The Church's Health Crusade YARDSTICK OR TOOL?

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Is acceptance of the health teachings of the Seventh-day Adventist church a requirement for eternal salvation, a prerequisite for fellowship in the communion of the saints? Or is it just practical counsel for everyday healthful living? And if it is the latter, then how important is it to the church and the individual, and how is it related to salvation?

Few subjects can engender more emotion than the discussion of what the saints should eat, even though this is but a segment of the total health program of the church. And although the saintly diet can help maintain normal blood pressure, too frequently the discussion of it tends to produce high blood pressure. Thus, to non-Adventists the health message has become one of the most misunderstood teachings of the church, and perhaps church members misunderstand it themselves.

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I grew up in a Seventh-day Adventist home; I was "born into health reform." My parents believed in health reform, Battle Creek style, and in this context I received my first concept of what being an Adventist entailed. It meant fomentations and cold mitten frictions when I was ill. It meant that I could not drink water for an hour before meals and for an hour after meals. (Those were the thirsty periods of my life.) It meant graham flour instead of white flour; my godly aunt made not only graham bread, but also graham macaroni and pie crust. (White flour had some indirect association with sin.)

Being a Seventh-day Adventist also meant vegetarianism, a breach of which was equivalent to partaking of the fruit of the tree of knowledge of good and evil. It meant that I could not go to the circus when it came to town, but was permitted to stand on the sidewalk and watch the parade. It meant that I was not to play with non-Adventist children in the neighborhood. (This was not quite in the category of sin, but it certainly contained the exposure to temptation.) It meant that I was glad when sundown came and Sabbath ended. It meant that I should always remember that any day I would be persecuted for my belief and would have to flee to the mountains. (I prayed that it would not be in the winter.)

Thus my early concept of religion related to diet, Sabbathkeeping, raising money for church school, and disassociation from the rest of the kids in town. Later a more mature understanding included the love of God, the sacrifice of Christ, salvation by grace, victory over sin through the power of Christ, a responsibility to take the gospel to the world, and a belief in the second coming of Christ (though I set no dates). For me as a child the health reform program outranked salvation, and vegetarianism was more important than the atonement of Christ for the sins of the world. This perhaps was not necessarily a bad start, for exact rules of conduct were more comprehensible to a small boy than philosophies and theological reasonings, which could be understood only with greater maturity. But the hangover of relative importance lingered in my life for a long time.

I spent my youth around Boulder, Paradise Valley, and St. Helena sanitariums. In these environments salvation was taken for granted, and virtue was related to long dresses, hydrotherapy, and meatless meals. This was the imprint made upon my life by the dedicated people who molded these wonderful institutions long ago. These people were saints in the true sense of the word, and their lives and ideals live on in the lives of many who came under their influence (although I was one of those who slipped away on Thanksgiving Day to partake of a small piece of turkey, with an emotional impact somewhere between wicked exhilaration and guilt). People came to Adventist sanitariums in those earlier days from far and near, but mostly from far. They fully understood that they were coming to a medically oriented resort known as a sanitarium, where breathing exercises, hydrotherapy, vegetarianism, evening worship, and Saturday night marches held sway. They came because they found something wholesome in the total program.

One of the difficult adjustments in my life was to realize that the evolution from sanitariums to hospitals altered much of this, and that now pa-

tients come to Adventist hospitals at the direction of a physician on the attending staff, seeking neither gluten cutlets nor baptism. They come for acute hospital care in which standardized hydrotherapy treatments and compulsory vegetarianism cannot play the same role as in quieter, simpler sanitarium eras. Time has taught a reluctant student that the greater objectives of the church — changing the lives of people by helping them understand themselves and then understand God — remain the same, but that the methods and approaches by which these continuing objectives are sought and realized must change with situations and times.

In the exuberance of youth long ago I became involved in tennis tournaments held in conjunction with an annual wine festival. Certain of the mustached saints took a dim view of a young Seventh-day Adventist competing for prizes in tennis at a wine festival. I suppose it was a foolish thing for me to do. I recall that when I scored a point, the grandstand on my side would shout "Granola! Granola!" and when my opponent scored, the grandstand on his side joined in the chant of "Pork! Pork!" This was the common conception of the health reform message: it was unrelated to health and was merely a series of negations which made people peculiar and perhaps more virtuous, but not necessarily more healthy. In this, of course, the saints were wrong.

Many years later the fact that the total Adventist health message was still not understood by the public was brought forcibly to my attention. On a certain (or uncertain) day I attended a banquet with a wide variety of hospital friends. It was on a day when our Catholic friends were partaking of no meat. It was at a location where the Jewish hosts were partaking of no dairy products. The bewildered caterer, realizing that I was neither, but still different, came and whispered in my ear, "Does your religion allow you to eat asparagus?" I confessed that I was unrestricted as to asparagus. Why he could not have inquired about something more palatable than asparagus I shall never know. His concept of my scruples was only that of unreasoned negations, and unfortunately, this concept lingers today.

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I see four principal reasons for a health program and, correspondingly, four contributions that this health crusade can make to the church. To understand these reasons and contributions is to understand the purpose of the whole health program of the church.

The first and primary reason is better health. The health program has as its principal objective health — buoyant and abounding health. And al-

though good health does not make a man holy or pious, and absence of disease is not synonymous with victory over sin, there is a relationship between health and salvation. Abstemious living — adherence to good habits of eating, sleeping, exercising, resting, working, and thinking — brings its own reward of a clearer mind and healthier body. Clear minds are necessary to understand spiritual truths, and strong bodies are required to carry out the mission of the church to take the gospel to the ends of the earth.

Thus, while peanut butter will not save the soul, good eating habits will contribute to health, and health contributes to the mental acumen needed to understand spiritual truths. Gluten cutlets will not deliver one from sin, but a balanced diet will contribute to the development of a body capable of doing the will of God on earth. Sunshine and jogging will not constitute passports to the pearly gates, but these do contribute to clearer minds, stronger bodies, and better health on earth. The primary reward of the health program, then, is good health, and the fruitage of health is strong bodies and clear minds.

The second reason is establishing contact with people. The business of the church is to set salvation within reach of the multitude — to influence people to desire it, grasp it, and thus be saved by God's grace. Frequently Adventists conceive that the business of the church is to make Seventh-day Adventists, to make Sabbathkeepers, to make vegetarians, to operate hospitals, or to sell books. But these are only methods. Salvation is the only business of the church. Books, magazines, correspondence courses, television programs, radio broadcasts, and even hospitals are but various methods to achieve the end — which is to change the lives of people and effect their salvation.

Various methods are required to meet the needs of different segments of society. Evangelistic meetings attract one group of people, and radio broadcasts reach into homes and make contact with others who will never come to an evangelistic service. Similarly, the medical arm of the church is a means of touching the lives of people. Contact is made when people are sick and in pain, when they are likely to think about the serious values of life, to realize that life is brief at best. The medical ministry of the church tends to reach people in serious moments when they are receptive. This is why the Seventh-day Adventist church operates hospitals and not merry-gorounds.

The broad application of the medical ministry frequently is not realized and understood. Some have considered the operation of sanitariums to be the special mission of the church; and indeed this was the case at one time. These unique medically oriented resorts reached a segment of people that could not have been reached by any other avenue, and this method can still be effective in areas where the culture and habits of the people make such an operation possible. Others have felt that it was wicked to operate hospitals and that the church should have no part in them, but both operations are means of reaching people with the love of God — people who might not be as effectively reached by other avenues of the church. Every Seventhday Adventist physician, dentist, nurse, and paramedical worker — wherever he works — is part of the medical ministry of the church, for each one meets people and has the opportunity to tell of the love of God.

Thus through health agencies the greatest opportunities are afforded to demonstrate the theology of the Seventh-day Adventist church reduced to behavior and practice in medical ministry. God is love. The church's duty is to demonstrate this to the world effectively, and thus help man understand God.

The third reason for the health work is public relations. This contribution is actually a result of the first and second contributions; a good reputation (and with it a degree of fame and publicity) is but the byproduct of good work. Publicity is never the purpose of good work; it is the fruitage of high endeavor. If the work is good enough, publicity is the inevitable result and cannot be avoided. The man who builds the better mousetrap will have a path beaten to his door. All a public relations department does is to put up a sign at the intersection with a finger pointing, lettered "Mousetraps Built Here." Thus the medical ministry of the church, as an inevitable consequence of its competence mingled with compassion, becomes a public relations agency for the church, making it well and favorably known. Christ did not need a public relations agent; his healing spoke for itself and multitudes heard and followed.

There is a desperate need in the world today for professionally sound, skillful medical ministry that can lessen suffering and extend life. There is also a desperate need for love, for sympathy, for understanding, for compassion. Adventist medical ministry is unique only when it combines science with compassion, competence with love, and skill with understanding and sympathy. When these are combined, the world takes notice.

This is the story of medical ministry that is featured in the literature of our day. Unselfishness is rare, and cannot go unnoticed in a selfish world. The medical ministry of the church, therefore, possesses the inherent capacity to become a great public relations agency for the church, utilizing its unique combination of pills and prayer, of surgery and sympathy, which is soon on the lips of the multitudes and spread in printer's ink around the world. The inevitable result of friendship and kindness is the establishment of these elements in the hearts of mankind. Just the telling of the story causes these friendly feelings to rise to the surface. When later contacts are made, even under completely different circumstances and by different agencies of the church, the disposition to friendliness toward the church rises and disarms prejudice and opens both doors and hearts. The purpose of the health message is not public relations, but publicity is the inexorable byproduct.

The fourth reason is the creation of rewarding areas of service. The medical ministry of the church is a triumvirate: an idea, people, and things. The things — brick and mortar, equipment, machinery — are probably the least important of the three, although things are indispensable. An idea or a conviction without people is but an academic profundity; people give ideas and convictions the breath of life. The object of the medical ministry is people, and the life and breath of this ministry is people. Imbue people with dedication to an ideal and you have the most powerful force on earth.

In the business world there are many opportunities for Seventh-day Adventists to earn their livelihood and carve their careers, but few of these offer the satisfaction that participation in the medical ministry does. Here also the avenues to service are many for both men and women. Physicians, dentists, nurses, therapists, dietitians, technicians, engineers, cooks, bakers, and custodians are all needed. Involvement in the medical ministry provides adequate financial reward and, more important, it brings with it a chain of satisfactions not easily found in the business world: the joy of contributing to the success of the church's ministry of salvation; the satisfaction of lessening the pain and sorrow of mankind; the feeling that one is cooperating in a joint endeavor with the Great Physician.

Institutional environments usually constitute oases of compatibility in a vast desert of strange faces. The companions in work are equally motivated and are striving to reach a common goal more important than money. Problems of working on the Sabbath are largely solved. Circles of friends are made that constitute the richest reward short of heaven. The sheltered environment of Adventist health care institutions has spared many a youth exposure to the common temptations of the world until such time as maturity and experience have prepared him to cope with the sin, ruthlessness, and callousness it holds.

Thus the medical ministry of the Seventh-day Adventist church makes its great contributions: health to those who follow its principles; the opportunity to pour the love of God into hearts opened by illness and pain; the projection of the image of the church in its most favorable light; and the opportunity for respected, rewarding professional careers of Christian service.

It is incumbent on the church first to understand the role of this avenue of service. From understanding it is but a short and easy step to benefiting from the practice of its broad, scientifically supported, and rational principles. Participating in its ministry brings the love of God into countless open hearts that need it, and the reward to the participant is often even greater than the reward to the patient.

This medical ministry also carries its hazards and has done so since God first talked about health to Moses. The temptation lurks to use it to measure the piety and holiness of others. But it is a guide, not a yardstick; it is a tool of service, not a whip of conformity or punishment. There is a seldom quoted text which says, "Do not be over-righteous" (Ecclesiastes 7:17, New English Bible). The correct dosage can give vigorous health. An overdose of health reform can result in a delusion of virtue, a hallucination of piety, and the appearance of colored rainbows of self-righteousness but it leads to leanness of the soul.