types of etiology: *psychophysiologic, psychobiochemical*, and *psychodynamic*. See Ryan C. Teeple, Jason P. Caplan, and Theodore A. Stern, "Visual Hallucinations: Differential Diagnosis and Treatment," *Journal of Clinical Psychiatry* 11 (2009): 26–32.

¹⁷ As indicated by the critical comments to follow, issues of evidential adequacy and epistemic access have done much to undermine the general utility of psychohistory. "The psychoanalyst (or 'psychohistorian') who wishes to use psychological materials in an effort to obtain a deeper understanding of a historical figure, or in the reconstruction of historical events, is, however, confronted with major problems of evidence. In conducting a psychoanalysis the investigator has only to wait and he is likely, through the process of free association, interpretation, and working through, to obtain systematic data concerning his patient's past history, motivations, conflicts, and ego strengths...When we try to apply psychological methods to a historical figure, we have no such cooperation and no analogous systematic way to obtain information." See John E. Mack, "Psychoanalysis and Historical Biography," Journal of the American Psychoanalytic Association, 19 (1971): 153. "The historian's most serious objection to psychohistory is that sweeping declarations about actions or personalities are based on sparse evidence." See Terry H. Anderson, "Becoming Sane with Psychohistory," Historian 41 (Nov. 1978): 11. "[The psychohistorian's] 'tools,' his 'method,' his 'data'—is indirect and necessarily scant: the patient is absent, and the clues he may have left to his once living psyche are the product of chance." See Jacques Barzun, Clio and the Doctors: Psycho-history, Quanto-history and History (Chicago: University of Chicago Press, 1974), 46. Even for strong proponents of the approach, specific limitations are recognized. William Runyan, for instance, acknowledges that "attention is best devoted to historical figures about whom there is sufficient evidence to develop and test psychological explanations...The problems of evidence mean that some types of questions cannot be answered about some individuals." See William Runyan, Life Histories and Psychobiography: Explorations in Theory and Method (New York: Oxford University, 1982), 204. For those who would make use of psychohistorical techniques in the case of Paul, the paucity of relevant data presents an insurmountable problem.

¹⁹ See Krister Stendahl's Paul among Jews and Gentiles (Minneapolis, MN: Fortress, 1976).

However, far from giving us reason to suspect that he suffered a guilty conscience during his preconversion life as an enemy of the church, this statement is an expression of repentant humility made during his postconversion life as a servant of the church.

A hallucination is a perception of an external stimulus where none exits. Such a misperception projects the percipient's own mental contents and, therefore, cannot involve anything not already contained in the consciousness. Given Lüdemann's guilt-complex hypothesis and what is known of Paul's religious education and sociocultural background, we should expect him to have projected visions of Jesus in a celestial context, comforted at Abraham's bosom (Luke 16:19–31) and in company with the prophets (Matt. 17:1–8; Mark 9:2–8; Luke 9:28–36; 2 Pet. 1:16–18). Assuming that Paul suffered a deep sense of guilt for his persecution of the Way and unconsciously identified as a Christian, his vision of Jesus ought to have been in a paradisial setting.²⁰ In contrast, Paul's experience of Jesus is grounded in the relatively mundane context of the Damascus road. Transformed and energized by this experience, he would have almost certainly begun to proclaim the Lord's triumphant ascension into the abode of the righteous. Instead, we find Paul preaching a message of atonement on the cross and resurrection from the dead. This would have been diametrically opposed to the eschatological expectation of all sects of Judaism at the time, especially the orthodox party of which Paul was a member.

If Paul's hallucination is to be taken as a projection of thought-forms contained within his subconscious mind, another difficulty arises. Paul spoke of Jesus as having been resurrected by the power of God, but Pharisaic Judaism anticipated only a corporate and eschatological resurrection of the dead. The righteous dead were to be raised and judged collectively on the Last Day. Joachim Jeremias comments,

Ancient Judaism did not know of an anticipated resurrection as an event of history. Nowhere does one find in the literature anything comparable to the resurrection of Jesus. Certainly resurrections of the dead were known, but these always concerned resuscitations, the return to the earthly life. In no place in the later Judaic literature does it concern a resurrection...as an event of history.²¹

Another problem with defining Paul's testimony as a subjective vision is that, at approximately that same time, a parallel vision was experienced by "a disciple at Damascus named Ananias" (Acts 9:10 ESV). It could be argued that Ananias's vision was also a delusion. However, if this were the case, it seems fantastically coincidental that his delusion should exonerate Paul of "how much evil he has done to [the] saints at Jerusalem" and validate his calling as an apostle to "the Gentiles and kings and the children of Israel" (vv. 13–15).

What about the possibility of bereavement visions? Lüdemann attempts to explain Peter's encounters with the resurrected Jesus in terms of disordered grief. This explanation is obviously inapplicable to Paul, who had no relationship with Jesus during his earthly life and hence no emotional attachment to him. But pathological grief could not account for Peter or, for that

²⁰ One might posit the same for Peter and the other apostles. Given their worldview and messianic expectation for Jesus (Mark 8:29), it seems much more probable that the Jesus of their hallucinations would have resembled the "Son of Man" figure of Dan. 7:13. Rather than walking with them on the road to Emmaus or appearing "behind closed doors" in their homes, we should expect the disciples to have seen their Lord in a glorified setting, perhaps "sitting at the right hand of the Power, and coming with the clouds of heaven" (Mark 14:62).

²¹ Joachim Jeremias, "Die Älteste Schicht der Osterüberlieferungen," in *Resurrexit*, ed. Édouard Dhanis (Rome: Libreria Editrice Vaticana, 1974), 194.

matter, anyone who enjoyed an intimate friendship with Jesus. Postbereavement visual hallucinations would hardly have led the disciples to believe their teacher had been resurrected from the dead and returned to life on earth. Rather, they would have concluded that they had seen Jesus as an apparition in the afterlife.²²

Kent's conversion hypothesis fairs no better. Not only are the critical preconditions of Paul's situation unknown; the scriptural evidence is entirely inconsistent with the general presentation of functional neurological symptom disorder (conversion disorder).²³ The American Psychiatric Association, for example, notes "that the diagnosis of conversion disorder should be based on the overall clinical picture and not a single clinical finding."²⁴ With the exception of temporary blindness, the biblical accounts give no indication of the sensory impairments or motor deficits commonly associated with this condition.

Though one may find literary sources that discuss conversion hallucinations,²⁵ hallucination is not listed as a diagnostic criterion for conversion disorder. When present, the hallucinatory disturbances are often referred to as "pseudo-hallucinations" in which patients are generally cognizant that their misperceptions are not real.²⁶ Paul was of course certain of the reality of his experience. Conversion hallucinations typically happen in the absence of other psychotic symptoms, and yet Paul must have suffered from the persistent psychosis of a "Messiah complex,"²⁷ for he was convinced that God had chosen him to undertake a mission that would bring salvation to the non-Jewish world. To rescue this explanation, one would have to propose a dual diagnosis that conjoined conversion disorder to another pathologic process. (But this would make the explanation even more improbable and, in addition, ad hoc.)²⁸ The symptoms of conversion disorder are known to be short-lived, especially when associated with a rapid onset.²⁹ Dissimilarly, Paul's "hallucinations" recurred throughout his ministry as he continued to receive revelations. Further complicating this hypothesis are numerous epidemiological considerations. Conversion disorder is significantly more common in females (ratios range from 2:1 to 10:1); it has an onset of late childhood to early adulthood (age 10–35); and it "has been linked with lower socio-economic status, lower education, lack of psychological sophistication, and rural setting."³⁰ Simply put, Paul conforms in no way to the foregoing description.

²² For an inhabitant of the ancient world, visions of the deceased were seen not as evidence that the person was alive, but as evidence that the person was dead.

²³ "Conversion disorder" appears in the DSM-5 under the subtitle "functional neurological symptom disorder."

²⁴ See American Psychiatric Association, "Conversion Disorder," in *Diagnostic and Statistical Manual of Mental Disorders*, 5th ed. (Arlington, VA: American Psychiatric, 2013), 319.

²⁵ To cite one example, see Robert E. Hales et al., eds., "Conversion Disorder," in *The American Psychiatric Publishing Textbook of Psychiatry* (Washington, DC: American Psychiatric, 2008), 627. The updated sixth edition of this text (2014) does not discuss this disorder in association with hallucinations.

²⁶ Hales, et al., 627.

²⁷ Gary R. Habermas and Mike R. Licona, *The Case for the Resurrection of Jesus* (Grand Rapids, MI: Kregel, 2004), 114.

²⁸ In addition to other criteria, the abductive model requires that a superior hypothesis be less *ad hoc* than any other incompatible hypothesis about the same subject; that is, it must include fewer new suppositions about the past that are not already implied to some extent by existing beliefs.

²⁹ See American Psychiatric Association, *Diagnostic and Statistical Manual*; Harvard Health Publishing, "Conversion Disorder," Harvard Medical School, accessed Apr. 1, 2018, https://www.health.harvard .edu/mind-andmood/conversion-disorder.

³⁰ Hales et al., American Psychiatric Publishing Textbook, 544.

Arguably more defective is Goulder's conversion hypothesis. The central concepts and methodological suppositions of Jungian theory are dubitable as a foundation of historical investigation. We are thus warranted in refusing the insights of an approach not generally accepted in the field of modern psychiatry. Goulder's reliance upon Jung's psychohistorical analysis of Paul undermines the plausibility of his conclusions.

Neither should it escape notice that Goulder's use of the term *conversion vision* is rather peculiar. His concept of "conversion" bears no resemblance to the diagnostic features of this condition as in the medical literature. According to Joseph Bergeron and Gary Habermas, "Goulder's proposition that Paul had a 'conversion vision' of Jesus simultaneous with psychogenic conversion disorder-blindness is conceptually divergent from current understanding of conversion disorder."³¹ The symptomology of conversion disorder is defined by a recognizable pattern of neurophysiologic dysfunction that gives us no reason to think that an intense desire to see Jesus (either consciously or subconsciously) would give rise to a hallucination and, concurrently, acute visual impairment.

We can be charitable in surmising that he introduces the term conversion vision not to denote an ad hoc concept unrecognized in the field of modern psychiatry, but rather as a neologism for a mental phenomenon that, as he says, "psychologists would say [are] hallucinations, both in hearing voices and in seeing things." However, if this is in fact the case, then Goulder's hypothesis amounts to only a symptom of many potential disordered mental states. His explanation purports to be scientific, and yet it lacks a proper diagnostic category as well as further evidence to support it. This greatly degrades the explanatory power of the hypothesis.

Like the preceding scholars, Carrier's schizotypal hypothesis is an unsuccessful attempt to explain Paul's experience of the resurrected Jesus in purely psychiatric terms. To evaluate the soundness of his explanation, we return to the standard of diagnosis and compare the essential characteristics of this mental disorder to the biblical portrait of Paul. According to the DSM-5, schizotypal personality disorder is identified by "a pervasive pattern of social and interpersonal deficits marked by acute discomfort with, and reduced capacity for, close relationships as well as by cognitive or perceptual distortions and eccentricities of behavior, beginning by early adulthood and present in a variety of contexts."³² This pattern may be established if five or more of the following are present:

- ideas of reference (i.e., the phenomenon of an individual's experiencing innocuous events or mere coincidences and believing they have strong personal significance)
- odd beliefs or magical thinking that influences behavior and is inconsistent with subcultural norms (e.g., superstitiousness or belief in clairvoyance, telepathy, or a "sixth sense")
- unusual perceptual experiences (e.g., bodily illusions)
- odd thinking and speech (e.g., vague, circumstantial, metaphorical, overelaborate, or stereotyped speech)
- suspicious or paranoid ideation
- inappropriate or constricted affect

³¹ Joseph Bergeron and Gary R. Habermas, "The Resurrection of Jesus: A Clinical Review of Psychiatric Hypothesis for the Biblical Story of Easter," *Faculty Publications and Presentations* (2015): paper 402.

³² See American Psychiatric Association, "Schizotypal Personality Disorder," in *Diagnostic and Statistical Manual*, 655–59.

- odd, eccentric, or peculiar behavior or appearance
- lack of close friends or confidants other than first-degree relatives
- excessive social anxiety that does not diminish with familiarity and tends to be associated with paranoid fears rather than negative judgments about self.³³

With this in mind, we once again adopt the techniques of psychohistory in our consideration of Paul, a personality who sharply contrasts with this clinical description. Does he strike us as someone who fits a pattern of "social and interpersonal deficits," is distressed by "excessive social anxiety," and lacks "close friends or confidants"? On the contrary, the apostle is outgoing and bold (Acts 17), engaging in doctrinal controversy (Gal. 2:11–14; Acts 15:36–40) and in conflict with the Jewish community and Roman authorities on several occasions (2 Cor. 11:24; Acts 21:27–36). His ability to function within working relationships and maintain intimate friendships is hardly deniable. Luke, a traveling companion of Paul, records several narratives of the missionary travels and trials of Paul and his fellow bondservant, Silas (Acts 15-18). Their partnership forms a mutually supportive and highly productive ministry team that endures harsh opposition and suffering (16:16-24). Further, Paul seems to have maintained a close mentorship with two younger ministers, Titus and Timothy (see the epistles by those names). Paul's theological reflections provide further difficulties for the DH. At no point in his pastoral correspondences can one detect markers of the often cognitive distortions or emotive abnormalities that characterize the schizotypal mind. His treatments of Christian doctrine³⁴ are among the most coherent and profound discussions in all of scripture. He offers insight on the nature of love (1 Cor. 13), exhortations to exercise the "fruit of the Spirit" (love, joy, peace, forbearance, kindness, goodness, faithfulness, gentleness, and self-control; Gal. 5:22-23), and words of counsel on the duties of marriage (Eph. 5). Paul expounds such ethical themes as compassion, fidelity, humility, contentment, and selflessness and even holds himself up as an exemplar of Christian virtue, urging his readers to imitate his pattern of discipleship (1 Cor. 4:15-17; 1 Cor. 11:1; Phil. 3:17, 4:9).

What about such diagnostic features as "odd beliefs or magical thinking that influences behavior and is inconsistent with subcultural norms"? Of special relevance to our evaluation of Carrier's psychobiographical description is that the patterns of belief and behavior associated with this disorder must be considered in view of Paul's religious and cultural milieu. The clinician is thus advised, "Pervasive culturally determined characteristics, particularly those regarding religious beliefs and rituals, can appear to be schizotypal to the uninformed outsider (e.g.,...speaking in tongues, life beyond death...)."³⁵ The "evidence" offered in corroboration of Carrier's hypothesis is wholly consistent with the expected norms of religious practice in Paul's

³³ American Psychiatric Association, 655–59.

³⁴ For example, the epistles to Rome, Galatia, and Corinth.

³⁵ American Psychiatric Association, 657. Why is it that in the mental health community, claims of religious/ mystical experience do not immediately warrant suspicion of a disordered mental state, let alone provide a definitive basis for diagnosis? First, there is the issue of attendant symptomology: the clinician would naturally ask, "Does the individual show obvious signs of pathology?" Second, the clinician must ask a number of questions relevant to cultural context: "Does the claimed experience conform to some religious tradition that is dominant in a culture? Does it make sense to a particular faith community, or does it deviate from the norm? Is it consistent with the religious tradition's scripture, practices, and beliefs, or does it challenge them?" Regardless of his or her position on the question of God's existence, for most cultures throughout human history, the idea of communion with a supreme being or metaphysical reality is not met with strong incredulity and suspicion of insanity. Though preponderantly secular in personal and professional outlook, there is general acknowledgment among psychologists that religious beliefs and practices are completely consonant with social adaptedness, emotional well-being, and cognitive clarity.

cultural context. If ignorant of this caveat, the uneducated onlooker at a charismatic worship service might be inclined to think (along with Carrier, apparently) that he is observing a cult of "socially integrated" schizotypals who have come together to "congregate and socialize"!³⁶

In concluding evaluation, Carrier's effort to diagnose Paul as schizotypal betrays ignorance of the perceptual distortions, bizarre actions, and social maladaptation that define this disorder. Even if psychobiography were a viable avenue of historical study in this case, the biblical information gives us no basis of evidence for this mental disorder. Just as for those preceding it, this alternative form of the DH proves unsustainable.

A Potential Defeater and Cumulative Evidentialism

The foregoing hypotheses of the delusion type fail to satisfy the conditions of a strong historical description and, hence, to show convincingly that PBR is best explained as the result of improperly functioning cognitive faculties. Yet we should wonder how Paul's belief might withstand a potentially serious defeater³⁷ in a future, comparatively advanced form of the DH. We can develop this idea through a simple thought experiment in which a new consideration is introduced to undercut the basis of Paul's belief and discredit his testimony. This defeater might also give us cause to abandon the current hypothesis in favor of a competing position.

Let us imagine a critic who acknowledges that truth-claims of a religious category cannot be dismissed from the outset for reason of intrinsic improbability, metaphysical prejudice, or other such reason. The evidence of Paul's testimony must be judged on its own merits, even if it is offered for a purportedly supernatural event. Nonetheless, he maintains, the merit of this evidence has been called into question: the biblical texts were recently reexamined by means of newly developed procedures of historical detection, fresh insights were drawn from the psychology of religion, and an advanced understanding was gained of neuropsychiatric and psychological disorders associated with hallucinatory states of consciousness that frequently feature religious themes. The conclusion of this innovative research was that Paul suffered from a mental illness—a finding that has been interpreted to imply that his impression of the Resurrection was most likely the result of improperly functioning cognitive faculties. It now appears that (just as some have argued) the source of Paul's belief in the risen Christ was an impairment of mind. Thus there is good cause to think that the DH is tenable, if not the prevailing explanation of PBR. If this situation were to occur, must we entirely abandon the view that Paul was reasonably motivated with respect to his belief? If so, would we then be obligated to deem his testimony undependable and adopt the alternative account?

Even if it were to be convincingly argued that Paul met the diagnostic criteria of a condition known to produce complex visual and auditory hallucinations of a religious nature, this

³⁶ The question of *mass hallucinations* is of relevance to any study of the origin of primitive Christian belief in the Resurrection. The concept of simultaneous, identical, collective hallucinations has been posited to explain biblical reports of Jesus' postmortem appearances before groups of people (1 Cor. 15:6; Luke 14; John 21). First, the diversity of individuals, groups, locations, and times of these appearances makes the idea of such a psychological phenomenon simply untenable. Second, hallucinations of this sort are simply not recognized in the peer-reviewed literature, nor do they appear in the DSM. Attempts to explain manifestations of Jesus before groups of people are thus extremely implausible and ad hoc.

³⁷ Epistemic defeaters may be categorized as *rebutting* or *undercutting*. A rebutting defeater against some belief p is an overriding reason for supposing that p is not the case. An undercutting defeater is an overriding reason for supposing that the grounds of some belief p are inadequate (i.e., do not provide the appropriate sort of support for the belief p). In the present context, an epistemic defeater would be a new item of evidence or an argument that directly rebuts Paul's claim as logically defective or undercuts its evidential grounds.

would in no way eliminate the possibility that his experience on the Damascus road was veridical and his belief true. The sensory perceptions and belief states of psychotics may not always accurately correspond to the external world, but it does not follow from this that their sensory perceptions and belief states are invariably false. That said, a scientific finding such as proposed above (if substantiated by process of peer review and replication of research outcomes) could certainly undermine our confidence that Paul's belief was formed in a reliable way. From an epistemic perspective, this is to say that we would have reason to downgrade the justification ascribed to PBR or, worse yet, to deny that PBR is to any degree justified. And while unjustified beliefs may be true by fortuitous chance,³⁸ on the assessment of the historical critic, such a challenge to the rational foundation of PBR stands to decrease the chance that it is true and hence that his testimony should be trusted.

But Paul is not without a source of justification to elevate the epistemic status of his belief and counter this defeater. A fair appraisal of PBR cannot be made in isolation from the body of Resurrection beliefs held by the apostolic community. As shall be shown, the propositional evidence of Paul's testimony³⁹ can be analyzed within a set that functions to bolster the justification of its members such that each is made more probable than if assessed apart from the others. Epistemic justification of this sort may be termed *cumulative evidentialism*.⁴⁰ On this form of the evidentialist thesis, the rational grounds of any belief included in a set (or system) of *epistemically independent, internally coherent*, and *evidentially concurrent beliefs* may be supported by virtue of that set's *positive interrelations*.⁴¹ Not unlike the strands of a cord, whose individual strength is enhanced when woven together with other strands, the degree of confidence that a believer may justifiably have toward a given proposition is increased if it is included in a group of propositions justified in relation to one another.⁴²

³⁸ By *veridic epistemic luck*, beliefs sometimes happen to be correct apart from adequate justification.

³⁹ The supposition here is that evidence is constituted of explained and believed propositions about events, objects, ideas, or states of affairs. For epistemologists who hold this view, evidence is treated in the propositional sense. In this context, the evidence of testimony is a linguistic expression of explained and believed propositions about the Resurrection.

⁴⁰ Evidentialism is a theory of epistemic justification that holds that a person S is justified in believing a proposition p at time t if S's belief p is based on sufficient evidence. The cumulative variant of this theory states that the successive addition of items of evidence, if properly related, can increase the justification of any particular item of evidence within the set and thus the probability of its truth.

⁴¹ A set or system of *epistemically independent* propositions is such that each member originates apart from the set. A set or system of propositions is said to be *internally coherent* if no two or more propositions imply a logical contradiction when conjoined. (A more exacting standard of internal coherence could require the absence of any inconsistent relation among propositions.) Finally, a set or system of *evidentially concurrent* propositions will converge on a single point, or suggest the same conclusion. All three of these may be predicated on a *positively interrelated* set.

⁴² Supporters of *cumulative evidentialism* have been known to make use of the analogy of a rope. Irwin H. Linton provides one example: "It is a commonplace that while one thread of a three stranded rope may possibly be broken, the three strands twisted together and each multiplying the strength of the others may produce a tensile strength beyond the power to overcome." See Irwin H. Linton, *A Lawyer Examines the Bible* (Grand Rapids, MI: Baker, 1943), 195. J. P. Moreland states, "A rope metaphor is more appropriate. Just as several strands make a rope stronger than just a few strands, so the many-stranded case for God is made stronger than would be the case with only a few strands of evidence." See J. P. Moreland, "Atheism and Leaky Buckets: The Christian Rope Pulls Tighter," in *Does God Exist? The Debate between Theists and Atheists* (Buffalo, NY: Prometheus, 1993), 240.

As an approach to justification of religious beliefs, the cumulative model of evidentialism has been conceived in a number of forms and described variously.⁴³ John H. Newman (d. 1890) proposed that contemplation of the "culmination of probabilities" is the "real and necessary method" to arrive at certainty of concrete matters in human life.⁴⁴ D. Elton Trueblood (d. 1994) spoke of the "attendant necessity of cumulative evidence" in all domains of human knowledge, including religious epistemology:

The chief way in which we approach certainty as a limit is by the discovery of converging lines of evidence. Any single piece of evidence must be respected, but the chance of avoiding error is vastly increased if there is support from independent sources. The difference between one line of evidence and two or three, pointing in the same direction, is tremendous. This is the point of Butler's famous aphorism, "For probable proofs, by being added, not only increase the evidence but multiply it."⁴⁵

William Alston (d. 2009) also favored a cumulative structure of justified belief: "Thus I take the 'cumulative case' and 'mutual support' perspective on the grounds of Christian belief to be clearly superior to any story according to which the whole thing rests on some particular basis, a basis that will be subject to serious doubts that it cannot satisfactorily resolve with its own resources alone."⁴⁶ The language of a "cumulative case" is shared by Basil Mitchell (d. 2011), who wrote, "What has been taken to be a series of failures when treated as attempts at

The point to note is that this difficulty of simple proof, with the attendant necessity of cumulative evidence, applies to everything we know in realm of matters of fact. It applies to evidence for the existence of God, to evidence for the existence of atoms, to evidence for the existence of historical characters. This needs to be stressed, because it is so often overlooked. One of the most common of popular errors appears in this connection when we face religious knowledge. There are many who lightly reject belief in God because, they say, the existence of God cannot be 'proved,' by which they mean that there is no single, obvious, incontrovertible line of evidence for God's existence. The appropriate retort is to ask what matter of fact there is in the world for which there is some single, obvious and incontrovertible line of evidence. We are saying nothing derogatory about religious knowledge when we say it is a matter of high probability, for this is true of all matters of fact.

⁴⁶ William Alston, *Perceiving God: The Epistemology of Religious Experience* (Ithaca, NY: Cornell University Press, 1993), 306–7. On page 300, Alston explains this idea as follows:

And once we recognize that a belief can receive a significant amount of justification from a certain source but still profit from justificatory additions from the other sources, the way is clear for recognizing the possibility and desirability of *reciprocal* support. Belief B gets some, but not enough support from source S. Belief C gets some but not enough support from source T. This being the case, there is no reason in principle why C could not get additional support from B, and B get additional support from C. Each of the beliefs prior their interaction has enough independent support to serve as a source of justification for other beliefs, but not so much that it cannot profit from further strengthening.

⁴³ Some nontheistic philosophers could be cited in addition. Antony Flew, for instance, discussed "the valid principle of accumulation of evidence, where every item has at least some weight in its own right." See Antony Flew, *God and Philosophy* (London: Hutchinson, 1966), 141.

⁴⁴ See John Newman's discussion of "Informal Inference," in *An Essay in Aid of a Grammar of Assent* (New York: Catholic Publication Society, 1870), 288–329.

⁴⁵ D. Elton Trueblood, *The Logic of Belief: An Introduction to the Philosophy of Religion* (New York: Harper & Brothers, 1942), 41–42. Trueblood's additional comment is also worthy of mention:

purely deductive or inductive argument could well be better understood as contributions to a cumulative case. On this view the theist is urging that traditional Christian theism makes better sense of all the evidence available than does any alternative on offer."⁴⁷ (Mitchell speaks further of "different considerations to which the Christian appeals may *reinforce each other*.")⁴⁸ Yet another proponent is Richard Swinburne. "The more pieces of evidence there are that *E* occurred (e.g., the testimony of many independent witnesses)," he explains, "the more such evidence by its cumulative effect will tend to outweigh the counter-evidence."⁴⁹

How in this case does the accumulation of evidence function to justify Paul's belief and overturn the aforementioned defeater? Among other scriptural locations, PBR is situated within a body of testimony to be found in the Corinthian creed (1 Cor. 15:3–8). Verses 3–4 contain the pre-Pauline creedal formula itself where Paul simply repeats the early oral tradition that was transmitted to him: "For I delivered to you first of all that which I also received: that Christ died for our sins according to the Scriptures, and that He was buried, and that He rose again the third day according to the Scriptures." He then submits the testimony of numerous eyewitnesses to the Resurrection (vv. 5–7) and lastly offers his own testimony (v. 8). The evidence given in these passages may be expressed as a set of six propositions:

- (1) The risen Jesus was seen by Peter (v. 5a: "and that He was seen by Cephas").
- (2) The risen Jesus was seen by the Twelve (v. 5b: "then by the twelve").
- (3) The risen Jesus was seen by over five hundred fellow believers at the same time (v. 6: "After that He was seen by over five hundred brethren at once").
- (4) The risen Jesus was seen by James (v. 7a: "After that He was seen by James").
- (5) The risen Jesus was seen by all the apostles (v. 7b: "then by all the apostles").
- (6) The risen Jesus was seen by me (v. 8: "Then last of all He was seen by me also").

Propositions 1–6 form an epistemically independent, internally coherent, and evidentially concurrent set. This is to say that each proposition originates apart from the others, each is logically consistent with the others, and each converges with the others on the same thesis-that Jesus was seen because he was resurrected from the dead. The members of this set, by virtue of their positive interrelations, provide a basis of mutual reinforcement that contributes to the justification of each. The epistemic status of proposition 6 is therefore raised by its proper inclusion, making it substantially more probable that Paul was rationally grounded in believing it to be true. Given this, for the critic who claims that PBR can be attributed to a pathologic state of consciousness and is best explained by as delusion, it becomes necessary to demonstrate that the Resurrection experiences and testimonies of Peter, the Twelve, and all the others are for the same reason unjustified and can as well be explained by this same hypothesis. (Indeed, "if five witnesses all say the same thing and we wish to reject their evidence, we are in general not justified in doing so unless we can explain why they all said the same thing. Such explanations could be that they were subject to common illusions, or all plotted together to give false testimony.")⁵⁰ A satisfactory argument for the DH would require the formulation and defense of a collective account of each proposition of evidence in the set (e.g., Paul, Peter, James, John,

⁴⁷ Basil Mitchell, *The Justification of Religious Belief* (New York: Macmillan, 1973), 39–40.

⁴⁸ Mitchell, 44.

⁴⁹ Swinburne, "Historical Evidence," in *Miracles*, ed. Richard Swinburne (New York: Macmillan, 1989), 147.

⁵⁰ Swinburne, 140.

and all the others suffered from a common pathology and experienced simultaneous, identical, and collective hallucinations). Were the critic to pursue this course of action, he must show that, in this instance, the aforesaid innovations of psychohistorical inquiry can be applied to overcome current epistemic limitations. In addition, he must legitimize the exceedingly implausible and ad hoc mass hallucination theory!⁵¹ This also assumes that the biblical text provides an adequate amount of biographical data to render accurate clinical descriptions of not only Paul but also Peter, the Twelve, and all others listed.

Alternatively, the critic could choose to multiply his explanatory resources and construct several naturalistic hypotheses, each devised to account for a particular proposition in the set (e.g., *Paul suffered from a mental disorder and was deluded; Peter was intentionally deceptive about his belief; James came to believe a legendary development*; and so forth). Yet this route is much less parsimonious and would invariably draw upon one of the already discussed and confuted explanatory options. Regardless of his strategy, any hypothesis produced must prove comparatively superior to the Dependability hypothesis. This is a truly arduous task, since it must be shown that on the established criteria of historical inference, there is a greater probability of every individual in the set being unjustified in his belief and false in his testimony than of each individual being justified in his belief and truthful in his testimony.

⁵¹ See footnote 36.

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