Health Evangelism: A Rationale And Practical Application To The West Indonesia Union Mission Of Seventh-Day Adventists

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Andrews University
Seventh-day Adventist Theological Seminary

HEALTH EVANGELISM: A RATIONALE AND PRACTICAL APPLICATION TO THE WEST INDONESIA UNION MISSION OF SEVENTH-DAY ADVENTISTS

A Project Report
Presented in Partial Fulfillment of the Requirements for the Degree Doctor of Ministry

by
Jonathan Kuntaraf
June 1979
HEALTH EVANGELISM: A RATIONALE AND PRACTICAL APPLICATION TO THE WEST INDONESIA UNION MISSION OF SEVENTH-DAY ADVENTISTS

A project presented
in partial fulfillment of the requirements
for the degree
Doctor of Ministry

by
Jonathan Kuntaraf

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Dean, SDA Theological Seminary
DEDICATION

My loving wife, Kathleen
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GENERAL INTRODUCTION

It is generally recognized by the Seventh-day Adventist Church that health evangelism (addressing the physical needs of people) is a valuable adjunct to gospel evangelism, especially in areas which are initially closed to the Christian gospel. The socio-political and cultural conditions of Indonesia impose some limitations on the public proclamation of the gospel, while on the other hand there is interest in the subject of healthful living which therefore can be used as an entering wedge for the gospel. Yet apparently there is no formal, well-defined program in West Indonesia to guide Seventh-day Adventist ministers and laymen in health evangelism. The few such programs which have been conducted were conducted without specific training.

It is therefore the purpose of this project to formulate a specific program of health evangelism appropriate to the cultural background and situation in West Indonesia which could be used by ministers and laymen in the West Indonesia Union Mission of Seventh-day Adventists.

In an attempt to achieve this objective, the report is organized as follows: Part I, "A Study of the Holistic Nature of Man in the Bible and the Writings of Ellen G. White," will set forth the theology that informs the
project. Part II will develop one specific health evangelism program appropriate to the cultural and sociological background of West Indonesia. This part of the paper will include a survey of health evangelism practices in the West Indonesia Union Mission of Seventh-day Adventists and an outline of a proposed health evangelism program for the West Indonesia Union Mission of Seventh-day Adventists.

The second part is limited to the formulation of a health evangelism program for ministers and laymen in reference to the culture of West Indonesia. It will not be concerned with the work of professional health institutions (hospital and clinics) in that field.

It is hoped that the theological section will provide a rationale for an approach to the gospel and health evangelism in Indonesia. A further hope is that the model described in Part II will provide a pattern determining the usefulness of a health approach to evangelism in other cultures. Finally, the researcher intends to use the project for personal ministry in assisting ministers and laymen in health evangelism work wherever he will be located.
PART I

A STUDY OF THE HOLISTIC NATURE OF MAN
IN THE BIBLE AND THE WRITINGS
OF ELLEN G. WHITE
CHAPTER I

INTRODUCTION

The study of the nature of man has often been the center of the theological concern. Several different concepts of the nature of man have been prevalent from the beginning of Christianity until the present day. The three most prominent are trichotomy, dichotomy, and holistic.

Those who hold the trichotomy view believe that man consists of three substances, or three component parts: body, soul, and spirit. Soul and spirit are as distinct from each other as the soul and body. ¹ Some theologians regard this view as untenable, since it seems to be opposed to the account of the creation of man as given in Gen 2:7 which clearly states that the living soul is the combination of the body and the breath of life. Trichotomy is also a misunderstanding of 1 Thess 5:23.

The dichotomy view holds that man has a two-fold nature: material and immaterial. Man therefore consists of body and spirit, or soul. ² Since this view claims that its basis is found in the record of creation, it is more

²Ibid., p. 483.
reasonable than trichotomy. However, as one author has pointed out, "The weakness in this view is that it savors of Greek dualism, which is not the teaching of the Bible."¹

Finally, the holistic view is the concept of man's nature which sees him as an irreducible whole, emphasizing the unity and interrelationship which exist between the function of the body and mind.² The supporters of the holistic concept believe the Bible does not teach that man has two, three, or more substances. Man is an indivisible whole, although there are various aspects of his being.³

Based on the belief that the holistic view is more Scriptural than either trichotomy or dichotomy, it is the purpose of this paper to reexamine the concept of the holistic nature of man according to the Bible and the writings of Ellen G. White (whose writings have been accepted as inspired counsel for the Seventh-day Adventist Church).⁴ An investigation of scientific evidence concern-


³Oosterwal, p. 8.

⁴Aside from the Bible, this paper will depend upon the writings of Ellen G. White more than any other author because Seventh-day Adventists accept Mrs. White's declaration that she was inspired by God. In addition, her writings are recognized by some modern scientists as extraordinary. One of them is Dr. Clive McCay, well known au-
ing the holistic nature of man will be included in this
examination, since this writer believes that God, the Au-
peror of the Bible, is also the Author of true science.

authority in the field of nutritional research, and former
fessor of nutrition, Cornell University, Itheca N.Y. In
one of his books he stated: "The writings of Ellen G. White
... provide a guide to nutrition that comprehends the
whole body. Much of her wisdom of the past is not un-
derstood today, and we attempt to attain miracles by eating
vitamin tablets, mixture of trace minerals or protein
concentrates. Ellen G. White died before modern biochemis-
try... and the composition of foods became generally
known, but if people followed her plan even today they
would be far better fed than they are in their attempts to
eat bad diets and then compensate by miracle foods. She
advocated simple, natural diets, low in fat, low in salt,
well prepared and modest in amount... We can read over
and over the writings of such leaders as Ellen G. White,
who taught the importance of good food for health and the
essentiality of a healthy body if we are to have a good
soul." Dr. Clive McCay, Natural Foods and Farming, May 1958,
quoted in Medical Science and the Spirit of Prophecy
(Washington, D.C.: Review and Herald Publishing Association,

In one of his articles in the Review and Herald he
stated, "When one reads such works by Mrs. White as
Ministry of Healing or Counsels on Diet and Foods he is
impressed by the correctness of her teachings in the light
of modern nutritional science. One can only speculate how
much better health the average American might enjoy, even
though he knew almost nothing of modern science, if he but
followed the teachings of Mrs. White." Review and Herald,
February 12, 1959.

In the world of social science, Dr. Florence
Stratemeyer, professor of education, Columbia University,
wrote: "Recently the book of Education by Ellen G. White
has been brought to my attention. Written at the turn of
the century (1903), this volume was more than fifty years
ahead of its time. And I was surprised to learn that it was
written by a woman with but three years of schooling... Mrs. White was concerned with the whole learner—the har-
monious development of mental, physical and spiritual
powers... I am not surprised that members of the
Seventh-day Adventist Church hold the writings of Mrs.
White in great respect and make them central in developing
the educational programs in their school." Reuben G.
Manalaysay and Andrew N. Nelson, comps., The Gist of
Christian Education (Manila: Philippine Union College,
CHAPTER II

THE WHOLENESS OF MAN

"Whole" is defined as "the entire thing without loss of parts, elements or members." On the basis of this definition, the wholeness of man can be considered as the existence of the entire person, without the loss of any parts. Is the expression "the wholeness of man" found in the Bible or the writings of Ellen G. White? An investigation of the Biblical meanings of "soul," "spirit," "body," and "heart" will provide the answer.

The Expressions of "Soul" and "Spirit"

Man, a Living Soul

The word "soul" is translated from nephesh, a Hebrew word which occurs 755 times in the Old Testament. The New Testament uses the Greek word psyche to express the same meaning. One hundred and fifty-two times they describe man as living soul. Gen 17:14; Lev 7:27; Num 19:18, and

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2 Basil F. C. Atkinson, Life and Immortality (Tauton: E. Goodman & Son, The Phoenix Press, n.d.), p. 3. The author, who was underlibrarian of Cambridge University Library, has counted the words nephesh, psyche, ruach, and pneuma in the Bible in his defence against immortality of the soul. Since the book is well recommended by Dr. Norman Anderson, the author of Issues of Life and Death (London:
1 Sam 22:22 are just few examples.

In the New Testament, there are fourteen occurrences in which the word psyche means a human being in exactly the same sense as the Hebrew nephesh. Several of these occurrences can be found in Acts 2:41, 43; 3:23; 1 Pet 3:20; 2 Pet 2:14; Rom 2:9; 13:1; and 1 Cor 15:45. In these verses, psyche is translated "man" or "soul," which has the same meaning as nephesh in Gen 2:7, the "living soul." This means man is a whole, a person who has body, mind, and soul, and supports the belief that nephesh or psyche refers to the entire individual.

Man, a Person

The basic idea of nephesh or psyche as an individual or person provides the idiomatic use of nephesh and psyche for personal pronouns. Expressions such as "my soul" for "I" or "me," and "thy soul" for "you" are commonly used in the Bible. Nephesh is used in this sense about eighty-one times in the Old Testament, while this use of psyche appears twenty-four times in the New Testament. One example of this use of nephesh can be found in Gen 27:19; "sit and eat of my

Hodder and Stoughton, 1976), several quotations in the paper are taken from this book.

1Atkinson, p. 13.


3Atkinson, pp. 4, 12.
venison, that thy soul [you] may bless me." The word psyche is used in Matt 11:29; "... and ye shall find rest unto your souls [yourselves]."

Man's Life

There are about 150 occurrences of the word nephesh in the Old Testament in which it means "life." About forty-six times in the New Testament the word psyche expresses the same meaning.¹ Examples include Exod 21:30: "he shall give for the ransom of his life whatsoever is laid upon him," which means the ransom of his soul or himself as a whole. In John 10:11, to lay down one's life is the same as to give oneself. In using nephesh and psyche in this way, "soul" can be understood as a person with the whole of life in him.

Man as a living soul, man as a person, and man's life, --all expressed by the words nephesh and psyche--mean the whole person. Moreover, the use of the word "spirit" or pneuma in the New Testament also carries the idea of the whole person. Two clear examples are found in 1 Cor 16:18 and 2 Cor 2:13.²

Similar to the use of the word "soul" in the Bible, Ellen G. White uses the word "soul" to mean "person" or "individual." It is typically used to describe the whole

¹Atkinson, pp. 9, 13.

man as a complete living, thinking, and physical being. The best example in White's writings of "soul" as referring to a person, is in her description of the creation of man:

The human form was perfect in all its arrangement, but it was without life. Then a personal, self-existing God breathed into that form the breath of life, and man became a living, intelligent being. All parts of the human organism were set in action. The heart, the arteries, the veins, . . . the faculties of the mind, all began their work, and . . . Man became a living soul.1

In this context, it is clear that the "living soul" is the totality of the individual, including physical, mental, and spiritual aspects. The use of "soul" as person is also found in other statements. When she says, "In all men He saw fallen souls whom it was His mission to save,"2 "souls" clearly means persons. When she says, "God claims every soul as His property,"3 she means God claims every person or individual.

The Expressions of "Body" and "Flesh"

Besides "soul" and "spirit," the third aspect in the creation of man is "dust from the ground," commonly understood as "body" or "flesh." In the Old Testament "flesh" and "body" are designated by the same word, basar. Early Hebrew apparently had no term to designate the "body" as a

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whole, at least in our sense of the word. Those who used this language chose to refer to various parts and organs individually. Therefore, "a Semite has the same regard for the body as for the flesh since both signify the whole man." The word basar occurs 127 times in the Old Testament, indicating the "flesh" of both animals and man. Some examples of this use can be found in Gen 40:19; Exod 4:7; Lev 12:3; 13:2; and Deut 28:53, 55. Phrases translated "living being" include Gen 6:17, 19; 7:21; and Lev 17:14; while "mankind" is used in Isa 40:5; Gen 6:12, 13 and Num 16:22, clearly describing the whole person.

In the New Testament, on the other hand, there is a distinction drawn between the words "flesh" (sarx) and "body" (soma).

Body

In the New Testament, as well as the Old, the body is not identified with corruption. Paul stresses the dignity of the "body," indicating that the "body" is to be respected by man as an expression of the person. When Paul exhorts the Romans "to present your body a living sacrifice, holy
and acceptable to God" (Rom 12:1), it is clear that soma does not mean "body form" nor just "body," but refers to the whole person. Therefore, we need not say only that man does not has a soma, he is a soma.

Flesh

Man as flesh, on the other hand, means man as a whole, with his weakness and limitations. However, "flesh," as such, is not evil, nor is it the source of evil. Bultmann says man is good when his will is good, and man is evil when his will is evil. Sin is not existing in the "flesh," which are "immorality, impurity, licentiousness, idolatry, sorcery, enmity strife, jealousy, anger, selfishness, dissension, party spirit, envy, drunkenness, carousing of the life" (Gal 5:20-21). As the result of sin, man may have a sinful body (Rom 6:16), or sinful "flesh" (Rom 8:3), because sin is capable of dominating the "body" (Rom 6:16). Thus the "body" is reduced to a lowly state (Phil 3:21), full of unholy cravings (Rom 6:12).

Although man is sinful, the Bible does not separate

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2 Ibid., p. 194.
4 Ibid.
"flesh" and "spirit" as distinct entities. Paul writes of the "mind of the flesh" (Rom 8:6), and men who "walk in the desires of the flesh" (Eph 2:2). This does not mean there is an element in man that is intrinsically bad. The Christian is to "crucify the flesh" (Gal 2:20; 5:24), because the work of the "flesh" fights against the "spirit," the one "lusting against the other" (Gal 5:16-17). However, the conflict is not between two halves of a person, but between two tendencies of the whole person. The whole person is always engaged in the act. Therefore, "flesh" and "body," as well as "soul" and "spirit," express the wholeness of man.

The Expressions of "Heart"

Although the word "heart" is not found in the account of creation of man as are "spirit," "soul," and "body," the usage of "heart" in the Bible is similar to uses of "soul" and "spirit." The Hebrew words for "heart" are lev, levav, and libbah, while Greek uses kardia. The word "heart" generally denotes the seat of various attitudes, emotions, or intelligence and can mean the totality of feeling, thought, and human desire, traced back to their deepest sources in the inner life.

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3 Atkinson, p. 27.
The "heart" as the seat of emotions is clearly described in Scripture. The "heart" can be glad (Prov 27:11), sad (Neh 2:2), troubled (2 Kgs 6:11), or courageous (2 Sam 17:10). It is referred to as the seat of the intellect (Exo 31:6). The "heart" can plan wicked deeds, since it is considered the seat of volition and moral life. Jesus says that "from within, out of the heart, evil thoughts proceed" (Matt 15:19).

The "heart" is man's self, and in most cases where it is used, it performs the service of a personal pronoun. Furthermore, the Bible speaks of sin and love for God in relation to the "heart." This usage represents the whole man. When the "heart" loves, the whole man loves; when the heart rejoices, the whole man rejoices. And when the "heart" is sinful, the whole man is sinful. When God sanctifies man's "heart," He sanctifies the whole man.

According to Ellen G. White, "when Jesus speaks of the new heart, He means the mind, the life and the whole being." Thus, in her mind, "heart" means mind, the life, and the whole being. It refers to the wholeness of man. Therefore, there are "heart" in the Bible and the writings

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1 Bultmann, p. 221.


of Ellen G. White in which the same meaning as "soul," and "body," that is, man should be considered as a whole.
CHAPTER III

THE INDIVISIBLE MAN

This study has shown that the usage of the Biblical words "soul," "spirit," "body," and "heart" express the wholeness of man. Each word indicates man as a whole, a complete man, a person who has a physical, mental, and spiritual being. This section will attempt to show that man, considered a total person, is indivisible, although he comprises several aspects.

Various Aspects of Man

Body and Life Principle

In the formation of man, the Bible says, "the Lord God formed man of the dust of the ground" (Gen 2:7). The "dust of the ground" is the original substance of the human body, which in turn is the medium used to communicate to others. Without the human body, there is no existence for man. Body is one of the basic aspects of the human being.

In the formation of man, God also breathed "the breath of life" into man's nostrils and man became a living soul. The breath of life in the creation of man is represented

\[1\] Kesich, p. 15.
by Hebrew n’shamah, which is the life principle issuing from the Lord.¹ There are some passages in which n’shamah is synonymous with ruach.² These include 1 Kgs 17:17; Isa 42:5 and Job 32:8; 33:4, which show that the absence of n’shamah means death.

There are forty-nine passages in the Old Testament and nine instances in the New Testament in which ruach and pneuma mean "life principle."³ Several illustrative examples are Lam 4:20; Num 16:22; Matt 27:50; and Luke 8:55. These verses show that the "spirit" as life principle is one of the aspects of man and cannot be separated from man himself. If this aspect is missing, man is no longer man.

**Man's Mind and Emotion**

There are several other meanings of the words "soul" and "spirit" and some of them express man's mind and emotion. There are about a hundred and twenty-six passages in the Old Testament in which nephesh is specifically connected with the emotions of desire, while there are twelve occurrences of the New Testament psyche which express the same meaning.⁴

The nephesh is spoken of as the seat of feelings in

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¹Atkinson, p. 22.


³Atkinson, pp. 18, 26.

⁴Ibid., pp. 6, 13.
general; i.e., the soul's reaction to hunger and thirst (Ps 107:26). There are also examples of the nephesh as the seat of sorrow (Lev 26:16), the seat of desire (Deut 23:4), the seat of anger (Judg 18:25), and the seat of joy (Ezek 25:6). The New Testament examples can be found in Matt 22:37 and Mark 12:30, 33.

In some instances, Ellen G. White refers to "soul" as the mind also. One of these examples is found in her counsel to parents to "educate and train their children as to bring out the energies of soul by exercise."¹ She identifies these energies as perception, judgment, memory, and the reasoning power, all of which she calls the faculties of the mind.

Some of the usages of "spirit" in the Old and New Testaments indicate the same meaning. There are many passages in the Old Testament where the word ruach means a man's inner disposition; that is, the seat of his thoughts and emotions. This is similar to the sense of nephesh when it refers to the inner man, as well as to the whole man as person or living being. There are twenty-seven cases where the "spirit" (ruach) is the seat of grief, generally referred to in Hebrew as "bitterness of spirit" (Gen 26:35).²

There are some instances in which we find ruach governing the will, such as "every one whom his spirit

²Atkinson, p. 20.
(ruach) made willing" (Exod 35:21). Other passages show ruach as the seat of jealousy (Num 5:14, 30), the seat of courage (Josh 5:1, 1 Kgs 10:5), the seat of anger (Judg 8:3, Prov 14:29), the seat of perverseness, evil, or rebellion (Isa 19:14, Hos 4:12), and the seat of contrition, humility (Isa 57:15, 66:2). There also fifteen references to ruach in a more general sense.¹ Num 14:24 and Ezek 11:5 translate ruach as "mind," while Ezek 20:32 and Hab 1:11 reveal the hand of God on the character and personality of man.

Concerning the nature of man Ellen G. White uses the word "spirit" in two ways: man's disposition or temperament, and man's thought and feeling. When she says, "We must have perfect control over our own spirit,"² it clearly means that we must have perfect control over our own temperament. In another place she says, "Our spirit and deportment must correspond with the copy that our Saviour has given us."³ In this statement, as in several others, White uses "spirit" and "temperament" interchangeably when referring to a specific aspect of human personality.

White also seems to identify "spirit" with character.⁴

¹Ibid., p. 22.


³Ibid., 4:36.

⁴White, Comment on 1 Cor 15:42-45, Seventh-day Adventist Bible Commentary, 6:1093.
This character is the product of mind activity.\(^1\) By implication, we conclude that the "spirit" is synonymous with thought. On another occasion, she refers to human moral character as "the thought and feelings combined."\(^2\) The combination of thought and feelings comprise the moral character and thus the "spirit" of man. In this sense "spirit" is a person, referring to the unity of thought and feelings which are the product or content of the properly functioning mind.

Some usages of nephesh, psyche, ruach, pneuma, or "soul" and "spirit" in the Bible and the writings of White reveal the function, personality, or characteristic of man in which feeling, thinking, reasoning, and will are included. Since feeling, thinking, and will are various functions of man, they are parts of the whole, not separate substances. So, when one wills, he wills with his whole being; when he feels, he feels with his whole being. It is impossible to separate man from his mind or his emotions. Therefore the uses of nephesh, psyche, ruach, and pneuma in this category may be understood to indicate that man is indivisible, while mind and emotion are complementary aspects of man.

**From Creation to Restoration**

It has been shown that man is indivisible, although consisting of various aspects. Did the indivisible man

\(^1\)White, Testimonies, 6:606.

exist at the time of creation? Or does this concept apply to post-lapsarian man and man at the time of restoration? This section will attempt to answer these questions.

At Creation

After the creation of man, "God saw everything that He had made, and behold, it was good" (Gen 1:31). One of the reasons man's condition was good was because he was created in the image of God (Gen 1:26, 27).

Ellen G. White explains that in his original creation, with his nature resembling God's in "outward appearance," man was "of lofty stature and perfect symmetry," with the "size and strength of all his organs being fully and harmoniously developed."¹ Adam was tall and symmetrical, and though twice the height of modern man, he was well proportioned. Eve was little smaller than Adam coming just above his shoulder in height. She was also "noble—perfect in symmetry, and very beautiful."²

Adam and Eve did not wear ordinary clothing, but wore garments of glory and light as the angels do.³ The diet given to man in the garden was fruits, grains, and nuts (Gen 1:29). The natural environment in which Adam and Eve lived was good for their health, as well as conducive to

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³White, Patriarchs and Prophets, p. 45.
their joy and happiness.\textsuperscript{1} They were perfect physically.

Moreover, the perfection of their mental and spiritual condition can be seen in the following statements. "Every faculty of mind and soul reflected the Creator's glory. Endowed with high mental and spiritual gifts, Adam and Eve were made . . . that they might . . . comprehend moral responsibilities and obligations."\textsuperscript{2} One of the greatest mental and spiritual blessings was the ability to communicate with God freely and openly.\textsuperscript{3}

Holy angels gave Adam and Eve counsel and instruction,\textsuperscript{4} and the Father "personally directed their education."\textsuperscript{5} Their mental and spiritual powers developed, and they realized the highest pleasures of their holy existence.\textsuperscript{6} They foresaw no problem in keeping God's law, since "it was their highest pleasure to do God's will."\textsuperscript{7} The law was written in their hearts.\textsuperscript{8} All of these facts tell us they were perfect mentally and spiritually. There

\begin{footnotes}
\item[8]White, Comment on Gen 3:15, Seventh-day Adventist Bible Commentary, 1:1084.
\end{footnotes}
was a unity of man's perfection before the fall, all aspects were perfect.

After the Fall

Man, as a whole being, was affected by the calamities of sin. "But your iniquities have separated between you and your God... For your hands are defiled with blood, and your fingers with iniquity; your tongue hath muttered perverseness" (Isa 59:2, 3). Sin produces "evil thought" (Matt 15:19) and an "evil heart" (Heb 3:12). Man's physical, mental, and spiritual powers are affected by sin.

The terrible effects of sin on all the faculties of man in the time of Christ are clearly stated by White:

Satanic agencies took possession of men. The bodies of human beings, made for the dwelling place of God, became the habitation of demons. The senses, the nerves, the organs of men were worked by supernatural agencies in the indulgence of the vilest lust. The very stamp of demons was impressed upon the countenance of men. Human faces reflected the expression of legions of evil with which men were possessed.

The statement above reveals White's understanding of how sin has affected all areas of the human body. All of man was touched by distortion, including his appearance. As the result of this, men have to experience "human suffering, sickness, debility, and premature death." The human being's "vital forces have been greatly weakened by

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1White, Ministry of Healing, p. 142.

Actually "the brain nerves which communicate with the entire system are the only medium through which Heaven can communicate to man."² But as the result of sin, "the senses, the nerves, the organs" are being attacked by Satan through the indulgence of lust. Satan tries to break the only medium of communication between God and man, which could not have been prior to the Fall. As the result of the working of Satan in man's mind, the ability of human beings to distinguish between right and wrong is affected. They do not realize they are being led by Satan.³

Men's faculties are perverted.⁴ And one of the worst characteristics of man's sinful mind is selfishness. Because men's desires have become perverted, their motives in life are focused upon self-gratification instead of upon glorifying God.⁵ The mind is weakened, the spiritual being has lost harmony with God and is inclined toward evil. It is clear that the Bible and the writings of White show that all aspects of man are affected by sin.

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¹Ibid.
²White, Testimonies, 3:347.
³White, Ministry of Healing, p. 128.
⁵White, The Desire of Ages, pp. 19, 20.
In Restoration

Although man fell in sin, God planned to restore him to his original state. The idea of the restoration of man into his original image is clearly found in the writings of Ellen G. White and the Bible. On this point, White believes that Christ is the only way to restoration. "All that was lost by the first Adam, will be restored by the Second."¹ All of man's being was affected by sin. Thus, the restoration of man will include the whole being also.

Concerning the objective of redemption and education, White says:

To restore in man the image of His Maker, to bring him back to the perfection in which he was created, to promote the development of body, mind, and soul, that the divine purpose in His creation might be realized,—this was to be the work of redemption. This is the object of education, the great object of life.²

That God is concerned about the restoration of man as a whole, including physical, mental, and spiritual powers, can be clearly seen as we examine the way God guides His people and gives His commandments. Some commandments which were given to improve spiritual life are related to the physical aspect of man as well. For example, when God instructed Abraham to circumcise all the members of his household (Gen 17:10-12, 14), it represented a spiritual relationship with God. However, medical science seems to

¹White, Patriarchs and Prophets, p. 306.
²White, Education, pp. 15-16.
indicate that it is also a matter of health. According to Stanley Robbins, in his textbook on general pathology, "the ritual of circumcision as practiced by the Hebrews during the first two weeks of life has for all purposes virtually eliminated carcinoma of the penis." Thus, when God gave His commandments, it was for the spiritual and physical benefit of man.

Furthermore, beside many commandments with a spiritual emphasis, God through Moses, gave many commandments with a physical emphasis also. Some examples are the health laws found in Lev 11 and Deut 14. These laws prohibited the use of some animals, such as camels, hares, swine, dogs, cats, weasels, mice, and lizards, for food. Medical science has proved that abstaining from eating these animals will limit incidence of plague, rat-bite fever, leptospirosis, ascariasis, anthrax, tularemia, and the probability of infestation by parasites (trichinella spiralis, taenia solium, or echinococcus granulosus) or protozoan toxoplasma.

The interrelation between obedience to the law of God and physical health can be found repeatedly in the books of Moses. In Exod 15:26 God says, through Moses,

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If thou wilt diligently hearken to the voice of the Lord thy God, and wilt do that which is right in His sight, and wilt give ear to His commandments, and keep all His statutes, I will put none of these diseases upon the Egyptians; for I am the Lord that healeth thee.

God promised His people physical blessings, with the condition that they would be obedient to the law of God. But if they were to disobey the commandments of God, "The Lord shall send upon thee cursing, vexation" (Deut 28:20), "The Lord will smite thee with a consumption, and fever, and with an inflammation" (vs. 22), "The Lord will smite thee with the botch of Egypt, and with the emerods, and with the scab, and with the itch, whereof thou canst not be healed. The Lord will smite thee with madness, and blindness, and astonishment of heart" (vss. 27, 28).

These verses clearly show that disobedience to God's commandments is a spiritual act which affects the physical and mental aspects of man. In the eyes of Moses, man is indivisible. Any disobedience to spiritual law affects the physical area of man. There is no separation between the various aspects of man.

Moreover, in the New Testament, Jesus showed His concern for the ministry of the wholeness of man: "And Jesus went about all Galilee, teaching in their synagogues, and preaching the gospel of the kingdom, healing all manner of sickness and all manner of disease among the people" (Matt 4:23). Three aspects of man constituted the center of His ministry. "Healing represents His ministry to man's physical needs; teaching, His ministry to the mind; and
preaching, His ministry to spiritual needs.\textsuperscript{1}

The interrelationship between the physical, mental, and spiritual aspects of man may also be found in the writings of Paul: "And the very God of peace sanctify you wholly; and I pray God your whole spirit and soul and body be preserved blameless unto the coming of our Lord Jesus Christ" (1 Thess 5:23). Here Paul uses \textit{periphrasis} for the whole man.\textsuperscript{2} He saw the necessity of preparing our physical, mental, and spiritual powers for the coming of Jesus Christ. Man is indivisible. In White's words "bible sanctification has to do with the whole man."\textsuperscript{3}

This section brings us to the conclusion that man was indivisible at the time of his creation and after the fall and will be in the time of restoration. There is no point when the body is separated from the mind, or the mind from the body. The perfection of man at the time of creation involved man's physical, mental, and spiritual areas. The iniquities of sin effect man's physical, mental, and spiritual powers, and the restoration of man includes the physical, mental, and spiritual aspects. Since man is indivisible, the sanctification of man involves the whole person.


\textsuperscript{3}White, \textit{Ministry of Healing}, pp. 398-399.
CHAPTER IV

THE INTEGRATED MAN

The previous chapters have shown that the words "soul," "spirit," "body," and "heart" in the Bible and the writings of Ellen G. White refer to man as a whole. The same words express the fact that man is indivisible, although he consists of several aspects. God has not separated the aspects of man since the fall and will not do so in the time of restoration.

Furthermore, a study of the account of the creation of man in Gen 2:7 reveals that man is not only to be considered as whole and indivisible, but also that each aspect of man is interdependent with the other. "The dust of the earth" depends upon the "breath of life" in order to become human. And the "breath of life" is dependent on the "dust of the earth," because without the combination of both the "breath of life" is not a man.

The interdependence between body and spirit (or soul) is found in the Bible. Can this also be found in the writings of White? This section will examine her statements regarding the interdependent aspects of man. Since the uses of "soul," "spirit," and "heart" are usually synonymous with "mind" in the writings of White, we will
observe what she says about the relationship between mind and body. Ellen G. White says "the relation that exists between the mind and the body is very intimate," and to neglect the body is to neglect the mind. Therefore, "all... should study the influence of the mind upon the body, and the body upon the mind, and the laws by which they governed." 

Mind Depends upon Body

Ellen G. White believed that certain physical faculties are the basis of mental action, and these faculties form the brain which is to be the mind organ and moral organ. She also says "the brain nerves are the only medium through which heaven can communicate with man, and affect his inmost life." Therefore, the physical senses are the "avenues of the soul."

The mental and moral powers are dependent upon the

2 White, Ministry of Healing, p. 241.
3 White, Counsels on Health, p. 122.
4 White, Ministry of Healing, p. 128.
5 Ibid., p. 415.
6 White, Counsels on Health, p. 586.
8 White, Testimonies, 2:95.
activity of the body for their very existence.\(^1\) The cessation of life in the human body means the ceasing of consciousness, of mental and moral powers.

**Body Depends upon Mind**

As the mind is dependent upon the body, White at the same time believes that the body is also dependent upon the mind. According to her, "The brain controls the whole body. In order for other parts of the body to be healthy, the brain must be healthy."\(^2\) Because the brain is the organ of the mind,\(^3\) it is clearly understood that the mind controls the whole body. Therefore, it functions as the source of action.

The work of the brain is summarized: "... by the brain nerve, mental impressions are conveyed to all the nerves of the body, as by telegraphic wires, and they control the vital action of every part of the system."\(^4\) Any unnatural condition of the brain or mind means the lack of harmonious action in the human organism which may bring disease and even death.\(^5\) The body is vitally dependent upon the mind as well as the mind being dependent upon the

\(^1\)Ibid., 3:507.


\(^3\)White, *Counsel on Health*, p. 586.


Body Affects Mind

White describes the close relationship between the body and mind by saying, "when one is affected, the other sympathizes." For example, when she describes the electric currents in the nervous system, she says that "whatever disturbs the circulation of the vital power, [has the result of] deadening the sensibilities of the mind."

We observe next the effect of physical illness, physical habits, and diet upon the mind.

Effect of Sickness upon Mind

To describe the effect of sickness upon the mind, medical science refers to "somatopsychic" disease, which is a combination of the two words, soma and psyche, emphasizing the influence of body on mind. White believes that a sick body affects the proper functioning of the mind. A poor condition of the body, as a result of disease or feebleness, affects the mind so that it cannot think clearly and has difficulty differentiating between right and wrong. Because of physical debility the mind is often not able to function at its highest level of ability.

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1 Ibid.

2 White, Testimonies, 2:347.


4 White, Counsels to Parents, Teachers and Students, p. 98.
sicians often see examples of somatophychic symptoms among people who suffer with ulcerative colitis.¹ "The psyche of the sick person is disturbed to the extent that he appears dependent, apprehensive and depressed."² It is interesting to note that the mental abnormalities disappear when the colon is healed or when the disease is surgically removed. "The individual regains his optimism, his dependence upon his own ability and resourcefulness."³ White clearly states that "the infirmities of the body affect the mind;"⁴ that is, every wrong habit that affects the physical health is understood to reach the mind.⁵ Therefore, she believes the health of the body and the health of the mind are inseparable.⁶

Effect of Physical Habits upon Mind

That White believes physical habits affect the mind can be seen in the following statement: "Whatever promotes physical health, promotes the development of a strong mind and well balanced character,"⁷ adding that "we generally

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²Ibid.
³Ibid.
⁴White, Testimonies, 1:304.
⁵White, Ministry of Healing, p. 309.
⁶White, Counsels to Parents, Teachers and Students, p. 398.
⁷White, Education, p. 195.
find even among Seventh-day Adventists that inclination, habit, delicate, unhealthful preparation in cooking and unhealthful habits of dress are weakening physical, mental, and moral efficiency, and making it impossible to overcome temptation."¹

It is not surprising that she stresses that "the treatment of the body has everything to do with the vigor and purity of mind and heart,"² and "right physical habits promote mental superiority."³ On this point, she believes that those who obey the laws of health will have clearness of thought and strength of mind. In counsel to her own son, Edson White, she refers to "over work" as one of the bad habits which affect the person mentally and spiritually:

Cut down your work to that which you understand best. You have carried so many responsibilities that you are nearly bankrupt in mental and physical strength. Do not try to rush things as you have been doing. You cannot afford to sacrifice your needed rest and sleep in order to drive forward your work. You are wearing out altogether too fast. With taxed nerves, aching and sleepless nights, you have been losing ground physically, mentally, and spiritually.⁴

On the other hand, idleness weakens brain power.⁵ In

¹ Ellen G. White, MS 1, 1875, EGWRC.
² White, Comment on 1 Thess 5:23, Seventh-day Adventist Bible Commentary, 7:909.
³ White, Counsels to Parents, Teacher and Students, p. 298.
⁴ Ellen G. White, MS 124, 1902, EGWRC.
⁵ White, Testimonies, 4:96.
establishing the health of body and mind, she gives a
great deal of counsel on natural remedies, such as proper
diet, water, exercise, temperance, and rest.¹

Also discussed is the relationship of exercise and
proper diet to the condition of the mind. The brain nerves
should be nourished by good quality and quantity of blood
in order to perform their vital function.² The quantity
and quality of blood depends upon exercise, the respira­
tory and digestive processes, and the quality of air and
food taken into the body.³ Exercise and proper diet are
important for better vital action of the mind.⁴ Her con­
viction is in harmony with recent scientific discoveries.
Dr. Herbert A. de Vries of the University of Southern
California experimented with retired Californians who walk­
ed, jogged, and swam three times a day. He learned that
they increased their physical stamina and improved their
blood pressure and became more active physically. But the
most striking result was the improvement in the oxygen
transport capacity of the whole body, especially to the
brain cells. Mental alertness improved when larger amount
of pure oxygen were delivered to the brain cells.⁵ Thus,

¹Ibid., 1:247.
³White, Ministry of Healing, p. 254.
⁵Edwin Diamon, "Can Exercise Improve Your Brain
Ellen G. White and medical science agree that physical habits affect the mind.

**Effect of Diet upon Mind**

Referring to the indulgence of Israel in the wilderness, the Bible says, "And He gave their request, but sent leanness into their soul" (Ps 106:15). This verse shows that diet affects man's mind. White repeatedly emphasizes the relationship between digestive organs, diet, and mental action. The "brain will be affected by disturbance in the stomach." Therefore "the relation of diet to intellectual development should be given more attention" because "mental confusion and dullness are often the result of errors in diet."

She states that "wrong habits of eating and drinking lead to errors in thought and action." One wrong habit of eating is overeating: "Overeating, even of the simplest foods, benums the sensitive nerves of the brain, and

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2 White, *Education*, p. 204.

3 Ibid.

weakens its vitality. Overeating has a worse affect upon the system than overworking."¹

Besides statements regarding the quantity of food eaten, the quality of the food and drink ingested are also discussed. These factors have a profound influence upon the quality of mental processes, since erroneous eating and drinking bring negative results in thinking and acting.²

For better physical and mental health, abstinence from stimulating food and drink is advocated: "We bear positive testimony against tobacco, spiritous liquors, snuff, tea, flesh meat, butter, spices, rich cake, mince pies, a large amount of salt, and all exciting substances used as ingredients of food."³ Fruits, grains, vegetables, and nuts, the original food of man as described in Gen 1:29, 3:18, are the best food for body and mind:

Fruits, grains, and vegetables, prepared in a simple way, free from spice and grease of all kinds, make with milk or cream, the most healthful diet. They impart nourishment to the body and give a power of endurance and vigor of intellect that are not produced by a stimulating diet.⁴

In harmony with White's writings, medical science has discovered a relationship between a heavy fat diet and cerebro-vascular diseases. A heavy fat diet, with high

¹Ibid.
²White, Testimonies, 9:159-160.
³Ibid., 3:21.
⁴White, Counsels on Health, p. 115.
quantities of cholesterol, may cause the narrowing of the brain's blood vessels, known as cerebro-vascular disease. Because of the lack of oxygen some neurons die, and the intellect and reasoning powers fade as a result.¹

Because of the effect of diet upon the mind, the United States Senate's Select Committee on Nutrition and Human Needs (Sen. George McGovern, chairman) suggests the improvement of diet, switching from "junk foods" to foods high in protein and complex carbohydrates, such as vegetables and grains.²

Mind Affects Body

Paul counseled the Romans: "present your bodies a living sacrifice, holy, acceptable unto God, which is your reasonable service. And be not conformed to this world, but be ye transformed by the renewing of your mind, that ye may prove what is that good, and acceptable, and perfect, will of God." (Rom 12:1, 2) These verses indicate that the "renewing of the mind" leads the body to be acceptable unto God. In other words, the condition of the mind affects the body.

White emphasizes the influence of the mind on the body, as well as the body on the mind.³ The condition of

²White, Testimonies, 3:21.
³White, Education, p. 197.
of the mind has much to do with the healthy function of the entire physical system.1

Mind, Factor in Sickness

Scripture reads "a broken heart dries the bone" (Prov 17:22). The mind can be a significant factor in contributing to sickness or disease. In harmony with the Bible, White holds that:

Sickness of the mind prevails everywhere. Nine tenths of the diseases from which men suffer have their foundation here. Perhaps some living home trouble is, like canker, eating to the very soul and weakening the life forces. Remorse for sin sometimes undermines constitution and unbalances the mind.2

Speaking about the origin of sickness, she points out that:

Disease is sometimes produced, and is often greatly aggravated, by imagination. Many are lifelong invalids who might be well if they only thought so. Many imagine that every slight exposure will cause illness, and the evil effect is produced because it is expected. Many die from disease, the cause of which is wholly imaginary.3

Several conditions of the mind which can be causes of sickness are listed. They include grief, anxiety, discontent, guilt, remorse, and distrust.4

Medical science has developed the term "psychomatic" to express mind-body disease and physical sickness which is the result of an emotional reaction. One example of the

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1 White, Education, p. 197.
2 White, Testimonies, 5:444.
3 White, Counsels on Health, p. 344.
process of psychosomatic disease can be seen in the following:

Fear and anger activate the autonomic nervous system and stimulate adrenal glands to produce increased epinephrine. Epinephrine has many effects on the body including increases in the heart rate and blood pressure, and release from the liver of glycogen.1

Medical science has discovered that emotional stress may affect the heart and may cause high blood pressure, urinary and sexual organ abnormalities, serious diseases involving the respiratory organs (such as asthma), arthritis, and dysmenorrhea (painful menstruation).2 Duodenal ulcers, chronic indigestion, and ulcerative colitis have also been seen by medical science as the result of emotional stress. "The relation between emotional stress and diseases of the colon has become so obvious," according to Dr. Harold Shryock, "that physicians are now using the term irritable colon syndrome to describe this symptom complex."3 Repeatedly, medical science supports Ellen G. White's contention that the condition of the mind can be a significant factor in human sickness.

Mind Factor in Physical Health

The Bible shows that physical health can result from

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3Ibid., p. 130.
a good condition of the mind. This concept is found in Prov 14:30 "A sound heart is the life of the flesh." Another translation reads: "A tranquil heart is life to the body" (NASB).

In harmony with the Bible, White believes physical health can be gained by changing the state of mind. It is not surprising that she says, "Great wisdom is needed by the physician . . . in order to cure the body through the mind." The state of the mind is able to build up physical resistance and facilitate recovery from disease.

Several conditions of the mind are important for gaining physical health, including the power of will, courage, hope, faith, sympathy, love, a sense of forgiveness, peace of mind, cheerfulness, and joyfulness.

The Power of the will

Special emphasis is placed on the power of will as an important factor in resisting disease. She says that "exercise [of the power of the will] in the right direction . . . would control the imagination and be a potent means of resisting and overcoming disease of both mind and body."

1. White, Counsels on Health, p. 249.
2. White, Spiritual Gifts, 4:145.
5. Ibid.
Medical science has proved the necessity of the power of the will for better physical health. "The power of the will is related to the response of body tissues. Without the power of body to carry through our ideas, accomplishment is difficult, so we must consider will power is physical, as well as mental faculty."\(^1\)

The closeness of the body/mind relationship is revealed in the fact that scientists can evaluate the power of the will in man's body by checking his muscle tone. Because it is extremely difficult for a sick person to direct his will one way or another, medical science suggests that "educating the will is one important factor in educating the mind, in building up the whole body."\(^2\)

Cheerfulness

Prov 17:22 says, "A merry heart does good like a medicine." This shows the importance of cheerfulness for physical health. Writing about cheerfulness, White says that it will give vigor to the mind and health and vital energy to the body.\(^3\) The importance of gratitude and praise are mentioned. "Nothing tends more to promote health of body and soul than does a spirit of gratitude and praise."\(^4\)


\(^2\)Ibid.

\(^3\)White, Counsels on Health, p. 502.

\(^4\)White, Ministry of Healing, p. 248.
In the maintenance of health and the cure of disease, cheerfulness is seen by medical science as an important factor. According to Dr. A. J. Sanderson, cheerfulness is as strong a power to do good as medicine. "It brightens the eyes, makes ruddy the countenance, brings, elasticity to the step, and promotes all the inner forces by which life is sustained. The blood circulates more freely, the oxygen comes to its home in the tissue, health is promoted and disease banished."

**Freedom from Guilt**

There are many benefits of freedom from guilt. Peace and love diffuse through the whole being as a vitalizing power. Freedom from guilt also touches the brain, heart, and nerves with healing, serenity, and composure as well as bringing joy in the Holy Spirit.

The source of a more beneficial condition of the mind can be found in the love of Christ. "It implants in the soul, joy that nothing earthly can destroy, ... health-giving, life-giving joy."

Because of the closeness of the body/mind relation-

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2Ellen G. White to S, February 24, 1887, and letter 38, 1905, EGWRC.


4Ibid.
ship, there is a need for keeping both body and mind in the best possible condition. Medical science, in fact suggests the treatment of mind and body at the same time, in the case of psychomatic and somatopsychic patients, so the recovery will effect the whole person.

Approaching Spiritual Needs through the Physical

In view of the fact that man is an integrated being in which each aspect of his being depends on and affects the others, fulfillment of man's physical needs can be an adjunct for meeting his spiritual needs. This has been God's method in guiding man. In 1 Kgs 19:1-18 the Bible records the story of Elijah who ran away from God because of his depression and discouragement. In order to restore his faith, hope, and courage, God fulfilled his physical needs first by giving him enough rest, food, and water. (vss. 5-8). After his physical health was restored, the Lord revealed Himself to him and gave some instructions to him (vss. 9-18).

The Gospels show that Jesus was concerned with man's physical needs; He spent more time performing miracles of healing than teaching and preaching. In her comments regarding the purpose of these divine healings, White says:

Jesus healed the people of their diseases when they had faith in His power; He helped them in the things

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1White, Counsels on Health, p. 543.
2Jensen, p. 186.
which they could see, thus inspiring them with confidence in Him concerning things which they could see—leading them to believe in His power to forgive sins.1

This statement is based on the words of Jesus when He healed the man sick with palsy: "That ye may know that the Son of man hath power on earth to forgive sins, Arise, take up thy bed and go unto thine house" (Matt 9:6). She also states, "the Saviour mingled with men as one who desired their good. He showed His sympathy for them, ministered to their needs, and won their confidence. Then He bade them, 'Follow Me'."2

The fulfillment of man's physical needs as an adjunct for the fulfillment of his spiritual needs was the practice of the apostolic church. When Jesus instructed His disciples to go out, He asked them to heal the sick and preach the gospel (Matt 10:1, 7, 8). The same practice was followed by Paul and Luke, "the beloved physician." White describes this as follows:

Paul heard of his [Luke's] skill as a physician, and he sought him out as one to whom the Lord had entrusted a special work. He secured his cooperation in his work. After a time he left him at Philippi. Here Luke continued to labor for several years, doing double service as a physician and a gospel minister. He was indeed a medical missionary. He did his part, and then besought the Lord to let His healing rest upon the afflicted ones. His medical skill opened the way for the gospel message to find access to hearts. It opened many doors for him, giving him opportunity to preach the gospel among the heathen. . . .3

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1White, Steps to Christ, p. 50.
2White, Ministry of Healing, p. 143.
3White, Evangelism, p. 543.
It is God's plan that we shall work as the disciples worked.\(^1\) This includes the ministry to man's physical need as an adjunct to winning the whole person. "The more closely the New Testament plan is followed in missionary labor, the more successful will be the effort put forth."\(^2\)

It would appear that scientific discoveries which speak about the wholeness of man, in the sense that each aspect of man is interdependent, corroborate the teachings of the Bible and Ellen G. White. The mind depends upon the body, and the body depends upon the mind; the mind affects the body, and the body affects the mind. For this reason, the care and treatment of man should work toward healing the whole person. Moreover, the fulfillment of man's physical needs can be an adjunct to fulfilling his spiritual needs.

\(^1\)Ibid., p. 544.

CHAPTER V

SUMMARY AND CONCLUSION

The Bible and the writings of Ellen G. White, supported by medical science, reveal that man is a holistic being—indivisible and integrated.

The wholeness of man is expressed in the Bible by the word "soul" (nephesh in the Old Testament, and psyche in the New Testament) and the same word is used in the writings of Ellen G. White. These words point to man as a whole, man as a person, and to man's life itself. The word pneuma in the New Testament can denote man as a whole, and the use of "heart" and "body" in the Old and New Testaments usually expresses the whole man. The wholeness of man expressed by these words includes the completeness of man as a person who has body, mind, and soul, or physical, mental, and spiritual aspects.

Although man consists of several aspects, he is indivisible. The indivisibility of man can be seen in the fact that the absence of one aspect, for example, ruach or life principle, means death. At the same time, the words "soul" and "spirit" in the Bible and the writings of White usually mean man's mind, or the seat of emotions, including feeling, thinking, and reasoning. These aspects cannot be
separated from man himself because they are part of the whole. If he feels, he feels with his whole being. The use of "soul" and "spirit" in this sense shows that man is a unit. He is an indivisible being.

The indivisible man is clearly found in the Bible and the writings of White. Both teach the condition of man before the fall, after the fall, and in restoration. Man as a whole was perfect before the fall. All aspects of man, physical, mental, and spiritual, were totally affected by sin, and the restoration of man is going to take place in the whole man also, without any separation.

The Bible and the writings of White, with corroboration from medical science, also reveal that body and mind are interdependent. Just as "dust from the ground" and the "life principle" are interdependent for man's existence, body and mind are interdependent in every human being. Moreover, mind and body interact with each other. Our mind will not work properly if we are sick. Improving our diet and physical habits will enable us to think more clearly. On the other hand, emotional stress, worry, or anxiety can produce physical sickness; while proper conditioning of the mind brings better physical health.

Because the Bible and the writings of White teach the wholeness of man, the indivisible man, and that aspects of man are interdependent, it is necessary for us to regard man as a whole in our ministry. Educational institutions should be concerned with man's physical and spiritual
development; and health institutions should serve man's mental and spiritual needs, as well as his physical needs.

Furthermore, every effort in introducing the gospel to human beings should be centered on the whole man as a physical, mental, and spiritual being. Every program of evangelism should be able to attract man as a whole. The content of evangelistic programs should fulfill the needs of man's physical, mental, and spiritual aspects. Therefore, health programs should be a part of evangelistic efforts. Health programs can even be the opening wedge for gospel evangelism. Health evangelism is a vital program for introducing the gospel to the whole man, because man is a holistic being.
PART II

HEALTH EVANGELISM PRACTICES IN THE WEST INDONESIA UNION MISSION OF SEVENTH-DAY ADVENTISTS - A SURVEY WITH RECOMMENDATIONS
CHAPTER I
INTRODUCTION

"Health evangelism" is a term used to denote the Christian health education which has been promoted by Seventh-day Adventist institutions and professional personnel.\(^1\) Ellen G. White used the term "medical evangelist" or "medical missionary" to refer to a person dedicated to serving both man's physical and spiritual needs. In her understanding, medical missionary work refers to more than the work of sanitariums, hospitals, and licensed medical practitioners; medical missionary work can be done by all. "Life is full of opportunities for practical missionaries. Every man, woman, and child can sow each day the seeds of kind words and unselfish deeds."\(^2\) However, this part of the paper is limited to the usage of the health approach in evangelism. It will not be concerned with the work of professional health institutions such as hospitals and clinics, nor with the more general aspects of medical missionary work.

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\(^{2}\) White, Medical Ministry, p. 317.
Brief History of Health Evangelism

White pointed out the dangers of such harmful substances as tobacco, tea, and coffee in 1848.\(^1\) In 1863 the first health-related pamphlet entitled "An Appeal to Mothers" was printed. Among other things it discussed the danger of drugs and incorrect diet. In keeping with their interest in healthful living, James and Ellen White began giving health lectures in 1864.\(^2\) In 1878, Dr. John Harvey Kellogg, the Whites, and G. I. Butler organized the American Health and Temperance Association. Its purpose was to expose the harmful effects of using tobacco, alcohol, tea, and coffee.\(^3\) In the same year, Kellogg opened a school of hygiene for the training of health lecturers.\(^4\) In 1909 he organized the Health and Efficiency League of America, and in 1919 he served as president of the Michigan Anti-Cigarette Society.\(^5\) It was reported that Kellogg would bring smokers from around the world to the Battle Creek Sanitarium (to cure them of their habit), but he never perfected a workable public program headed by a minister —


\(^2\)Ibid., pp. 77, 78, 90.


\(^4\)Neufeld, s.v. "Health Evangelism"

\(^5\)Schwarz, p. 107.
The importance of health evangelism was emphasized by Ellen G. White in 1901 when she said, "Nothing will open doors for the truth like evangelistic medical missionary work. . . . Doors that have been closed to him who merely preaches the gospel will be opened to the intelligent medical missionary." In 1912, in response to the counsel of White, consideration was given to how the Seventh-day Adventist health emphasis could be coordinated with the work of gospel evangelism. H. N. Tindall and C. E. Garnsey encouraged ministers to prepare themselves for giving health lectures. It was recommended that health subjects should be discussed once a week in any evangelistic campaign.

Health evangelism programs were more extensive in the 1920s when medical personnel and evangelistic workers were able to cooperate in holding evangelistic campaigns. Health lectures were given two evenings per week and included answers to diet questions, practical demonstrations of better ways of preparing and serving foods, and presentations regarding hygiene and preventive medicine.

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2 White, Evangelism, p. 513.


4 Weeks, pp. 138-140.
Health evangelism came to a renewed prominence in 1941 with the work of two promotors: Dr. J. Wayne McFarland, medical secretary of the Southern California Conference, and Paul O. Campbell, of the Northern California Conference. They found public interest in a combination of doctrinal and health subjects. In the 1950s physicians were again encouraged to cooperate with evangelists in joint public meeting presentations where the medical approach provided an attraction and were followed by the doctrinal messages of the evangelist. However, the cooperation of physicians and evangelists was seen more clearly in 1960s.\textsuperscript{1} In 1962 E. J. Folkenberg and McFarland developed the program that soon came to be called the Five-Day Plan to Stop Smoking. This program combined the spiritual insights of the minister and the scientific knowledge of the physician.\textsuperscript{2}

At the present time, the Five-Day Plan has been held in more than one hundred countries, including Islamic countries. In 1972 Bahrain and Qatar, two Persian Gulf countries with Moslem populations, invited the Seventh-day Adventists to hold the Five-Day Plan. In the same year, the first such session was held in Riyadh, the capital of Saudi Arabia, and one year later, A Five-Day Plan was held for the first time in South Iran.\textsuperscript{3} It was reported that the Five-Day

\begin{itemize}
\item\textsuperscript{1} Ibid., pp. 206, 243.
\item\textsuperscript{2} Ibid., p. 254.
\item\textsuperscript{3} Kagels, pp. 49, 50.
\end{itemize}
Plan to Stop Smoking has been a good bridge for Christians in contacting Moslems in that country.¹

In 1970 the General Conference Ministerial Association and the Health Department cooperated in the development of an integrated health and doctrinal program for public evangelism. The series, the Century 21 Institute for Better Living, was prepared by J. R. Spangler, Leo R. van Dolson, and McFarland. The programs on physical fitness, general health hygiene, stress management, and prevention of heart disease were developed in early 1970. And in 1974, WA-RITE, a weight management program, was completed by Ella May Stoneburner and Van Dolson.² The above programs have been used in many different countries of the world.

In the past few years many health evangelism approaches have been developed. One of them uses vans which travel from place to place and enables the workers to give health screening tests, health lectures, and Bible studies. Usually the screening van is set up near a church school so that rooms in the school can be utilized. The tests given are: blood pressure, hematocrit, urine (for diabetes and kidney disease), mouth and throat (for signs of cancer), and Pap Smear. The results of the tests are given one week after the screening, and more information about them is given


²Neufeld, s. v. "Health Evangelism."
every night for five to eight nights. This is usually followed by health programs such as the Five-Day Plan to Stop Smoking, lectures on nutrition and obesity, lectures on physical fitness, etc. All of these programs are followed by a thirty-minute spiritual talk. The west Puerto Rico Conference of Seventh-day Adventists reported recently that 349 persons were baptized as the result of three months of health evangelism programs using the screening van approach. 1

The same activity has been used successfully in the Florida Conference of Seventh-day Adventists. It was reported that 50 percent of that conference’s total baptisms have resulted from this activity. 2

Approaches to Health Evangelism

There are several major approaches to health evangelism. The first approach introduces a small element of health-related material into the standard evangelistic campaign; a health lesson is given twice a week. This approach was used primarily between 1912 and the 1950s and is still being used in many countries at the present time.

In the second approach, approximately the same amount of time is used for the health presentation and the Bible lesson or sermon. Therefore both health and spiritual


2 Interview with Dr. Herald Habenicht, Andrews University, Berrien Springs, Michigan, March 14, 1979.
matters are emphasized in each meeting. The Century 21 Institute for Better Living is one example of this approach. In this particular series, the health and Bible topics for each meeting are usually related in some way.

The third approach gives more time for the health element, while the doctrinal aspect is given a relatively minor place and is introduced gradually. The Five-Day Plan, physical fitness programs, and the WA-RITE program are included in this category. These programs have been successfully used to break down prejudice toward Christianity and interested people are then willing to study the Bible.¹

The fourth approach is known as the "integrated" approach. Here, no differentiation is made between health and Bible lessons. Interested persons are invited to a discussion program in which all are free to express their opinions. The topics of discussion including either health or doctrinal subjects are covered in an informal style. According to Dr. Herald Habenicht this approach has been successful in several places. For example, this integrated approach resulted in about forty baptisms in Hartford, Michigan in a recent campaign.²

¹Interview with Joyce Hopp, School of Health, Loma Linda University, Loma Linda, California, September 1, 1978.

²Interview with Dr. Herald Habenicht, Andrews University, Berrien Springs, Michigan, December 29, 1978.
The West Indonesia Union Mission of Seventh-day Adventists was organized in 1929 and reorganized in 1964. The territory includes Java, Madura, the Nusa Tenggara group, South Borneo, and Sumatra comprising the Central Sumatra, East Java, Kalimantan, North Sumatra, Nusa Tenggara, South Sumatra, and West Java Missions with a membership of 30,644.¹

Two Adventist hospitals have been established in this field, Bandung Mission Hospital and Medan Adventist Hospital. Medical clinics can be found in the Central Java, Kalimantan, North Sumatra, and Nusa Tenggara Missions.

Health Evangelism Practices

Besides two hospitals and several clinics, health evangelism programs have been held in several places. These programs have utilized various approaches discussed in the previous chapter.

The first, where the health element is a small part of

the standard evangelistic program, has been used in almost all evangelistic campaigns held in Indonesia in recent years. One of the first was held in 1966 during the first ministerial graduates' field school of Indonesia Union College. B. J. Dompas was the evangelist and Dr. B. K. Supit of Bandung Mission Hospital spoke on the subject of healthful living during the first three days of the forty-day evangelistic campaign. In the same year, Supit and Dr. A. H. Mamora spoke alternately once a week in the evangelistic campaign of R. I. Sarumpaet in Bandung.

In the fifth ministerial graduates' field school of Indonesia Union College held in Medan in 1971, Dompas, the evangelist, arranged to have lectures once a week. These were given by Dr. Elisha Liwijaya, assisted by Drs. Hanto-no Tandikin and Kathleen Liwijaya. In some small evangelistic campaigns, the evangelist invited nurses to give the health lecture. Reports indicate that the health lectures appeared to increase attendance at the meetings; this was especially true of the evangelistic campaign in Solo. The attendance increased from 550 the first night to 750 persons the second night, but the attendance decreased when the health lectures were no longer given.¹

The second approach in which health and Bible lessons are given in each meeting was used in the South Sumatra Mission. F. J. Wuysang, director of the Tanjung Karang

¹Interview with B. J. Dompas, Andrews University, Berrien Springs, Michigan, December 19, 1978.
Clinic of Seventh-day Adventists, has used this approach many times since 1969. He begins by holding free clinics for the community and then continues with weekly meetings in which a health lecture is given for the first fifteen minutes, followed by a Bible study. He reports that many stop attending when he begins the Bible study, and his experience has been that 90 percent of those that remain are converted and baptized into the S.D.A. Church. 

This approach was used by the young people of the Medan, Martapura, S.D.A. Church in 1977. Some of these young people were physician or medical students. The health lecture and gospel message were given once a week. This program served as a preparation for the crusade held by M. T. Bascom, an evangelist of the Far Eastern Division of Seventh-day Adventists. Several of those who attended this crusade were baptized.

Among the many possibilities included in the third approach, in which the health element is given more emphasis than the spiritual element, is the use of the Five-Day Plan and cooking demonstrations. There is no record that the physical fitness, stress management, heart attack prevention, or WA-RITE programs have ever been held in Indonesia.

The Five-Day Plan

In 1963, soon after the Five-Day Plan was developed by

\[1\] F. J. Wuysang to Jonathan Kuntaraf, January 11, 1979.
the translator. Thirty persons decided to quit smoking in this campaign and some of them attended church services. There is no record of baptisms as a direct result of this Five-Day Plan.¹

Cooking Demonstration

Cooking demonstrations have been given by many SDA churches in the West Indonesia Union Mission during the past ten years. However, most of these are given to the church members to demonstrate ways of cooking vegetarian foods. Cooking demonstrations used as a media of health evangelism to which non-SDAs are invited have been held several times, especially in Jakarta, Malang, and Surabaya.

Cooking demonstrations for the public were held in the Jakarta Center from September 17 to 20, 1973, by Mrs. C. G. Oliver, Parents and Home Secretary of West Indonesia Union Mission. She was assisted by Mrs. Marion Simmons, Mrs. Amos Simorangkir, Mrs. Alvin Bartlett, Mrs. Bahasa Soemarna, and Mrs. Thomas Umboh. The program also included nutritional guidance, parent and home training, and presentations on flower arrangement. The event caused interest among many middle and upper class people in Jakarta, and it was reported that 150 persons received certificates of attendance.²

¹Warta Gereja, November 1973, p. 19.
²Warta Gereja, January 1974, pp. 16-17.
Folkenberg and McFarland, R. T. Mamora, president of the Kalimantan Mission, held this program three times in South Sumatra. In 1967 he held one in West Irian. The program caused considerable interest in the community, however no follow-up program was instituted. Some people received individual Bible studies, and a few were baptized into the SDA Church.¹

The second person to hold Five-Day Plan in Indonesia was Dr. H. A. Novak, a missionary physician stationed at the Bandung Mission Hospital. In 1971 he held this program in the cities of Sukabumi, Pekalongan, and Jakarta; Bahasa Soemarna served as his translator. This program resulted in considerable community interest, and it prepared the way for the evangelistic campaign which was then held by Soemarna. According to him, about 15 percent of the people who attended the Five-Day Plan were baptized.

The third person to hold a Five-Day Plan in Indonesia was R. Rampton, a student missionary. In 1973-74 he held this stop-smoking campaign in the five SDA churches of Jakarta, namely, Bendungan Hilir, Salemba, Tanjung Priok, Cililitan, and Jatinegara. Public interest was generated, but there was no follow-up program.² In the same year, Rampton and another student missionary, D. Martin, held a Five-Day Plan in Pasuran, East Java, with Basir Soecipto as

²Interview with Bahasa Soemarna, Andrews University, Berrien Springs, Michigan, November 26, 1978.
A much larger interest in cooking demonstrations can be found in Malang and Surabaya, East Java. Mrs. Sie Tiong Gie has been active in giving cooking demonstration in Malang, Surabaya, Den Pasar, and other smaller towns. In early 1979 the Bupati (county leader) of Malang promoted cooking demonstration for his staff members and village leaders, and Mrs. Sie was invited to give the demonstrations. It was reported that 200 people were present. The same program was given in Batu and the AURI (Indonesian Air Force) compound in Singosari with the help of Miss Wagiran of the Bandung Mission Hospital, who have health lectures. The interest of the community was great; however, there was no follow-up program.¹

Since 1974 the Anjasmoro church in Surabaya has been considered the most active church in presenting cooking demonstrations to the public. The demonstrations are under the directorship of Mrs. Liem Koen Hien. This health evangelism program is presented annually and usually lasts two or three days. The program consists of the following: parents and home guidance, nutritional guidance, cooking demonstrations, food sales, and table etiquette demonstrations. The most successful program was the one held in Taman Hiburan Rakyat (Community Entertainment Park) May 26 to June 3, 1976, which was visited by the governor of East Java and many other high officials. This public cooking

¹Mrs. Sie Tiong Gie to Jonathan Kuntaraf, February 25, 1979.
demonstration was conducted by Mrs. Tan Wie Sian, Mrs. Liem, Mrs. Sie, and Mrs. J. Senduk. The success of this cooking demonstration is seen by the fact that about 300 non-SDA ladies indicated an interest in private cooking demonstrations.¹

In the past three years the cooking demonstration team in Surabaya has received invitations from the following groups: I.D.I. (Indonesia Medical Association), K.K.O. (Indonesian Navigation), Pelni (Indonesia Shipping Company), Wanita Katolik (Catholic Ladies Association), and Wanita Protestant (Protestant Ladies Association). According to Mrs. Liem, "The interest is great, but our capability is limited, at the same time, there is no follow-up." Her experiences in holding cooking demonstrations show that the program can attract upper and middle class people from various religions, including Moslem, Catholic, and Protestant.²

Challenges

This brief report of the health evangelism practices in West Indonesia shows that health evangelism thrust is not as strong as in the United States and not as many types of programs have been attempted. Correspondence and interviews with several church leaders and medical personnel from the West Indonesia Union indicate that the reasons for this are primarily: (1) lack of capable personnel for

¹Warta Gereja, October 1976, p. 23.
²Mrs. Liem Koen Hien to Jonathan Kuntaraf, December 6, 1979.
health evangelism, (2) lack of training, and (3) lack of materials.

This can be seen from the fact that the Five-Day Plan has been conducted only thirteen times, and almost all these campaigns were conducted by a missionary doctor or a student missionary. Cooking demonstrations have proved to be popular with the public, however, because of limited trained personnel some past requests could not be granted.

Another reason for the lack of emphasis on health evangelism seems to be a lack of attention and promotion from higher levels of church administration. In addition, it is generally recognized by many workers that healthful living has not been practiced by many members and workers of the SDA Church in West Indonesia. As a result, many have hesitated to hold health evangelism programs.¹

Moreover, the overall health evangelism program in West Indonesia shows several weaknesses. One of the main weaknesses is the lack of follow-up programs. Several Five-Day Plans and cooking demonstrations have been held without any follow-up on those who are interested in the program. Therefore, simply holding Five-Day Plans and cooking demonstrations seem to be an end in themselves rather than stepping stones in the winning-soul process.

It is true that several follow-up programs were held, such as the evangelistic meeting which followed the Five-

¹Interview with N. G. Hutauruk, Andrews University, Berrien Springs, Michigan, December 19, 1978.
Day Plans in Pekalongan and Sukabumi or the evangelistic campaign or Bible study which followed the health lectures in South Sumatra. However, there was no bridge between the health program and the spiritual program. The drastic change from physical health emphasis to spiritual health emphasis has caused some people to stop coming to the program and, as a result, the number of baptism was not as high as expected.¹

**Potential of Health Evangelism**

Despite the fact that the West Indonesia Union Mission is lacking capable personnel for health evangelism, this field has a great potential for health evangelism. This area has 30,644 members and 450 workers. Of these workers 182 are ministers, 9 are medical doctors who work in SDA hospitals and clinics, and about 150 are nurses who work in the two hospitals and fifteen clinics in this field.²

Aside from all the doctors and nurses who work in SDA institutions, there are many Adventist medical doctors and medical students in all the big cities of Indonesia who are willing to help in health evangelistic programs. In fact, in Medan alone there are thirty-two medical doctors and dentists as well as students who have associated themselves into the IKKGA (National Adventist Medical and Dental Asso-

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²E. Matita, secretary of B. Malingkas, Secretary of the West Indonesia Union Mission, list of workers enclosed in letter to Jonathan Kuntaraf, December 13, 1978.
Association). Members of this group go to remote areas and hold free clinics and give health lectures to SDA members in many places. Dr. Kathleen Liwijaya-Kuntaraf, the former president of this association, expressed her view: "We know that the medical work is the right hand of the gospel, but we do not know how it works unless we receive enough training in how to work together with ministers."¹ From a minister's viewpoint, Elder Hutauruk, the former union president of the West Indonesia Union Mission, believes that the ministers have a desire to hold this type of evangelism program; however, training is needed.²

The potential of health evangelism seems to be greater as we look at the government's policy for medical, dental, and nursing graduates. All medical and dental graduates have to serve the government by working in the Puskesmas (community health centers), usually in the remote areas. At the same time, graduate nurses are obligated to serve the government as Penjenang Kesehatan (health guides) in remote areas. Since SDA physicians and nurses are graduated from time to time, they are potential health evangelists wherever they are located. So the potential of health evangelism is great, as long as specific training regarding health evangelism is given to these medical workers.

¹Interview with Dr. Kathleen Liwijaya-Kuntaraf, Andrews University, Berrien Springs, Michigan, August 28, 1978.
²Interview with N. G. Hutauruk
CHAPTER III

SOCIO-CULTURAL BACKGROUND OF INDONESIA AS IT RELATES TO A HEALTH EVANGELISM PROGRAM

Indonesia as an archipelago of 13,677 islands and a population of 133,650,413 with a unique culture.¹ Culture has been broadly defined as including all man's works, such as his art, his science, his agriculture, his literature, his language, his rites of worship, his domestic life, and his social custom.² However, this chapter will deal only with those aspects of culture which are seen as having immediate relevance to health evangelism programs in Indonesia.

Religion in Indonesia

At the close of 1971, when the total population was 119,232,499, the religious breakdown of Indonesian people was as follows: Moslem, 84 percent; Protestants, 6.8 percent; Roman Catholics, 2.49 percent; Hindus, 3.36 percent; Buddhists and Confucianist, 2.49 percent, and Mystical sects

¹Focus on Indonesia, July 6, 1978, p. 30.
and tribal religions, 1.25 percent.¹

Islam as the Major Religion

There are more Moslems in Indonesia than in any other country of the world, more than in all the Arab countries put together. History indicates that Islam was brought to Indonesia by Indian traders in the thirteenth century. It started from Aceh, North Sumatra, spread to Minangkabau, West Sumatra, and then to Java and Kalimantan. Therefore, almost all the major islands in Indonesia are primarily Islamic. The teachings of Islam were easily mixed with the existing Animism and Hindu-Budhism. Because the Islam of Indonesia was influenced by local tradition, most anthropologists do not consider it to be a pure form of Islam.

Although over 80 percent of the Indonesians are professed Moslems, many refer to themselves as Islam Statis-tik (Moslem for statistical purposes). In fact the Moslems in Indonesia, especially in Java, can be classified into two groups of Moslem: santri, the Orthodox Moslem; and aba-ngan, who are more inclined to the traditional animistic beliefs and practices veneered by Islam.² However, both groups base their beliefs on the Moslem Holy Book, Al Qur’an (the Koran).


The Moslem's interest in health

In general, Moslems have a great interest in the subject of health. In fact, it is a part of Islamic teaching. Their religion acknowledges a distinction between clean and unclean foods. The terms used are haram (banned or unlawful) and halal (permitted). A list is given of lawful cattle and fruits, and there are several lists of forbidden food. The main prohibitions are those regarding swine's flesh and strong drink. The Koran states: "So eat of what God has provided you lawful and good; and be you thankful for the blessing of God, if it be Him that you serve. These things only He has forbidden you, carrion, blood, the flesh of swine, what has been hallowed to other than God."\(^1\)

Lists of lawful cattle and fruits can be found in Surah 6:137-51, and fish lists can be found in Surah 5:57.\(^2\) It is generally known by Moslems that specific foods are forbidden for health purposes.\(^3\) Therefore, the teaching of healthful living will be in harmony with the beliefs of Moslem.

The collaboration of Moslems and Christians in Indonesia

One of the unique aspects of Indonesian Moslems is


that despite theological differences with Christians in big cities like Jakarta, Surabaya, and Semarang, they are apparently willing to collaborate with Christians in meeting community needs. A local organization called Inter-Religious Cooperation for Community Organization (ICCO) has been established, and Moslems and Christians are both involved in its operation. The activities of this group are described as follows:

In Jakarta, the area of activities is mainly concentrated in the industrial slums of the northern part of the city in which the cooperation of the local city government is required. Examples of social needs include family planning, housing problems, sanitation and teaching various skills to unemployed trishaw drivers who have been victims of the modernization of city traffic.

Funds, personnel, and other facilities for this program have been contributed by religious groups and private individuals. In fact, it is the expectation of the government that all religious communities will work together and use the financial resources available to develop programs and projects to fill the needs of humanity.

The Contradiction between the Constitution and Actual Practices

According to the Indonesian Constitution, which was established in 1945, "The State shall be based upon belief in the One Supreme God. The State shall guarantee the

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freedom of the people to profess and to exercise their own religion.\textsuperscript{1}

This statement implies the freedom of the individual to change his religion and of a group to promote religion. This constitutional provision has resulted in toleration between Christian and Moslems in Indonesia and collaboration between several different religious bodies. Almost all churches in Indonesia agree that the government's policy toward religion has been one of the main reasons for the progress of Christianity in this area, which is one of the most rapidly growing in the world.\textsuperscript{2}

However, it seems the situation has changed gradually as the work of Christianity has progressed. More than 90 percent of the population were Moslem in the 1960s.\textsuperscript{3} But statistical reports show that this decreased to 84.5 percent in 1971.\textsuperscript{4} The regressing of Islam and the progressing of Christianity in Indonesia has made some of the Moslem leaders unhappy. They expressed their feeling by criticizing the way Christians convert Moslems. "Christianity is trying to force secularism on the world of Islam."\textsuperscript{5}

\textsuperscript{1}Indonesia, Constitution, Chapter XI, Sections 1 and 2, published in \textit{Focus on Indonesia}, July 1970, pp. 14-19.


\textsuperscript{3}Palmier, p. 130.

\textsuperscript{4}Cooley, p. 5.

In response to Islam's criticism of Christianity's practices, the government took the action of forbidding evangelistic campaigns. It is now against the law to hold public evangelistic campaigns in Jakarta. Christian work in Aceh (North Sumatra) has been closed since 1968; here no congregation is allowed to meet. The climax came in August 1978 when the Minister of Religious Affairs announced decision number 70/1978 regarding the guidelines for sharing religion. According to this action, the sharing of religion should be based on mutual respect among members of the religious community, and individuals and groups are not allowed to: (1) share their religion among people who already have a religion; (2) use persuasion or any means to attract people to join another religion; (3) distribute pamphlets, bulletins, magazines, or books in the areas or to the houses of people who have a different religion; or (4) go from house to house among people who have a different religion.¹

Since this decision is not in harmony with the Indonesian constitution, the Dewan Gereja-gereja Indonesia (Council of Churches in Indonesia) and Majelis Agung Wali-wali Indonesia (High Council of Catholic Churches) have struggled hard to change the action. However, six months have passed since the first protest was sent (August 24, 1978) and there has been no answer from the government, which indicates the serious intention of the government to

¹Sinar Harapan, September 16, 1978.
apply these guidelines.

Socio-economic Factors

Population and family planning

It has been said that the population of Indonesia is over 133 million. It is the fifth most populous country in the world, following the United States in population size. Indonesia is a heterogeneous country with 250 languages and about thirty ethnic groups. Many of these ethnic/language groups are quite large, such as the Javanese, of which there are about 50 million.\(^1\) The population density per square kilometer in Java was 537 persons in 1971.\(^2\) The rate of increase per year in Indonesia is 2.4 percent. This means that by the year 2000, the population of Indonesia will reach 235 million.\(^3\)

In view of the fact that the large population is one of the main problems in Indonesia, the government has instituted a family planning program. Actually, before 1967, the government officially discouraged family planning in favor of a large population which was thought of as a symbol of national greatness.\(^4\) As late as 1969, many still argued that family planning was not in harmony with


\(^2\)Cooley, p. 3.


\(^4\)Bakker, p. 145.
the teachings of Islam. "According to Islam, family planning should be practiced with a view to increasing the number of family numbers so there will be more people able to serve the interest of Islamic society."

However, by the mid-1970s, the government began actively encouraging family planning and welcomed external assistance from official and voluntary agencies. According to Dr. Haryono, Third Deputy of the National Family Planning Coordination Board, up to 1977 family planning in Indonesia saved the lives of 7,000 mothers, and prevented some 3.5 million births. Lectures on family planning are given by medical personnel at community health centers throughout the country. Nevertheless, some old ideas such as "more children, more blessing" still can be found everywhere. Family planning has not been well accepted because people do not understand how limiting the number of children will improve their situation.

The Economic situation

Actually, Indonesia is a very rich country; it is especially rich in natural resources. This country exports oil, timber, fish, copra, rubber, tin, and aluminium to

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1Ibid.


3Ibid.

4"At the Cross Road," Internation Review of Mission 63 (July 6, 1974):324.
many countries around the world; in 1977 its exports were worth $8,700,000,000.\(^1\) However, the large population and limited development of natural resources has resulted in a large gap between lower class and middle/up class people.

The Gap between the lower class and middle/upper class

Although the government would like to see the nation's wealth distributed more evenly in Indonesia,\(^2\) in actual practice this is far from being so. In large cities such as Jakarta, Surabaya, Bandung, Semarang, and Medan, many millionaires can be found. But in rural areas, 83 percent of the population lives on a very low income.\(^3\)

Actually, in the past, the upper classes were the aristocracy who lived in court towns such as Jogyakarta and Surakarta, and the nobility who lived in smaller towns and used to be called priyayi. But the situation has changed. The upper class in Indonesia consists primarily of senior government officials, officers in the armed forces, senior staff members of large cooperations, members of the academic staffs of the universities and other tertiary educational establishments, religious officials, doctors, lawyers, engineers, architects, politicians, writers—in general, the intelligensia; and lastly, a new group, those

\(^1\)News and Views, June 1977, p. 1.
\(^3\)"At the Cross Road," p. 341.
involved in business.¹

On the other hand, the middle class is composed of clerks, petty traders, and manual laborers; the low class is generally composed of peasants with low incomes.² The division between middle/upper class and lower class is determined by education and income. "The gap between the rich and the poor continues to widen under Indonesian's current development pattern."³

GNP and government expenditure on health

A report from the World Health Organization shows that in 1965 the Gross National Product per capita in Indonesia was $99.⁴ This figure has increased to $150, according to a December 1976 report.⁵ But the devaluation of the Rupiah by 50 percent in December of 1978 probably decreased the GNP to about $100 per capita.

Indonesia's low GNP influences the government's expenditure on health. In 1963-64 the government expenditure on health services was only 2.8 percent of the total government expenditure, which means only $0.20 per capita annually. Although there is no accurate record for 1977-78, the assumption of the World Health Organization is that it will

¹Palmier, p. 122. ²Ibid., p. 123.
³Cooley, p. 5.
be increased to $0.25 by the year 2000. The low expenditure on health has resulted in increased health problems in Indonesia which cannot be solved without help from outside.

Tobacco, one of the main products

Aside from health problems which have resulted from the low government expenditure on health service, the most rapidly increasing health problem is directly related to the increased production of tobacco. In 1976, 14,063,321 kg. of tobacco were produced in Indonesia, and the government is trying to increase the production of cigarettes 9 percent a year. Statistics show that 60,558,460,738 cigarettes were produced in 1976; this was increased to 66,861,027,738 in 1977. There is no accurate information concerning the number of cigarette smokers in Indonesia. According to a 1976 newspaper report, there were approximately 60,000,000 smokers, which would be 46 percent of the population. According to the 1971 census, 61.3 percent of the population in Indonesia was below 25 years of age.

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1 Bryant, p. 48.


This means that there are approximately 52,000,000 people over the age of 25, and if there actually are 60,000,000 smokers, then the vast majority of adults must be smokers. This would mean that Indonesia has more smokers than the U.S. (50,000,000 in 1978).

The Health Department realizes the dangers of smoking; however, there is no government's effort to discourage it because the cigarette industry produces income for the government. In addition, the attitude of people toward smoking seems to be influenced by their religious beliefs. The majority of the people in Indonesia are Moslems, and according to the teachings of Islam, smoking is makhruh, which means reward will be given for those who do not smoke, but no punishment for those who do smoke. As a result, Moslems are not concerned about smoking on religious grounds.

Cultural Features Relevant to Health Evangelism

There are several features in Indonesia which have been used successfully to bring people to Christianity and

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2 Setiadi
3 In Indonesian Islamic teaching, one of four terms is applied to any activity: Wajib—reward is given if we do, punishment if we do not; Haram—reward is given if we do not, punishment for the doer; Sunah—reward is given if we do, no punishment if we do not; Makhruh—reward is given if we do not, but no punishment if we do. Since courses in Islamic teaching are compulsory for those who study in public school, these terms are generally known.
which can be used again for successful health evangelism programs. These are *gotong-royong*, *adat*, and *wayang*, which will be described in this section.

**Gotong-royong**

Indonesia emphasizes *gotong-royong* in national life, which is the idea of mutual help. Actually this custom originally came from the peasants who helped each other in planting rice or harvesting. However it also is evidenced in cooperative trade agencies and even includes activities at the time of death, birth, or marriage, and ceremonial feasts and other projects.¹ The study done by Dr. Jan M. Hutauruk shows that the principle of *gotong-royong* contributes to the progress of church growth in Indonesia, since people will approach church building and soul winning with this kind of spirit. Hutauruk shows that one of the characteristics of *gotong-royong* is *musyawarah*, which means deliberation for consensus, in which the spirit of openness, people-mindedness, Christian attitudes, and equality can be found.² Since consensus is one of the important aspects for changing behaviour, it is proper to use the cultural influences of *gotong-royong* and *musyawarah* in approaching people in health evangelism.

¹Palmier, p. 132.

Adat

Adat is defined as "the prescribed ways of doing things, particularly the ordering of human relations."\(^1\) Adat is very deeply rooted in the lives of most Indonesians, and each ethnic group has its own adat. The impact of the adat still can be felt in such situations as birth and name-giving, circumcision, marriage, divorce, death and burial, inheritance, the annual festival, and the construction of homes or public buildings. It is believed traditionally that illness, misfortune, even death will result if adat is not observed properly.\(^2\) One of the important aspects of adat includes respect for elderly people and obedience to authority. For this reason, the village leader is usually the oldest person in that village. In fact, the leader is considered spiritually powerful, and his descent is usually traced back to one or another superior ability who founded the royal line.\(^3\) In view of the fact that most people in Indonesia listen to the village leader or to older people, it is very important to obtain their consent before beginning any program of health evangelism.

Wayang

A widespread entertainment show originating in Hinduism is called: wayang.\(^4\) In Java, four types of wayang can be found: wayang kulit, golek, topeng, and wong. Wayang

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\(^1\)Cooley, p. 27.  
\(^2\)Ibid.  
\(^3\)Palmier, p. 127.  
\(^4\)Ibid., p. 128.
kulit is known as shadow play and is performed with flat leather puppets. In the wayang golek the puppets are made of wood and operated by the dalang (performer) in such a fashion that the puppets give the impression of being alive. In both wayang wong and wayang topeng, the puppets are replaced by human performers. This kind of entertainment is popular in Java and Bali and was used by the Nationalists to spread their message during the struggle against the Dutch.¹ Health evangelism programs would be welcomed if wayang or puppets could be used as audio-visual aids.

Major Health Problems in Indonesia

Because of the wide gap between the lower class and middle/upper classes in Indonesia, the health problems of the lower class are usually different from those of the middle/upper classes, although sometimes similar diseases can be found among all classes.

Lower class health problems

The main health problem of the lower class results from lack of proper hygiene and sanitation. Dr. G. A. Siwabessy, the Health Minister of Indonesia, said that only 20 percent of the population in the urban areas drink good water, and only 1 percent of the population in rural areas have a well. About 20 percent of the people in the urban areas and 5 percent in the rural areas have toilets.

¹Ibid., p. 171.
These conditions have resulted in a high rate of death among infants—80 in 1000 deliveries. The lack of proper hygiene and sanitation has resulted in many infectious and contagious diseases. These will be discussed below:

Helminth (worm) diseases

Schistosomiasis japonica, ancylostomiasis (hookworm), and other soil-transmitted helminth infections such as gnathostomiasis, ascariasis, trichuriasis, and strongyloidiasis are endemic in Indonesia. Other helminth diseases also can be found, such as creeping eruption caused by Ancylostoma braziliensis, dracunculiasis, echinostomiasis, fasciolopsiasis, paragonimiasis, sparganosis and filariasis bancrofti, and malayi.

According to the report of Dr. Sudarto, General Director of Pencegahan Pemberantasan Penyakit Menular (Prevention and Eradication of Contagious Diseases), 80 percent of Indonesian people have some type of stomach worms. This percentage is divided as follows: 34-94 percent, cacing gelang (Ascariasis); 23-91 percent, cacing cambuk (whipworm =trichuriasis); and 23-67 percent cacing tambang (ancylostomiasis).

Helminth diseases are one of the reasons 3-8 percent of government employees are absent from work daily.

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1Rumah Tangga Kesehatan, January 1974, p. 5.
Infectious diseases

It was reported in 1975 that two-thirds of the diseases in Indonesia are infectious and contagious. These infectious and contagious diseases include protozoal, viral, rickettsial, bacterial, spirochaetal, and fungal diseases.

Protozoal diseases. Amebiasis and bacillary dysentery are endemic and widespread in Indonesia. These diseases cause 15-20 percent of the sickness among government employees.

In addition, malaria is still a problem. In fact, it was reported that Jakarta, Surabaya, and Regencies are the only areas without risk. The government of Indonesia considers malaria in the second most dangerous disease group.

Bacterial diseases. Cholera and tuberculosis, which are both bacterial diseases, are considered as belonging to the first most dangerous diseases group in Indonesia. It was reported that in 1970 there were 4,935 cases of cholera, and 1,199 of these were fatal. In 1977 there were about

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1 Rumah Tangga Kesehatan, June 1975, p. 28.
2 Hunter, p. 893.
3 Rumah Tangga Kesehatan, November 1971, p. 5.
5 Rumah Tangga Kesehatan, March 1978, p. 3.
69,000 people who received treatment for cholera.\textsuperscript{1}

Tuberculosis is well known as a community disease in Indonesia.\textsuperscript{2} It was reported that in 1977 in Jakarta alone there were 205,000 who suffered from tuberculosis. The annual death rate in Jakarta from tuberculosis is 1,800 and the majority of those who die are between 20-50 years old.\textsuperscript{3} Government reports show that about 3.5 to 8 percent of all government employees suffer from tuberculosis.\textsuperscript{4} In fact it was estimated that in the metropolitan city there are 4-5 persons in every 1,000 who suffer from tuberculosis.\textsuperscript{5} Tuberculosis has been a problem for children also; it was reported that in 1977, 260,000 died from this disease.\textsuperscript{6}

Leprosy is widespread, the registered cases alone numbering 169,502 in 1969. It was estimated that there were 191,000 cases in 1971, and it was reported that only 15 percent of them received regular treatment.\textsuperscript{7} Typhoid fever is still endemic in Indonesia, although control projects have been conducted in this country.\textsuperscript{8}

\begin{footnotesize}
\begin{enumerate}
\item \cite{Rumah Tanga Kesehatan, March 1978, p. 3.}
\item \cite{Rumah Tanga Kesehatan, March 1978, p. 3.}
\item \cite{Rumah Tanga Kesehatan, February, p. 4.}
\item \cite{Rumah Tanga Kesehatan, November 1971, p. 5.}
\item \cite{Rumah Tanga Kesehatan, June 1975, p. 28.}
\item \cite{Ibid.}
\item \cite{Rumah Tanga Kesehatan, November 1971, p. 5.}
\item Hunter, p. 894.
\end{enumerate}
\end{footnotesize}
Tetanus neonatorum, diphtheria, and pertussis have been a real problem among children. In 1977, 55,000 infants suffered from tetanus neonatorum and 50,000 of them died. Almost all of them were under twenty-eight days of age. Diphtheria attacked children mainly fourteen years of age and 37,500 died in the same year, while 20,000 children were reported to have died because of pertussis.¹

Viral/Rickettsial diseases. Scrub typhus is endemic in Indonesia,² while dengue fever is one of the diseases with a high death rate, especially because Aedes aegypti, the mosquito that carries this contagious disease, can be found in Indonesia. It was reported that in 1973 there were 9,947 cases of dengue fever.³

Fungal diseases. It was reported that histoplasmosis has been identified in Java and that phycomycosis is widespread in Indonesia.⁴ The percentage is not known; however it is very common for medical doctors to find people who have these illnesses.

Malnutrition

The problem of malnutrition still can be found in Indonesia. According to Dr. G. A. Siwabessy, former Health

¹Rumah Tangga Kesehatan, November 1971, p. 5.
²Hunter, p. 894.
³Rumah Tangga Kesehatan, August 1975, pp. 6-10.
⁴Hunter, p. 893.
Minister of Indonesia, malnutrition in Indonesia is caused especially by a lack of protein and vitamin A, and iron and iodine deficiencies. The percentage of kwashiorkor is not known, however several diseases which result from malnutrition have been reported by the Health Department of Indonesia. It was estimated that 26.7 million children face blindness as the result of vitamin A deficiency, and about 10 million people suffer with goiters as the result of iodine deficiency. In West Java alone, there were about 100,000 suffering from cretinism as the result of malnutrition. Malnutrition is also the reason that 75-80 percent of elementary students in Bandung, West Java, have dental problems. It is recognized by the Indonesian government that malnutrition is one of the main problems in Indonesia, and for that reason increased production of protein resources has been one of the government's goals.

Middle/upper classes health problems

Since people in the middle/upper classes are more educated, they know more about hygiene and sanitation. Therefore, helminth and infectious diseases are not the main problems, although in some cases bacterial diseases still can be found among them. Viral/Rickettial diseases are common,

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1Rumah Tangga dan Kesehatan, March 1978, p. 3.
2Ibid.
3Rumah Tangga dan Kesehatan, October 1974, p. 27.
4Rumah Tangga dan Kesehatan, December 1971, p. 5.
especially epidemic diseases such as influenza. Research conducted by the Indonesian Health Department indicates that 40 percent of government employees have problems with influenza and bronchitis, which indicate viral and bacterial diseases.¹

As Indonesia has developed, there has been an increase in cardio-vascular disease, cancer, and mental health problems.² There are no statistics available regarding the number of mental health patients, however, the figures for cancer and cardio-vascular diseases can be found.

Cancer

The Pathology Center of Indonesia has reported that in the past five years there were 5,249 cases of cancer in Jakarta. The types of cancer reported were as follow: 13.6 percent, breast cancer; 9.69 percent, lymphatic cancer; 9.29 percent, skin cancer; 7.80 percent, nasopharynx cancer; and 5.62 percent, uterine cancer. One hospital in Jakarta, Cipto Mangunkusumo General Hospital, reported 502 cases of ear, nose, and throat cancer between 1964 and 1970, and the majority of these cases were cancer of the nasopharynx.³

Lung cancer was almost unknown in Indonesia in 1967 but according to the Indonesian Pulmonologist Association,

¹Rumah Tangga dan Kesehatan, November 1971, p. 5.
in 1977 alone there were 769 cases reported from four cities, Jakarta, Bandung, Jogjakarta, and Medan. It was reported that 75-90 percent of the patients smoked more than ten cigarettes a day, and 80 percent of them had been smoking more than twenty years.¹

Cardiovascular diseases

It was estimated that in 1976 there were about 140,000 people who suffered from cardio and cerebrovascular disease, while about 18,000,000 people above 45 years of age are in dangerous condition.² The increase of people who suffer from heart disease can be seen from the report of Cipto Mangunkusumo General Hospital in Jakarta. In 1966, 12 percent of its patients had heart disease. This figure increased to 20 percent in 1974.³ Dr. Herman Susilo, head of the Health Department in Jakarta, has stated that some of the causes of heart disease include too much stress, smoking, and overweight.⁴

According to Dr. Drajat Prawiranegara of the Indonesian Health Department, about 8-10 percent of people between 34 and 40 years of age have high blood pressure. The percentage increased to 24 percent for those people above 45, and 21 percent of them are in dangerous condition. A-

¹Rumah Tangga Kesehatan, November 1977, p. 2.
³Rumah Tangga Kesehatan, August 1974, pp. 27,28.
⁴Rumah Tangga Kesehatan, September 1978, p. 3.
about 98.3 percent of rural people who have high blood
pressure do not realize that they have it, as is also the
case with 43.9 percent of urban people who have the same
experience. Only a small percentage of the people receive
regular treatment for this condition. These facts show the
increase of cardiovascular disease in Indonesia, although
many of those afflicted by this problem ignore it.

Conclusion

Indonesia is a good field for health evangelism, and
this is a useful method to use among Hindus, Catholics,
Protestants, and Moslems, because there is almost universal
interest in having a healthy body. The situation in Indo-
nesia indicates that health evangelism would meet with suc-
cess. This conclusion is based on several facts, such as
the strong interest of the Moslems (which comprise 84.5
percent of the population) in the subject of healthful
living, and the collaboration of Moslems and Christians in
meeting the needs of humanity. The limits placed on the
public proclamation of the gospel indicate the need to use
a bridge to overcome prejudice, and health evangelism would
presumably be more acceptable. It seems that health evan-
gelism would be especially useful at this time when the
Indonesian government is implementing programs to prevent

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1Rumah Tangga Kesehatan, September 1978, p. 3.

2Interview with M. Hardinge, M.D., Andrews University,
and eradicate diseases and needs the help of voluntary agencies. Any program for community health now will be welcomed by the government as well as by the community.

As we analyze the cultural features relevant to health evangelism, it can be seen that the best approach is an integrated approach which demonstrates a spirit of hospitality, mutual help, and consensus. At the same time, in harmony with Indonesian's adat, the first approach should be to the higher officials, village leaders or people who have influence. Acceptance by these people will enable the health evangelist to find acceptance by the community. In addition, since there is strong community interest in wayang, it could be used as a visual aid in presenting health messages.

Because of the difference in economic status between the lower class and the middle/upper classes in Indonesia, and the difference in health problems in these classes, it is very important to have two different programs in order to fulfill the needs of the whole community. Since helminth diseases, infectious diseases, and malnutrition are the main health problems for lower class people, the health evangelism program for them should include hygiene, sanitation, and nutritional guidance. Family planning should be a part of the health evangelism program for the lower class because many lower class people have more children than those in the middle/upper classes. Free clinics would be a good way to begin health evangelism among this class
of people.

The Five-Day Plan can be used among all three classes because smoking has become a problem for all classes in Indonesia. Programs dealing with physical fitness, weight control, and stress control would be appropriate for middle/upper class people, since cardiovascular disease is the main problem for them. Cooking demonstrations would be appropriate for all classes, with different emphases for the different groups. For lower class people the main emphasis in cooking demonstrations should be to demonstrate how to cook inexpensive foods with high nutritional value; while for middle/upper class people the main emphasis should be to demonstrate how to cook food with low cholesterol value.

Because of the prejudice among some Moslems toward Christianity and among the Christian denominations toward S.D.A. Church, there should be a bridge to the gospel message such as might be provided by the health approach. In view of these facts, the following chapter will develop a proposed health evangelism program which consists of four major parts: preliminary contact for health evangelism, confidence-building programs, the bridge program, and the decision program. A section will outline a training program for ministers, doctors, and laymen on how to conduct this specific health evangelism program and how to employ the strategy of health evangelism.
CHAPTER IV

PROPOSED EVANGELISM PROGRAM FOR THE
WEST INDONESIA UNION MISSION
OF SEVENTH-DAY ADVENTISTS

In order to meet the health needs of Indonesia and to provide a means of reaching its people with the gospel, a health evangelism program should be organized by the West Indonesia Union Mission of Seventh-day Adventists. Such a program would function effectively only if a total organizational plan such as the one suggested below is followed.

The proposed program consists of two main parts: (1) a health evangelism council and (2) church health programs. Each of these aspect will be discussed below. (Additional material is contained in appendixes A-F).

**Health Evangelism Council**

The first step is to establish a health evangelism council at the union level.¹ The membership of this council will consist of: (1) the temperance department director (chairman), (2) the health department director, (3) the ministerial association secretary, (4) the union president, (5) the medical director, and (6) representatives from the

¹In the Seventh-day Adventist Church, a union or union
Ikatan Kedokteran Kedokteran Gigi Advent and the Ikatan Perawat Advent.¹

Objectives

The objectives of the union health evangelism council would be: (1) to study both the theology and methods of health evangelism, (2) to promote a health evangelism program in every mission, (3) to plan and advise mission health evangelism programs, and (4) to supply necessary materials for these programs.

Activities

In keeping with these objectives, the union health evangelism council would: (1) encourage each mission to have a mission health evangelism council; (2) encourage each mission health evangelism council to establish an Ikatan Kedokteran Kedokteran Gigi Advent and an Ikatan Perawat Advent chapter in every city; (3) advertise the health evangelism concept and program through the union paper, circular letters, and a special union health evangelism newsletter; (4) encourage each mission to set aside a special fund for health evangelism; (5) organize one-week health evangelism workshops in each mission; (6) supply

mission is a unit of church organization formed by a group of several missions or fields, sections, districts, or local congregations.

¹National Adventist Medical and Dental Association and National Adventist Nursing Association.
health evangelism materials; (7) periodically evaluate the progress of the health evangelism program; and (8) develop creative approaches to health evangelism.

**Health evangelism training workshop**

A special health evangelism workshop or training seminar should be held at least once a year in each mission. The first workshop should be organized by the union health evangelism council; the second and the following workshops could be organized by the mission health evangelism council under the guidance of the union health evangelism council.

**Objectives**

The health evangelism training workshop would have the following objectives: (1) to present the theology and principles of health evangelism; (2) to train ministers, medical personnel, and laymen to conduct health education programs in Seventh-day Adventist churches; and (3) to train ministers, medical personnel, and laymen to give special training to Seventh-day Adventist laymen in conducting and assisting in health evangelism programs for the community.

**Delegates**

Each church should send at least six delegates to the health evangelism training workshop. It is suggested that these delegates include the minister, medical personnel, and active laymen. At least one of the laymen should be interested in cooking or food and nutrition.
The workshop will cover the following items: (1) the theology of health evangelism and Seventh-day Adventist teaching on health evangelism, (2) guidelines for involving as many laymen as possible in the health evangelism program, (3) guidelines for personal contact with the community, (4) demonstrations of health evangelism programs for lower and middle/upper class people, (5) demonstration in making and using wayang and other visual aids, (6) guidelines for arranging a yearly church program, and (7) guidelines for raising funds for health evangelism.

The presentation of the rationale for health evangelism and Seventh-day Adventist teaching on health evangelism should be made at the beginning of the workshop.1 Guidelines for involving laymen, for personal contact with the community, and for arranging the yearly church program will be discussed in the next section. Additional information is contained in the appendix.

The health evangelism program for the lower and middle/upper classes will cover free clinics, hygiene and sanitation programs, family-planning lectures, cooking demonstrations, and weight control and physical fitness programs. This program will have several phases which can be called "confidence-gaining programs," "bridging programs,"

1The material for this section can be taken from the first part of this study.
and "harvesting programs." These programs will be discussed in the next section and in the appendix.

Since many people do not know how to raise funds for health evangelism, special guidelines will be given on this topic. This part will cover how to get help from such sources as the government, UNESCO, and individual donations. Free medicines can be obtained from companies such as Bristol, Mead Johnson, Takeda, Meiji, Kalbe Farma, and Kenrose.

**Yearly health evangelism programs**

After attending a health evangelism training workshop, church leaders and delegates to the workshop could plan a health evangelism program for every church. Since many church members have not understood the principles of healthful living, the health education program should first be given to church members. They can be trained to help present health evangelism programs for the community.

The yearly health evangelism program could be organized as follows:

**First month**

1. Delegates to the health evangelism training workshop report to all members of the church board in a committee meeting and to all church members in a business meeting.

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1The general idea for these phases was taken from Kathy Hargrave, "Don't Stop with Community Program," The Ministry, 50 (August 1977): 20-23.
2. Special committee selected to hold a health education program for church members.

Second month
1. Advertize health education programs
2. Finalize plans for health education programs.

Third and Fourth months
1. Hold revival meetings for healthful living
2. Conduct a health education program for church members.

Fifth and sixth months
1. Hold revival meetings for total involvement of laity.
2. Begin training program for laity.

Seventh month
1. Contact the community by:
   a. getting acquainted with high officials
   b. taking a health survey
2. Evaluate the survey
3. Plan and advertize a health evangelism program for community.

Eighth and ninth months
Present health programs to win the confidence of the community.

First two weeks of tenth month
Present bridging programs that will prepare the interested people to move from the health programs to the in-
integration of health and Bible study.

End of tenth month to twelfth month

Present harvesting programs which consist of integrated health and Bible lessons. Hold baptism at the end of twelfth month.

Church Health Programs

It was stated above that church health program should include a program for church members in addition to a program for the community. Both of these programs will be discussed below.

Health education for church members

Objectives

The health education program for church members should have the following objectives: (1) to help members understand the health principles found in the Bible and the writings of Ellen G. White; (2) to encourage members to live in harmony with these health principles and to be examples for the community; (3) to help church members gain some knowledge in hydrotherapy and in home nursing to help prevent disease.

Activities

Several activities can be used to educate church members in healthful living. The following sequence is suggested:
Revival meetings. A special revival series centered on healthful living should be conducted before any other program is begun. For a seven-evening revival series, the following topics are suggested:

1. "Created in the Image of God"
2. "The Distortion of the Image of God"
3. "Restoration of the Image of God"
4. "Restoration of the Body"
5. "Restoration of the Mind"
6. "Restoration of the Spiritual Nature"
7. "Restoration of the Social Nature"

The format followed should be different than the usual revival meeting. It is suggested that the minister give a short sermon (about 15 minutes) after which the congregation will be divided into small groups to discuss the assigned topic. Materials can be distributed for discussion. It is suggested that each meeting be closed by a consecration prayer.

Weekend program. Following the revival series, a special weekend program should be held. The program will consist of meetings Sabbath morning, Sabbath afternoon, Sunday morning, and Sunday afternoon.

At the regular Sabbath morning church service, the minister might preach on a topic that is related to the re-

1These can be taken from the third chapter of part I of this study.
vival series, for instance, "Total Restoration."

Sabbath afternoon is a time to study more deeply into the relationship of body and mind in the light of the Bible, authoritative writings of the church, Ellen G. White's writings, and science. Members should be encouraged in advance to bring clippings of scientific discoveries which support the Bible and White's writings. Some materials from chapter IV, part I of this study could be distributed.

Sunday morning might be spent giving a physical fitness test. All members would be checked for the following: pulse rate, blood pressure, urine sugar, cholesterol, air volume, height, weight, and pulse rate after three minutes of exercise. Everyone should keep his own record. Ladies should be checked first so they will be able to see the cooking demonstration which is given by delegates to the health evangelism workshop. After the demonstration, the ladies could help prepare lunch for the whole church. It is understood that on an occasion like this church members will bring raw materials from home.

Sunday noon the members could be gathered together and informed of the recommended levels for physical fitness; each person can then compare his or her scores to these levels. A brief explanation could be given about the relationship between exercise and physical fitness, and food and physical fitness. It can then be announced that the food that they are going to eat for lunch is healthful food.
The Sunday afternoon program could include discussions of nutrition and exercise. Brief nutrition principles can be given, followed by another cooking demonstration. The advantages of exercise can be discussed, followed by demonstrations of the best exercises. At the end of the afternoon program, a jogging club might be organized. People who live near the church can form a group and decide on the best time for jogging together. Since the church members are scattered around the city, several clubs can be established for them in various parts of the city.

**Interval program.** For three weeks following the weekend program, the church might have regular meetings twice a week to discuss a balanced diet and to demonstrate how to cook healthful food.

**Church retreat.** In order to study more deeply the principles of healthful living revealed in the Bible, Ellen G. White's writings, and science, as well as the practical applications of these principles, a church retreat could be organized for the fourth or fifth week. It is suggested that the retreat be held in a cool resort such as Brastagi for North Sumatra, Ciloto for West Java, and Tawangmangu for Central Java. The retreat might begin on Friday evening and conclude on Sunday afternoon.

On Friday evening, the opening sermon is given. It is

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1 Excercise program is given only in urban districts.
suggested that the sermon be entitled "Preparation for the Time of Trouble" or something which is related to health evangelism.

Three of the eight natural remedies could be discussed on Sabbath morning; air, sunlight, and trust in Divine power. Air could be discussed at the morning devotional, followed by practical guidance on how to breathe properly. A discussion on sunlight can take place of the regular Sabbath School lesson, while "Trust in Divine Power" could be the topic of the Sabbath sermon.

On Sabbath afternoon the whole group could be divided into small groups to study together three important topics: water, abstemiousness (self-control), and rest. The Bible, White's writings, and the findings of science should all be used in these studies.¹

On Sabbath evening the whole group can be divided into smaller groups again to study the two remaining topics, diet and exercise.

Early Sunday morning all could be invited to exercise together—for example, jogging. The Sunday morning devotional can be entitled "Happy, Healthy, Holy." After breakfast, several lessons could be given, including hydrotherapy/home nursing and principles of hygiene and sanitation.

On Sunday afternoon additional presentations could be made on hydrotherapy/home nursing and principles of hygiene

¹See appendix A.
and sanitation. The final event for Sunday afternoon would be another physical fitness test. This would involved checking the pulse rate, blood pressure, air volume, and pulse rate after three minutes of exercise. The results should be given right away so that the participants can compare their fitness after five weeks in the program. The retreat would conclude late Sunday afternoon.

**Follow-up program.** For at least three weeks after the retreat there should be regular meetings twice a week to follow up on the program. These meetings would use the continuation lessons on food and nutrition, hydrotherapy/home nursing, and hygiene and sanitation.

**Health evangelism training for church members**

After the church leaders have seen the effectiveness of health education programs among the members and the resulting participation in healthful living, the church would presumably be ready to involve its members in work for the community. The following few steps might then be taken.

**Revival series**

A one-week revival series might be held by the church pastor to appeal for their participation in working for the community. Suggested topics include: "The Body of Christ," "The Joy of Sharing," "The Faithful Steward," or any other topics that would increase their desire to work for the Lord.

At the end of the revival series, on Sabbath after-
noon, the minister could lead out in a special program, "Discovering Your Spiritual Gift." This program is designed to help every church member to discover his spiritual gift and, more specifically, identify this spiritual gift with something he can do for the health evangelism program which will be held. After all the laity understand that they can do something for the Lord through the health evangelism program, the pastor could distribute a laity survey which is entitled, "I am willing to help."¹ This is a special form where each church member is able to identify how he or she will assist in the health evangelism program -- for example, help in a community survey, distribute handbills, take blood pressure, give cooking demonstrations, etc.

Specific training

After the laity survey is collected, specific training should be given to each group. This specific training will include several important subjects such as: (1) guidelines for conducting the community survey, (2) guidelines in obtaining good interests, (3) practical training in giving cooking demonstrations and in presenting information on physical fitness, hydrotherapy/home nursing, hygiene and sanitation, etc., and (4) how to make visual aids, such as wayang. Each person will receive specific training according to his/her interest.

¹See appendix B.
Health evangelism teams

Health evangelism teams could be formed. All members who have received specific training should be assigned to a team, and each team should have the personnel required to hold a complete health evangelism program for a community. Each team should decide the place, the time, and the type of health evangelism program to be presented under the direction of health evangelism experts in the church. However, it is suggested that all of these teams assist in the first health evangelism outreach of the church; then the following programs could be held by individual teams.

A community health evangelism program

If all the health evangelism teams are ready, a few steps can be taken to insure a successful health evangelism program. It should be started with contact programs, then confidence-gaining programs can be added, and finally, bridging programs and harvest programs. The contact and confidence-gaining programs for the lower class and the middle/upper classes are different; however, the bridging and the harvest programs will be similar.

Lower class

Contact. For successful health evangelism contact, several steps could be taken. (1) Get acquainted with high officials. This includes mayor/village leader, police officers, army officers, educators, doctors, and ministers from other churches. (2) Discuss with these officials the
government health program, health problems in the area, and contributions that the SDA Church would like to make and request their support for any health program that is going to be held. (3) Advertize the health program with the help of high officials. Let the government promote the program, and for additional advertisement, some mass media such as radio announcements, newspaper and magazine articles and advertisements, handbill and posters might be used.

Confidence-gaining program. The programs for lower class people should have several phases in harmony with their health problems. Four phases that will take approximately two months of presentations to carry out are: free clinics, a sanitation/hygiene program, family planning, and a Five-Day Plan to Stop Smoking.

Three Sundays are needed to hold free clinics for the community. The suggested schedule is as follows: 8:00-12:00 a.m., free clinic; 12:00-1:00 p.m., lunch break; 1:00-4:00 p.m., free clinic; 4:00-5:30 p.m., lecture. The activities of the free clinic might include immunization, medical treatment, dental checkup, and circumcision. The immunizations which are needed for lower class people are: BCG, immunization for tuberculosis; Chotypa for cholera, typhoid fever, and paratyphus; toxoid, tetanus immunization for pregnant women (should be given at least three months before delivery); DPT, for babies between 3-14 months to prevent diphtheria, pertussis, and tetanus; and polio vaccination for children under one year.
The medical treatment should involve examining any sick people in the village and giving free medicines. The dental checkup should include checking and extracting the teeth of people who have dental problems. During the lunch break all high officials will be invited to a meal to experience vegetarian food. This will arouse their interest or curiosity with respect to delicious healthful foods. Because circumcision is an important event for Moslems, those children who have just been circumcized could be invited to eat together so that they will regard it as a selamatan (thanksgiving party).

The final free clinic program could involve a lecture and demonstration. For the first three Sundays, the lecture must cover dental care, hygiene and sanitation, healthful housekeeping, the importance of good water, how to dig a well, and how to make a permanent toilet.¹

After the people have received the lectures, two Sundays might be used for practical experience. After they have seen a well dug and a toilet established and have assisted in both processes, they would be able to do this for themselves. In the evening, several additional lectures on these subjects might be given.

Two Sundays are needed to present the family-planning program. On the first Sunday morning a free clinic should be held as usual. But in the evening, family planning will be

¹See appendix C.
given special emphasis. The program should begin with wa-
yang entitled "Happy Family because of Family Planning."
It will be followed by two short lectures: (1) "Motivation
for Family Planning," and (2) "Methods of Family Plan-
ing."¹ The second Sunday would be devoted to explaining
the practice of family planning and free contraceptives
would be distributed.

It is expected that interest in cooking demonstrations
will have grown considerably by this time because some of
the participants have tasted and enjoyed healthful food.
Therefore, cooking demonstrations should preferably be
given at this point. Meetings should be held twice a week
for two weeks. Wednesday and Sunday evenings seem to be the
most appropriate times. The program should begin with
guidelines for healthful and inexpensive food, and then the
cooking demonstration can be given.

The last week of the two-month health evangelism
program would be used for a Five-Day Plan to Stop Smoking.
Since people do not realize the dangers of smoking, one
lecture on this topic, plus the guidelines should be given
each night. The following topics are suggested for the five
nights:²

1. Smoking and cancer plus first day therapy
2. Smoking and lung cancer plus second day therapy
3. Smoking and emphysema plus third day therapy

¹See appendix C ²Ibid.
4. Smoking and hardening of the arteries plus fourth day therapy

5. Smoking and brain damage plus fifth day therapy

At the end of the Five-Day Plan, the pledge, "I choose not to smoke," should be distributed. An attendance record should be kept and all who attended faithfully should receive a certificate of attendance. At the same time, all should be invited to a follow-up program. It should be announced that the follow-up program will include additional cooking demonstrations and information on hydrotherapy/home nursing.

Middle/upper classes

Contact. The first contacts should be made as follows:
(1) Attempt to become acquainted with high officials such as the mayor; police and army officers; educators; doctors; professors; newspaper and magazine editors; journalists; members of social clubs such as Lions Club, Rotary Club, YMCA, and The Women's International Club; and religious leaders and ministers from other denominations. The conversations with these officials should be centered on the health problems in the community and their support should be solicited for the coming health programs. (2) Get the names of as many interests as possible, including former members, relatives and friends of SDA members, Voice of Prophecy interests, hospital and private patients, colporteur contacts, Vacation Bible School interests, Rumah Tangga Kesehatan subscribers, former church guests, non-SDA
parents whose children are studying in the SDA school, and neighbors of SDA members. (3) Divide all of these names into several geographical sections according to residences of the SDA members who are actively involved in the program. (4) As many as possible should be contacted and given the health survey. This survey is designed to spark their interest in health problems such as overweight, smoking, cancer, food and nutrition, etc.¹ (5) Evaluate the results of the health survey. (6) Outline the program according to the results of the health survey. In harmony with their middle/upper class health problems, probably the greatest interest will be in cooking demonstrations, physical fitness and weight control programs, and the Five-Day Plan to Stop Smoking. Since all these programs are related, it is best to combine them in a program called "The Secrets of Long Life."

Confidence-gaining programs: "The Secrets of Long Life"

All of the people who have been surveyed should be visited again and given a special invitation to come to the program. It should be explained that the program is prepared to fill their needs.

The first step of the program should be the health check which is designed to ascertain the physical fitness of the people. The order of the program might be as follows: registration; check the pulse rate before and after three

¹See appendix B.
minutes of exercise (step test); check height and weight; take blood pressure; test air volume, urine sugar and blood cholesterol.

The following Sunday, the result of the health check can be given. At the same time, the physical fitness criteria could be explained so that each person will be able to evaluate his own condition. Then the group can be divided into small groups to discuss the possible causes for a lack of physical fitness. A representative from each group should give a short report, which could be followed by a brief scientific explanation regarding the causes of a lack of physical fitness. This could touch on the effects of a high sugar intake, cholesterol, smoking, and lack of exercise. It should be announced that the following one month-program will provide the answers and help them to be physically fit and achieve normal weight. Everyone should be requested to keep his record because the same physical fitness tests will be given again after five weeks.

One month should be devoted to programs on nutrition and health improvement. These programs should try to help participants toward physical fitness and teach them the components of physical fitness ways to avoid overweight and coronary disease. The participants should meet twice a week for four weeks. The first four meetings should have three parts: (1) physical fitness lecture, (2) food and nutrition lecture, and (3) cooking demonstration. At each meeting the participants should be weighed and asked to take their own
resting pulse so that they can see their progress. Suggested programs for the eight meetings are as follows:

1. Lecture, "Ideal Weight," plus practical guidance on exercise:
   - Lecture, "General Principles of Nutrition--I"
   - Cooking demonstration, "Gluten"

2. Lecture, "What Exercise Can Do for You"
   - Lecture, "General Principles of Nutrition--II"
   - Demonstration, "Chicken Marnay"

3. Lecture, "Exercise and Coronary Heart Disease"
   - Lecture, "Low Cholesterol Food"
   - Cooking Demonstration, "Yong tahu"

4. Lecture, "Guidelines for Exercise"
   - Lecture, "Saturated Fat"
   - Demonstration, "Sate Ayam"

5. Lecture, "Sugar and the Empty Calorie"
   - Demonstrations, "Udang Goreng" and "Kulit Ayam Goreng"

6. Lecture, "Count Your Calories"
   - Demonstrations, "Martabak" and "Dendeng Bumbu"

7. Lecture, "A Good Breakfast"
   - Demonstrations, "Tuna Bake" and "Biefstuk Galatine"

8. Lecture, "How to Make a Menu"
   - Demonstrations, "Japanese Tempura" and "Mexican Tamale Pie"

All the cooking demonstrations indicated above will prove to be an attraction for middle/upper class people be-

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1Synopsis of these lectures can be found in appendix C.
cause they include European, Chinese, Indonesian, and other international foods, meatless but healthful.\textsuperscript{1} All who faithfully attend this program will be invited to the next program, the Five-Day Plan to Stop Smoking.

During the seventh week of confidence-gaining programs, a Five-Day Plan to Stop Smoking will be presented. Each night's program will be as follows:\textsuperscript{2}

1. Smoking and cancer, plus first day therapy
2. Smoking and lung cancer, plus second day therapy
3. Smoking and emphysema, plus third day therapy
4. Smoking and hardening of the arteries, plus fourth day therapy
5. Smoking and brain damage, plus fifth day therapy

An opportunity should be given for those attending to pledge to stop smoking, using the "I choose not to smoke" pledge. Since this is the last part of the confidence-gaining program, a certificate of attendance should be given and all invited to the bridging program, which can be entitled "Health from the Viewpoint of Your Religion."

Bridging program.\textsuperscript{3} Any interested people from the lower class or the middle/upper classes are welcome to the bridging program. At this point they have more confidence in the SDA Church; however they are not yet ready to study

\textsuperscript{1}See appendix D
\textsuperscript{2}See appendix C
\textsuperscript{3}See appendix E
the Bible. Therefore this program has health topics which will be discussed from the viewpoint of the Bible and the Quran and related to the scientific discoveries. This program can be started as soon as the Five-Day Plan is over, twice a week for four meetings. In order to make this program more personal, all interested persons should be divided into groups of ten. The meeting place could be the home of any member who has influence in his community.

Each meeting should begin with a cooking demonstration followed by a meal eaten in the spirit of brotherhood. After the meal, one of the following topics should be discussed. They should be presented in this order:
1. "Alcohol in View of the Bible, the Quran, and Science."
2. "Good Diet in View of the Bible, the Quran, and Science."
3. "Circumcision in View of the Bible, the Quran, and Science."
4. "Sanitation/Hygiene in View of the Bible, the Quran, and Science."

After the discussion, the leader should ask for volunteers to bring raw food for the next cooking demonstration. This will give the group members opportunity to participate and at the same time a spirit of oneness will be developed. All who have finished the bridging program should be invited to the harvest program which can be entitled "Happy and Healthy."
The harvest program. The "Happy and Healthy" series is an integration of Bible and health lessons. The procedure should be similar to the bridging program. The participants will meet in the same place, have fellowship together by having supper together after a short cooking demonstration, and then participate in a Bible and health discussion. The group leader should not give a lecture but lead out in a discussion, provide questions, and give an opportunity for others to answer. The practical part of the program should not always be a cooking demonstration; the demonstration could deal with hydrotherapy/home nursing or other things that may interest the group, such as table setting.

The group should meet twice a week. The "Happy and Healthy" program has twenty lessons, and each lesson includes Bible and health topics. The structure of the series is as follows:¹

<table>
<thead>
<tr>
<th>Titles</th>
<th>Health Topic</th>
<th>Bible Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The Marvel of Life</td>
<td>Nerves</td>
<td>The God who controls</td>
</tr>
<tr>
<td>2. Order in Life</td>
<td>Family Planning</td>
<td>The Bible</td>
</tr>
<tr>
<td>3. The Joy of Living</td>
<td>Stress Control</td>
<td>Peace in Jesus</td>
</tr>
<tr>
<td>4. Disturbances of Health and Happiness</td>
<td>Heart Trouble/Attack</td>
<td>Second Coming of Christ and Its Signs</td>
</tr>
<tr>
<td>5. Eternal Health and Happiness</td>
<td>Hygiene and Sanitation</td>
<td>Millenium</td>
</tr>
</tbody>
</table>

¹A Synopsis of each lesson can be found in appendix F.
Many who attended the "Healthy and Happy" program and accept all the lessons should be ready for baptism. However, the church pastor or a knowledgeable layman still could give more guidance. A few more lessons covering such topics as how to keep the Sabbath, the judgment, spiritism, and the order of service in the Seventh-day Adventist Church can be
given before baptism.

After baptism, meetings should be held once or twice a week to nurture these new members and build up fellowship among them. There are many health and Bible lessons which can be used, and practical guidance should be given from time to time. After being nurtured, these new members can be trained so that they will be able to participate in the health evangelism programs.
CHAPTER V

SUMMARY AND RECOMMENDATIONS

SUMMARY

The information gathered from interviews, correspondence, and library research about health evangelism practices and the socio-cultural background of Indonesia and the proposed health evangelism program for the West Indonesia Union Mission of Seventh-day Adventists can be summarized as follows:

1. Health evangelism practices in the West Indonesia Union Mission of Seventh-day Adventists are limited for the following reasons: lack of capable personnel for health evangelism, lack of training, lack of materials, and lack of attention and promotion from higher levels of the church administration. In addition, healthful living has not been practiced properly by many members and workers in this field.

2. The present health evangelism program in Indonesia shows a lack of follow-up work. In a few cases a follow-up program was used; however, there was no bridge between the health program and the spiritual program, which has resulted in a small number of baptisms.

3. The socio-cultural background of Indonesia indicates that Indonesia is a good field for health evangelism. This conclusion is based on several grounds such as the religious
background and the attitude of the people and the government toward health programs.

4. The big difference in economic status between the lower class and the middle/upper classes in Indonesia and the difference in health problems in these classes supports the need of two different programs in order to reach all classes of people in Indonesia.

5. The proposed health evangelism program which has been developed in this paper suggests the establishment of a health evangelism council at the union and mission level which will plan and advise the health evangelism program in all the churches. Direct guidance should be given through yearly health evangelism workshops in every mission which could train ministers, medical personnel, and the laity in holding health evangelism programs and in training others to participate in community health evangelism programs.

6. The church health evangelism program should have two major activities: health education for church members and health evangelism for the community. Health education for church members would help them to have a better life as well as help them to be a living example for the community.

7. The program for the community, either lower class or middle/upper classes, should be started with a contact program followed by confidence-gaining programs, bridging programs, and harvest programs. This four-step program will break down prejudice and lead people to prepare for baptism and church membership.
8. In order to make these programs successful, some effort should be made to help people feel at home with the program, therefore an adjustment to their cultural background should always be made. Those involved should remember the Adat of Indonesia. The program can be accompanied by the principle of gotong-royong and the use of the famous Indonesian puppet, wayang, especially with lower class people.

Recommendations

1. In view of the fact that public proclamation of the gospel is limited in Indonesia, it is suggested that the West Indonesia Union Mission of Seventh-day Adventists give more attention to, and promote the use of, health evangelism methods in winning souls.

2. Since people are looking for models of healthful living, it is expected that attention and promotion will be given to Seventh-day Adventist workers and members so that they will be prepared to be examples for the community and participate in working for the community.

3. Because of the need for materials and equipment for successful health evangelism programs, it is suggested that
the West Indonesia Union Mission of Seventh-day Adventists import those items which are appropriate for the situation in Indonesia.

4. Since some of the materials or audio-visual aids from abroad are not always appropriate to Indonesia because of the difference in culture, background, and language, it is suggested that the West Indonesia Union Mission of Seventh-day Adventists provide funds for producing audio-visual aids that will be helpful for health evangelism. These audio-visual aids include slides, movies, overhead transparencies, and other valuable materials.

5. It is hoped that the West Indonesia Union Mission of Seventh-day Adventists would encourage study and creativity directed toward a better health evangelism program in Indonesia. More experiments should be conducted in order to discover the best methods of health evangelism.

6. Since the government's influence is important for a successful health evangelism program, it would be helpful to work in cooperation with the government. For instance, the church can work with the Indonesian health department in organizing associations such as "Indonesia Anti-Cancer Society," "Indonesia Anti-Cigarette Society," or "Indonesia Anti-Alcohol and Drug Society." If the activities of health evangelism use the names of these societies, acceptance by the community will be more likely.
APPENDIX A

NATURAL REMEDIES

(Material in this appendix is from the Better Living Breakthrough series produced by the Ministerial Association, General Conference of Seventh-day Adventists, c. 1975. Used by permission.)
THE BREATH OF LIFE

Physical

1. "The lungs in order to be healthy, must have pure air." CH 58.

2. "Those who accustom themselves to proper exercise in the open air will generally have a good and vigorous circulation. We are more dependent upon the air we breathe than on the food we eat." 2T 526.

3. "In order to have good blood, we must breathe well. Full, deep inspirations of pure air which fill the lungs with oxygen, purify the blood. They impart to it a bright color, and send it, a life giving current, to every part of the body. A good respiration
   a. soothes the nerves,
   b. it stimulates the appetite and
   c. renders digestion more perfect; and
   d. it includes sound, refreshing sleep." MH 272.

4. "Air, air, the precious boon of heaven, which all may have, will bless you with its invigorating influence, if you will not refuse its entrance. Welcome it, cultivate a love for it, and it will prove a precious soother of the nerves. Air must be in constant circulation to be kept pure. The influence of pure, fresh air is to cause the blood to circulate healthfully through the system. It refreshes the body and tends to render it strong and healthy." 1T 702.

Mental

1. "Air... refreshes the body and tends to render it strong and healthy, while at the same time its influence is decidedly felt upon the mind imparting a degree of composure and serenity." 1T 702.

2. "(In) Superficial breathing... the blood becomes impure. Not only the lungs but the stomach, liver, and brain are affected. The skin becomes sallow, digestion is retarded; the heart is depressed; the brain is clouded; the thoughts are confused; gloom settles upon the spirits; the whole system becomes depressed and inactive, and peculiarly susceptible to disease." MH 273.

3. "The relation that exists between the mind and the body is very intimate. When one is affected, the other sympathizes. The condition of the mind affects the health to a far greater degree than many realize. Many of the diseases from which men suffer are the result of mental de-
pression. Grief, anxiety, discontent, remorse, guilt, distrust, all tend to break down the life forces, and to invite decay and death. . . . Courage, hope, faith, sympathy, love prolong health and life. A contented mind, a cheerful spirit, is health to the body and strength to the soul." MH 241.

4. "Life in the open air is good for body and mind. It is God's medicine for the restoration of health." MM 233.

Spiritual

Prayer

1. "Let every breath be a prayer." MH 511.

2. "Prayer is the breath of the soul. It is the secret of spiritual power." GW 254.

3. "We can no more live a religious life without constant prayer and the performance of religious duties than we can have physical strength without partaking of temporal food." 4T 560.

4. "Only by constant watchfulness and persevering and almost unceasing prayer shall we be able to exhibit in our life the character of Christ. . . ." 1T 304.

5. "We should look to Jesus, the perfect pattern; we should pray for the aid of the Holy Spirit, and in His strength we should seek to train every organ for perfect work." COL 336.

6. "The Lord is coming. We are nearing home, and we want to take large inspirations of the heavenly atmosphere; then we shall become identified with the Saviour in all His plans. We shall be elvated and able to elevate others, and shall be efficient in good works." 5T 549.

SUNLIGHT AND SONSHIP

Physical

Sunlight In The Home

1. "If you would have your homes sweet and inviting, make them bright with air and sunshine. . . . The precious sunlight may fade your carpets, but it will give a healthful color to the cheeks of your children. If you have God's presence and possess earnest, loving hearts,
a humble home, made bright with air and sunlight, and cheerful with the welcome of unselfish hospitality, will be to your family, and to the weary traveler, a heaven below." 2T 527.

2. "In the building of houses it is especially important to secure thorough ventilation and plenty of sunlight. . . . Perfect cleanliness, plenty of sunlight, careful attention to sanitation in every detail of the home life, are essential to freedom from disease and to the cheerfulness and vigor of the inmates of the home." MH 274-276.

3. "Whenever the mother can speak a word of commendation for the good conduct of her children, she should do so. She should encourage them by words of approval and looks of love. These will be as sunshine to the heart of a child and will lead to the cultivation of self-respect and pride of character." 3T 532.

Sunlight Out-of-Doors

1. "Truly the light is sweet, and a pleasant thing it is for the eye to behold the sun." Eccl. 11:7.

2. "There are but few who realize that, in order to enjoy health and cheerfulness, they must have an abundance of sunlight, pure air, and physical exercise. We pity little children who are kept confined indoors when the sun is shining gloriously without." MLT 138.

3. "... let them go out and exercise in the open air, and live to enjoy health and happiness." Ibid.

4. "Rejoice in the sunshine and breath in the fragrance of tree and flower. There are life giving properties in the balsam of the pine in the fragrance of the cedar and . . . Let no such trees be ruthlessly cut down. Cherish them where they are abundant, and plant more where there are but few." CH 170.

Mental

1. "The brain is the organ and instrument of the mind, and controls the whole body. In order for the other parts of the system to be healthy, the brain must be healthy."

2. "A contented mind, a cheerful spirit, is health to the body and strength to the soul. Nothing is so fruitful a cause of disease as:
   a. depression,
   b. gloominess, and c. sadness," MM 106.
3. "You will be benefited with the effort you make to be cheerful. . . . Get out of doors as much as possible, and be benefited with the breezes and the blessed sunshine. . . . Gather sunshine about you instead of clouds. . . . Christians should be the most cheerful and happy people that live." ML 177.

4. "By the exercise of living faith you can separate from everything that is not in accordance with the mind of God, and thus bring heaven into your life below. Doing you will have sunshine at every step." CT 233, 234.

WATER OF LIFE

Physical

1. "In health and in sickness, pure water is one of Heaven's choicest blessings. Its proper use promotes health. . . . Drunk freely, it helps to supply the necessities of the system, and assists nature to resist disease." MH 237.

2. "Many make a mistake in drinking cold water with their meals. Taken with meals, water diminishes the flow of the salivary glands and the colder the water, the greater the injury to the stomach. . . . hot drinks are debilitating. . . . Food should not be washed down; no drink is needed with meals. Eat slowly, and allow the saliva to mingle with food." CD 420.

3. "The more liquid there is taken into the stomach with meals, the more difficult it is for the food to digest; for the liquid must first be absorbed. If anything is needed to quench thirst, pure water, drunk some little time before or after the meal, is all that nature requires." CD 420.

4. "If those who are afflicted would assist nature in her efforts, by the use of pure, soft water, much suffering would be prevented." CH 61, 62.

5. "The stomach is greatly injured by a large quantity of hot drink." CDF 106. "Hot water taken before eating (half quart, more or less). . . . productive of good." CDF 419.

Mental

1. "The love which Christ diffuses through the whole being is a vitalizing power. Every vital part—the brain, the heart, the nerves—it touches with healing. By it the highest energies of the being are aroused to activity.
It frees the soul from the guilt and sorrow, the anxiety and care, that crush the life forces. With it come serenity and composure. It implants in the soul, joy that nothing earthly can destroy, -- joy in the Holy Spirit, -- health-giving, life-giving joy. — MH 115.

2. "Many are suffering from maladies of the soul far more than from diseases of the body, and they will find no relief until they come to Christ, the wellspring of life. Complaints of weariness, loneliness, and dissatisfaction will then cease. Satisfying joys will give vigor to the mind, and health and vital energy to the body." CH 241.

3. "Nothing tends more to promote health of body and of soul than does a spirit of gratitude and praise. It is a positive duty to resist melancholy, discontented thoughts and feelings -- as much a duty as it is to pray." MH 251.

4. "Gratitude, rejoicing, benevolence, trust in God's love and care -- these are health's greatest safeguard." MH 281.

5. "The pleasure of doing good animates the mind and vibrates through the whole body. While the faces of benevolent men are lighted up with cheerfulness, . . . . 2T 534.

Spiritual

1. "The spirit of Christ in the heart is like a spring in the desert, flowing to refresh all and making those who are ready to perish, eager to drink of the water of life." SC 77.

2. "Let the repenting sinner fix his eyes upon 'the Lamb of God, which taketh away the sin of the world' (John 1:29); and by beholding, he becomes changed. . . . Christ is in him a well of water springing up into everlasting life." DA 439.

3. "The outpouring of the Spirit in the days of the apostles was the beginning of the early, or former, rain, and glorious was the result. To the end of the presence of the Spirit is to abide with the true church. . . . This outpouring of the spirit is likened to the falling of the latter rain; and it is for this added power that Christians are to send their petitions to the Lord of the harvest in the time of the latter rain." AA 54, 55.
EXERCISE

Physical

1. "The health cannot be preserved unless some portion of each day is given to muscular exertion in the open air." CG 342.

2. "... as they take exercise in the open air, restoration will begin in body, mind, and soul." MM 232.

3. "Walking in all cases where it is possible, is the best remedy for diseased bodies, because in this exercise all the organs of the body are brought into use." 3T 78.

4. "The more we exercise, the better will be the circulation of the blood." CH 173.

Mental

1. "Study the Lord's plan in regard to Adam, who was created pure, holy, and healthy. Adam was given something to do. He was to use the organs God has given him. He could not have been idle. His brain must work, not in a mechanical way, like a mere machine. . . . Each organ must do its appointed work. If physical inaction is continued, there will be less and less activity of the brain." Letter 103, 1900.

2. "Physical labor will not prevent the cultivation of the intellect. Far from it. The advantages gained by physical labor will balance a person and prevent the mind from being overworked. The toil will come upon the muscles, and relieve the wearied soul." FE 37.

3. "For a healthy young man, stern, severe exercise is strengthening to brain, bone, and muscle. And it is an essential preparation for the difficult work of a physician. Without such exercise the mind cannot be in working order. It cannot put forth the sharp, quick action that will give scope to its powers. It becomes inactive." Letter 103, 1900.

4. "When invalids have nothing to occupy their time and attention, their thoughts become centered upon themselves, and they grow morbid and irritable. Many times they dwell upon their bad feelings until they think themselves much worse than they really are and wholly unable to do anything. In all these cases, well-directed physical exercise would prove an effective remedial agent." MH 239.
Physical

1. "Though time is short, and there is a great work to be done, the Lord is not pleased to have us so prolong our seasons of activity that there will not be time for periods of rest, for the study of the Bible, and for communion with God. All this is essential to fortify the soul, to place us in a position where we shall receive wisdom from God to employ our talents in the Master's service to the highest account." MLT 133.

2. "The servants of Christ are not to treat their health indifferently. Let no one labor to the point of exhaustion, thereby disqualifying himself for future effort. Do not try to crowd into one day the work of two. At the end, those who work carefully and wisely will be found to have accomplished as much as those who so expend their physical and mental strength that they have no deposit from which to draw in time of need. . . Those who make great exertions to accomplish just so much in a given time, and continue to labor when their judgment tells them they ought to rest, are never gainers. They are expending force that they will need at a future time." GW 244.

3. "When laborer has been under a heavy pressure of care and anxiety, and is overworked in both body and mind, he should turn aside and rest awhile, not for selfish gratification, but that he may be better prepared for future duties. We have a vigilant foe, who is ever on our track, ready to take advantage of every weakness that would help to make his temptations effective." GW 245.

Mental - Spiritual


2. "A life in Christ is a life of restfulness. Uneasiness, dissatisfaction, and restlessness reveal the absence of the Saviour. If Jesus is brought into the life, that life will be filled with good and noble works for the Master. You will forget to be self-serving, and will live closer and still closer to the dear Saviour; your character will become Christlike, and all around you will take knowledge that you have been with Jesus and learned of Him." 5T 487.
3. "If you are burdened and weary, you need not curl up like leaves upon withered branch. Cheerfulness and a clear conscience are better than drugs, and will be an effective agent in your restoration to health ... The cheerful enlightenment of the mind and the soul temple by the assurance that we have reconciliation with God, the hope we have of everlasting life through Christ, and the pleasure of blessing others, are joys which bring no sorrow with them ... Christians should be the most cheerful and happy people that live." ML 177.

4. "The consciousness of right doing is the best medicine for diseased bodies and minds. The special blessing of God resting upon the receiver is health and strength. A person whose mind is quiet and satisfied in God is in the pathway to health. To have a consciousness that the eyes of the Lord are upon us and His ears open to our prayers is a satisfaction indeed. To know that we have a never-failing Friend in whom we can confide all the secrets of the soul is a privilege which words can never express." 1T 502.

5. "It is the love of self that brings unrest." DA 330.

6. "In the heart of Christ, where reigned perfect harmony with God, there was perfect peace. He was never elated by applause nor dejected by censure or disappointment. Amid the greatest opposition and the most cruel treatment, He was still of good courage. But many who profess to be His followers have an anxious, troubled heart, because they are afraid to trust themselves with God. They do not make a complete surrender to Him; for they shrink from the consequences that such a surrender may involve. Unless they do make this surrender, they cannot find peace." DA 330.

7. "We should not make self the center and indulge anxiety and fear as to whether we shall be saved ... commit the keeping of your soul to God, and trust in Him. Talk and think of Jesus. Let self be lost in Him. Put away all doubt; dismiss your fears." SC 72.

8. "There are many whose hearts are aching under a load of care because they seek to reach the world's standards. They have chosen its service, accepted its perplexities, adopted its customs. Thus their character is marred, and their life made a weariness." DA 330.

EAT TO LIVE

Physical

1. "In order to know what are the best food, we must study
God's original plan for man's diet. He who created man and who understand his needs appointed Adam his food. ... grains, fruits, nuts, and vegetables constitute the diet chosen for us by our Creator. ... there is more in a loaf of good bread than many think." MH 295, 296, 302.

2. "Those who use flesh foods little know what they are eating. ... People are continually eating flesh that is filled with tuberculosis and cancerous germs. Tuberculosis, cancer, and other fatal diseases are thus communicated. ... Many die of diseases wholly due to meat-eating, while the real cause is not suspected by themselves or by others." MH 313, 315.

3. "Nuts and nut foods are coming largely into use to take the place of flesh meats. With nuts maybe combined grains, fruits, and some roots, to make food that are healthful and nourishing. ... When properly prepared, olives, like nuts, supply the place of butter and flesh meats. The oil, as eaten in the olive, is far preferable to animal oil or fat." MH 298.

4. "The various preparations of rice, wheat, corn, and oats are sent abroad everywhere, also beans, peas, and lentils. These, with native or imported fruits, and the variety of vegetables that grow in each locality, give an opportunity to select a dietary that is complete without the use of flesh-meats." MH 299.

Mental

1. "Indulgence of appetite is the greatest cause of physical and mental debility, and lies at the foundation of the feebleness which apparent everywhere." Te. 15.

2. "The digestive organs have an important part to act in our life happiness. God has given us intelligence, that we may learn what we should use as food. Shall we not, as sensible men and women, study whether the things we eat will be in agreement, or whether they will cause trouble? People who have a sour stomach are very often of a sour disposition. Everything seems to be contrary to them, and they are inclined to be peevish and irritable. If we would have peace among ourselves, we should give more thought than we do to having a peaceful stomach." CD 112.

3. "Those whose minds are clear and understand the truth tenfold better than those whose minds are beclouded. And if our brains are not clear, we may know that we have been transgressing some of nature's laws. When my brain is confused, I know that I have been making some
mistake in my diet." Ms. 62, 1900.

4. "We should not provide for the Sabbath a more liberal supply or a greater variety of food than for other days. Instead of this the food should be more simple, and less should be eaten, in order that the mind may be clear and vigorous to comprehend spiritual things. Overeating befogs the brain. The most precious words may be heard and not appreciated. . . . " 6T 357.

Spiritual Food

1. "Fill the whole heart with the words of God. . . Our bodies are built up from what we eat and drink; and as in the natural economy, so in the spiritual economy; it is what we meditate upon that will give tone and strength to our spiritual nature. . . There is nothing more calculated to strengthen the intellect than study of the Scriptures." SC 88, 90.

2. "Through the Scriptures the Holy Spirit speaks to the mind, and impresses truth upon the heart." DA 671.

3. "But there is but little benefit derived from hasty reading of the Scriptures. One may read the whole Bible through and yet fail to see its beauty or comprehend its deep and hidden meaning. One passage studied until its significance is clear to the mind and its relation to the plan of salvation is evident, is of more value than the perusal of many chapters with no definite purpose in view and no positive instruction gained. Keep your Bible with you. As you have opportunity, read it; fix the texts in your memory." SC 90.

4. "The same power that Christ exercised when He walked visibly among men is in His word. . . The Scriptures are to be received as God's word to us, not written merely, but spoken. . . In them He is speaking to us individually, speaking as directly as if we could listen to His voice." MH 122.

Exercise

1. "Physical inaction lessons not only mental and moral power. The brain nerves that connect with the whole system are the medium through which heaven communicates with man, and affects the inmost life. Whatever hinders the circulation of the electric current in the nervous system, thus weakening the vital powers and lessening mental susceptibility, makes it more difficult to arouse the moral nature." Ed. 209.
2. "They that wait upon the Lord shall renew their strength... they shall run, and not be weary; and they shall walk, and not faint." Is. 40:31.

3. "For the mind and the soul, as well as for the body, it is God's law that strength is acquired by effort. It is exercise that develops. In harmony with this law, God has provided in His word the means for mental and spiritual development." Ed. 123.

4. "Christ's followers have been redeemed for service. Our Lord teaches that the true object of life is ministry. Christ Himself was a worker, and to all His followers He gives the law of service--Service to God and to their fellow men. Here Christ has presented to the world a higher conception of life than they had ever known. By living to minister for others, man is brought into connection with Christ. The law of service becomes the connecting link which binds us to God and to our fellow men." COL 326.

A LITTLE POISON NOW AND THEN

Physical

1. "... intemperance commences at our tables. The appetite is indulged until its indulgence becomes second nature. By the use of tea and coffee, an appetite is formed for tobacco, and this encourage the appetite for liquors." CDF 233.

2. "Tea and coffee drinking is a sin, an injurious indulgence, which, like other evils, injures the soul. These darling idols create an excitement, a morbid action of the nervous system; and after the immediate influence of the stimulants is gone, it lets down below par just to that degree that its stimulating properties elevated above par... Tea and coffee, as well as tobacco, have an injurious effect upon the system. Tea is intoxicating; though less in degree, its effect is the same in character as that of spirituous liquors. Coffee has a greater tendency to becloud the intellect and benumb the energies. It is not so powerful as tobacco, but is similar in its effects. The arguments brought against tobacco may also be urged against the use of tea and coffee." CDF 425, 426.

3. "Great efforts are made to put down intemperance; but there is much effort that is not directed to the right point. The advocates of temperance reform should be awake to the evils resulting from the use of unwholesome food, condiments, tea, and coffee. We bid all temperance workers Godspeed... CDF 429.
Mental

Alcohol

1. "When drink is in reason is out." Te. 30.

2. "There is in the world a multitude of degraded human beings, who have, by yielding in their youth to the temptation to use tobacco and alcohol, poisoned the tissues of the human structure, and perverted their reasoning powers, until the result is just as Satan meant it to be. The faculties of thought are clouded. The victims yield to the temptation for alcohol, and they sell what reason they have for a glass of liquor. . . . They have lost their will power. Their nerves are enfeebled, because their power is exhausted. The ruddy glow of health is not upon their countenance, healthy sparkle of the eye is gone. Its luster is lost. The wine they have drunk has enfeebled the memory. They are like persons aged in years. The brain is no longer able to produce its rich treasures when required." Te. 36.

Tobacco

1. "Men professing godliness offer their bodies upon Satan's altar, and burn the incense of tobacco to his satanic majesty." CH 83.

2. "Tobacco using is a habit which frequently affects the nervous system in a more powerful manner than does the use of alcohol. It binds the victim in stronger bands of slavery than does the intoxicating cup; the habit is more difficult to overcome. Body and mind are, in many cases, more thoroughly intoxicated with the use of tobacco than with spirituous liquors, for it is more subtle poison." JT 562.

Tea and Coffee

1. "Tea and coffee do not nourish the system. The relief obtained from them is sudden, before the stomach has time to digest them. This shows that what the users of these stimulants call strength is only received by exciting the nerves of the stomach, which convey the irritation to the brain, and this in turn is aroused to impart increased action to the heart and short-lived energy to the entire system. All this is false strength that we are the worse for having. They do not give a particle of natural strength." 2T 65.

2. "Tea. . . enters into the circulation and gradually impairs the energy of body and mind. . . . Tea is poisonous to the system. Christians should let it alone. . . . The second effect of tea drinking is headache, wake-
fulness, palpitation of the heart, indigestion, trembling of the nerves, with many other evils." 2T 64, 65.

3. "Coffee is a hurtful indulgence. It temporarily excites the mind. . . but the after effect is exhaustion, prostration, paralysis of the mental, moral, and physical powers. The mind becomes enervated, and unless through determined effort the habit is overcome, the activity of the brain is permanently lessened." CTBH 34.

Spiritual

1. "Since a healthy state of mind depends upon the normal condition of the vital forces, what care should be exercised that neither stimulants nor narcotics be used! . . . Tea and coffee are fostering the appetite for stronger stimulants. . . . Every true Christian will have control of his appetites and passions. Unless he is free from the bondage of appetite, he cannot be a true, obedient servant of Christ. The indulgence of appetite and passion blunts the effect of truth upon the heart." CDF 426, 427.

2. "The only safe course is to touch not, taste not, handle not, tea, coffee, wines, tobacco, opium, and alcoholic drinks. The necessity for the men of this generation to call to their aid the power of the will, strengthened by the grace of God, in order to withstand the temptations of Satan, and resist the least indulgence of perverted appetite, is twice as great as it was several generations ago." CDF 428.

3. "Every penny expended for tea, coffee, and flesh meat is worse than wasted; for these things hinder the best development of the physical, mental, and spiritual powers." CDF 430.

4. "It must be kept before the people that the right balance of the mental and moral powers depend in a great degree on the right condition of the physical system. All narcotics and unnatural stimulants that enfeeble and degrade the physical nature tend to lower the tone of the intellect and morals." MH 335.
APPENDIX B

SURVEYS

I Am Willing to Help (Church Member Survey)
Community Health Survey

(Adapted from Reuben A. Hubbard, "Church Coordinated Evangelism," Syllabus for Health Evangelism, School of Health, Loma Linda University, Loma Linda, 1976; pp. 35, 101.)
I AM WILLING TO HELP.¹
Church Member Survey

Name______________________________
Address______________________________

(Please check)
1. I will pray daily for the campaign. Times (1)__ (2)___
2. I will help to make community survey.
3. I am willing to send invitation/handbill to any interest.
4. I will use my car to bring guests who need transportation.
5. I am willing to work as usher, to greet people.
6. I am willing to make posters for the health evangelism program.
7. I am willing to do public relation work for the campaign.
8. I am willing to make and to use wayang for audiovisual aid.
9. I am willing to be trained to do health personal work (step test___, screening___, cooking demonstration___, involve in health/doctrinal discussion___.
10. I am willing to do whatever jobs are needed.

¹Adapted from health survey of School of Health, Loma Linda University, Loma Linda, California.
Community Health Survey

HEALTH PROBLEMS

1. Heart Disease
   Yes No
   ____ ____ A. Has anyone close to you ever had a heart disease?
   ____ ____ B. Would you be interested in a program to prevent heart disease?
   ____ ____ C. Would you be interested in finding out your risk of heart disease (blood cholesterol, blood pressure, etc.) for nominal fee?

2. Smoking
   ____ ____ A. Is anyone in your family currently smoking?
   ____ ____ B. Would anyone in your family like help to stop smoking?

3. Drugs and Alcohol
   ____ ____ A. Does anyone in your family use alcohol, tranquilizers, or other drugs more than they would like?
   ____ ____ B. Would you support a program in your community on the prevention of alcohol and drug abuse?

4. Cancer
   ____ ____ Would you like to learn more about the risk factors, prevention, and early detection of cancer?

FOODS AND NUTRITION

1. Better Cooking
   ____ ____ A. Would you like to attend a class in meal planning to save money and time?
   ____ ____ B. Would you like to attend a class for information and preparation of vegetarian meals?
   ____ ____ C. Would you like to attend a cooking class for singles?

2. Weight Control
   ____ ____ A. Would you like to join a class to lose weight?

---

It is a part of community health survey of Loma Linda University.
B. Would you like to join a class to gain weight?

C. Would you like to learn how to prevent nutrition related diseases such as low blood sugar, diabetes, anemia, and cavities?

EXERCISE

1. Do you have a regular exercise program?

2. Would you like to participate in a program to improve your physical fitness?

3. Would you like to learn how exercise can prevent such conditions as heart disease, anxiety, ulcers, frequent colds, etc.?

HOME HEALTH CARE

1. Would you like to learn how to use water in simple home treatments to improve health and prevent disease?

2. Would you like to attend a seminar in stress management?

3. Would you like to participate in a Red Cross First Aid Program?
APPENDIX C

HEALTH MATERIALS

Outlines of Hygiene and Sanitation
Outlines of Family Planning
Synopsis of Health Lectures
Guidelines of Five-day Plan
HYGIENE AND SANITATION

I. Water
A. Sources of water
   1. Rainfall
   2. Surface water from:
      a. Constructed reservoirs in the high lands which collect water from the surface of clean, un-polluted ground.
      b. Rivers, streams, or lakes.
      a. Shallow springs (land springs) are an outflow of subsoil water.
      b. Deep Springs (main springs) in which water derives from water-bearing stratum beneath an impermeable stratum.
   4. Wells. These are holes sunk or bored through the strata of the earth in order to gain access to underground water. Three kinds of wells:
      a. Shallow wells--can be dug by hand or hand auger to the first permeable stratum only.
      b. Deep wells--dug through an impermeable stratum.
      c. Artesian wells (flowing wells)--the water rises above the level of the tops of the wells and pumps are not needed.

The most economical well is the hand-dug type. In stable soil formation, the well may be dug to the top of the aquifer before it is necessary to build the lining, but in unstable soil formation and when the well is relatively deep, lining should be built as construction proceeds.

The use of lining:
   a. Prevents ingress of pollution and it should extend up to 10 feet below ground level.
   b. Prevents caving of the excavations.
   c. Supports the superstructure on which the pump is mounted.

Lining of the well is made from:
   a. Burnt bricks
   b. Precast concrete blocks
   c. Plain or reinforced concrete
   d. Masonry

A safe deeper well consists of excavating to a depth of +15 feet, cutting a shoe into the side of the well 1 foot in depth, placing reinforcement and pouring the concrete behind shutters. This lining is thus supported on a concrete ring and, of course, by friction against the wall of the excavation. Next, a second section is excavated and similarly treated, and so on until the aquifer is reached. Thereafter, precast caisson rings of smaller external diameter than the lining are made, cured, lowered into the excavation and bolted together. The diameter of the
well should be 4 feet 6 inches to 4 feet 9 inches (larger diameters are uneconomical and unnecessary. See figure 1.

Wells can be protected by:

a. Choosing suitable locations
   1. uphill from any source of pollution
   2. 100 feet away from any source of pollution

b. Proper lining of the well up to 10 feet below ground level and at least 1 foot above.

c. Concrete top should extend 3 feet beyond the lining and any means of access (inspection opening) should be suitably covered as shown in figure 2.

B. Drinking Water

1. Importance of handling drinking water properly is heavily stressed due to the many diseases transmitted through
water including:

a. Infecting organisms, i.e., dysentery, diarrhea, the enteric fevers, and cholera.
b. Parasitic worms, i.e., ankylostomiasis or hookworm disease, bilharzia or schistosomiasis, guinea-worm, ascariasis, and flukes.
c. Those transmitted by insects which breed in water, i.e., malaria, yellow fever, and filarial disease.

2. The principle methods of removing organic pollutions in water are:

a. Storage, which allows time for sedimentation of the larger particles of suspended matters.
b. Filtration, if sufficiently performed, will remove all suspended matters and organisms. The best filter for private use is the candle filter. (see fig. 3.) The candles are unglazed so they are porous and these are placed in a filter (a two-chambered vessel), in such a manner that water put in the upper chamber of the filter must pass through the porous candles before it can reach the lower chamber of the filter from which pure water is to be collected. In this way bacteria and suspended matter are intercepted; they remain on the surface of the candle.

c. Sterilization, which destroys the disease-producing organisms, but does not remove either them or the inorganic matter. The simplest way to sterilize a small quantity of water is to boil it for at least 5 minutes; this will kill the organisms and render the water harmless.

II. Refuse Disposal

This includes:

A. House refuse, i.e., waste vegetable and animal matter, ashes, tins, rags, broken bottles, paper, and so on. Disposal of house refuse should have the following requirements:

1. A sanitary dustbin with a diameter of 18" and 2'6" high with an effective capacity of about 4 cubic feet.
2. Regular intervals of emptying the bin (done by the dustmen)
3. Incinerate or burning or tipping the ultimate disposal on to waste land or into disused murrum pits or quarries.
B. Excremental matter, i.e., faeces and urine.

1. Types of latrine:
   a. Excreta are finally deposited and not subsequently handled, i.e., the pit latrine.
   b. Excreta are finally deposited and subsequently handled and removed for final disposal, i.e., bucket latrine.
   c. Involves a minimum amount of water, i.e., aqua or septic tank latrines and compost latrines.
   d. Employs chemicals for their operation, i.e., the chemical closets.

2. The most suitable latrine for isolated houses in Indonesia is the pit latrine.

3. Requirements for pit latrine construction:
   a. Depth of the pit should be 15' with a diameter of at least 2'6" and not more than 3'.
   b. The superstructure should be made of impervious material, and it should have smooth concrete floors with a slight slope from all sides towards a center hole.
   c. Well ventilated superstructure made flyproof with wire gauze and well-fitting door.
   d. Location must not be within:
      (1) 30 feet from any building
      (2) Any place where the soakage from the pit is likely to contaminate any source of water supply.
      (3) 100 feet from any well, spring or stream of water used for drinking.

4. A good type of pit latrine is shown in figure 4.
III. Ventilation

A. This is needed in every house in order to achieve a comfortable indoor environment, thus reducing the sense of discomfort in the occupants which manifest in headache, sweating, and perhaps giddiness.

B. The simplest kind of ventilation is the natural ventilation which make use of:

1. The natural forces of diffusion. Diffusion takes place even in an unventilated room through the walls, but this too slow a process for practical purposes.

2. The movement of the wind. This an active force in ventilation except it is inconsistent which makes it impossible to regulate. It ventilates by:
   a. Perflaction (the wind blows through a room, entering a window on the windward side and escaping through a window on another wall).
   b. Aspiration (occurs in chimney where one current of air passes over another at right angles).

3. The movement caused by the difference in density between masses of air at unequal temperature. This is the type of ventilation is mostly used in the tropics, where warm and humid air in an occupied room tends to rise and is removed through the higher outlets. Cold air should be admitted from a lower outlet as shown in figure 5.

C. Inlets and outlets include windows as well as the doors. Requirements for windows are as follows:

1. Should be glazed to admit light when windows are closed.

2. One half of it should open for ventilating purposes.

D. The best type of window is the fanlight window. It has a small part at the top made open independently of the rest of the window. This can remain open in bad weather. Fanlights are best arranged with hinges at the top, bottom, or at the center. See figure 6.

Reference:

FAMILY PLANNING

Two major considerations in approaching family planning:

I. Motivation, which is influenced by:
   A. Education
   B. Cultural backgrounds
   C. Specific individuals

II. Methodology
   A. Temporary Contraceptives
      1. Folk Methods
         a. Coitus interruptus. Penis is withdrawn before ejaculation occurs.
         b. Postcoital douche
         c. Prolonged lactation
      2. Traditional Methods
         a. Condom. Rubber sheath worn over the penis during sexual intercourse.
         b. Vaginal diaphragm. Flexible ring covered by a thin rubber is used to cover the cervix uteri.
         c. Spermicides. Substance used to kill the sperm.
         d. Rhythm, or safe period. This method identifies the period of ovulation (unsafe period) and the partners avoid sexual intercourse during that period.
      3. Modern Methods
         a. Oral Contraceptives. This method inhibits ovulation by means of taking pills of estrogen or progesterone alone or in combination.
         b. Intrauterine device. Plastic or metal coils, spirals, or rings are retained in the uterus for the prevention of pregnancy.
   B. Permanent Contraceptives
      1. Female sterilization. It ranges from crushing the tubes to tubal ligation and hysterectomy (removal of the uterus).
      2. Male sterilization. The vas deferens, the passage way of the spermatozoa, is ligated.

References:
SYNOPSIS OF HEALTH LECTURES

1a. What is the best weight?

Desirable weights according to frame at age 25 and over

Weight in kg including wearing clothes

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Adapted from Metropolitan Life Insurance Company Tables (U.S.A.) (changed into metric system by the researcher)

1b. Practical Guidance on Exercise

There are four phases of exercise: warm up exercise, conditioning exercise, cardiovascular exercise, and cooling down. Types of exercises recommended are walking, running, cycling, swimming, jogging. Exercise should be appropriate for person's age.

2. General Principles of Nutrition--I

The need for the seven constituents of food (protein, fat, carbohydrate, mineral, vitamin, cellulose, and water) should be stressed. Sources of each constituent of food should be clarified in full detail.

3. What Exercise Can Do For You

The effects of exercise on the blood circulation, brain, heart, nervous system, and physical appearance should be explained. The physical, mental, and spiritual, as well as the social, aspects of man receive blessing through exercise.

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4. General Principles of Nutrition--II

The calories that can be produced from each gram of nutrient should be explained. Also give a practical application regarding the amount of food needed daily.

5. Exercise and Coronary Disease

Exercise improves collateral circulation, slows down the pulse rate, decreases the need for oxygen and improves RS-T segment, which means lower risk of getting coronary heart disease.

6. Low Cholesterol Food

High protein diet with low cholesterol value (such as soybeans, and corn oil) is highly recommended.

7. Guidelines for Exercise

Practical guidance for exercise such as: standing reach and bend, flexed leg back stretch, alternate knee pull, double knee pull, torso twist, head and shoulder curl, sit up arms crossed/fingers laced, horizontal arm circles, giant arm circles, knee pushup, pushup between chairs, quarter knee bends, sitting single leg raises, side lying leg lift, back leg swing, heel raises.

8. Saturated Fat

The relationship of animal fat, meat, milk, eggs, and other dairy products to cardiovascular disease is almost inseparable.

9. Sugar, the empty calorie

Various vitamins such as B1 (thiamine) are required to metabolize the sugar. A deficiency of important nutrients could easily take place in the body with high sugar intake. Sugar causes many illness.

10. Count your Calories

Balance in calorie intake and usage should be well understood in order to avoid malnutrition or obesity.

11. A Good Breakfast

The need of a heavy breakfast and a light supper should be clearly explained. Calories for breakfast should be calculated.

12. How to Make a Menu

The balance between amount of calories and the variety of food should be explained. It is also helpful to plan a weekly menu, a few weeks in advance.
SUPPLEMENTAL MATERIAL FOR FIVE-DAY PLAN
TO STOP SMOKING

First Day: Smoking and Cancer

"If you smoke, your chances of dying from Cancer are 110 percent greater than those who have never smoked on a regular basis. This year cigarette smoking will contribute to the deaths of 300,000 Americans--six times as many as have died in Vietnam in over ten years. It is a well-established fact that smokers significantly increase their chances of contracting many kinds of diseases and dying. In fact, smokers die at a 68 percent faster rate than non-smokers. Each cigarette subtracts six minutes from the life of the average heavy smoker. The greatest threat to smokers is cancer, a wild, destructive, spreading growth of cells. Nicotine and other substances in tobacco, which enter the lungs and spread to all parts of the body through the bloodstream and lymphatic system, contribute to the appearance of cancer. Stomach cancer, which may seem to be a peptic ulcer at first, occurs twice as frequently in smokers as in nonsmokers. Cancer in the lower part of the large intestine, probably the most common of internal cancers, also afflicts smokers more frequently than nonsmokers. Cancer of the throat, arising from the irritating effect of chemicals in cigarette smoke, often leaves its victim without vocal cords after corrective surgery. He must learn to speak again by regurgitating swallowed air. Smokers account for 80 percent of the cancers of the vocal cords."\"1

Outline of Therapy\2

-- Strong will power, "I choose to quit smoking"

-- Recommended Diet Control-- Fruit and fruit juice
    -- No liquor or coffee
    -- Six to eight classes of water
    -- Deep breathing
    -- Hot bath

Second Day: Smoking and Lung Cancer

"If you smoke, your chances of dying from Lung Cancer are 700 percent greater than those who have never smoked on a regular basis. When the average smoker takes a long drag on his cigarette, he inhales deeply, forcing smoke into the remotest sections of his lungs. The smoke contains tar and nicotine which invade thousands of the innumerable air sacs in the lungs. As he continues to smoke, the smoker's air passages become increasingly coated with the sticky tar, which includes several cancer-causing agents. Ordinarily "cilia," small hairlike structures, brush invading matter from the air passages. But the tar from tobacco paralyzes
these structures and makes its way to the lungs. As the tar residues continue to build up in the air passages over several years, they begin to change the surface cells of the passages. The cells begin to increase in number. Within a few years lung cancer often appears. From the lungs, cancer cells enter the blood and lymphatic vessels and spread to all sections of the body. By the time a diagnosis finally confirms the presence of lung cancer, the disease has usually spread beyond control. That's why, even today with all the spectacular advances in medical science, lung cancer still proves 95 percent fatal.1

Outline of Therapy

-- Ask Divine power, "O, give me strength to keep from smoking."
-- Review the first day therapy

Third Day: Smoking and Emphysema

"If you smoke, your chances of dying from Emphysema are approximately 10 times greater than those who have never smoked on a regular basis. One of the fastest-growing health problems in America today is a disease known as pulmonary emphysema. Emphysema now affects over one million Americans, and fifty to fifty-five thousand die each year because of it. The disease has much in common with lung cancer--both involve changes in the surface cells of the lung's air passages, and both are related to smoking. Emphysema occurs when the surface cells, because of outside irritants, begin to grow abnormally. As the growth continues, they begin to block the small air tubes inside the lungs, trapping carbon dioxide within. Because of this blockage the person with emphysema finds it difficult to exhale air. As the condition worsens, the small air-sac walls in the lungs swell and rupture under the stress, producing larger and larger balloonlike sacs or "blebs." The walls of these blebs lose their elasticity as a result of the chemicals in the gases and tars. Person with emphysema experience shortness of breath, lack of energy, and decreased efficiency. Eventually they cannot perform the necessary duties of life. Quitting smoking enables the lungs to function more effectively again, but the broken air-sac walls never heal.1

Outline of Therapy

-- Strong will power--"I will choose to eat intellegently"
--"I choose to get sufficient rest at night"
--"I choose not to smoke for 60 minutes"

-- Recommended Diet Control-- Avoid sugar
-- Eat more fresh vegetables and whole grains
Fourth Day: Smoking and Hardening of the Arteries

"If you smoke, your chances of dying from Heart Disease are 103 percent greater than those who have never smoked on a regular basis. Hardening of the arteries (arteriosclerosis) affects more people and causes more deaths (54 percent of all deaths) in this country [U.S.A.] than any other disease. In recent years doctors have discovered that the disease is directly related to the high-fat diet indulged in by most Americans. Now, further research has shown that nicotine, and possibly other chemicals absorbed from tobacco, increases the buildup of fatty deposits (mainly in the form of cholesterol) along the inner walls of the arteries. But that's not all. Nicotine also causes the arteries to shrink. This combination of fat buildup and shrinkage of the arteries hinders the blood vessels from supplying enough blood to the heart, brain, extremities, and other organs. As the condition becomes worse, tissue damage often results. At this point it takes only a small blood clot caught in the constricted blood vessels to cause a heart attack or stroke."

Outline of Therapy

--Good motive, "Thou shalt not kill"

--Faith/Pray
--Leave off not sauce, mustard, spices, black pepper, catsup, chili, horseradish

--Avoid rich food, greasy fried foods, and meat

Fifth Day: Smoking and Brain Damage

"In order for the human brain to function properly, it must have an adequate supply of blood to bring it oxygen. One of the greatest threats to the brain is cholesterol. Every year thousands of individuals die as the result of apoplectic seizures or strokes. Most of those who die from strokes are over the age of forty. Strokes occur when a blood vessel in the brain hemorrhages or when a clot forms on the roughened surface of a blood vessel. Either of these conditions stops the flow of blood to a portion of the brain, causing paralysis of part of the body and in severe cases death. The buildup of cholesterol in the blood vessels which supply the brain can also cause senility by actually starving parts of the brain of needed oxygen. Because both improper diet and smoking contribute to the buildup of cholesterol, the person who smokes is a prime target for senility and strokes."

Outline of Therapy

--Eat a hearty breakfast
--Eat nothing between meals
--Skip supper, or eat a little fruit only
--Do some exercise

References:

1 Lectures are taken from "How To Stop Smoking," supplement to These Times, n.d.

2 Therapy outlines are adapted from E. J. Folkenberg and J. Wayne McFarland, Group Therapy Lectures for Evangelistic Teams-Medical (Washington, D.C.: General Conference Temperance Department, 1969).
APPENDIX D

COOKING DEMONSTRATION

( Vegetarian Recipes in Indonesian, are taken from Menu Sehat, Anjasmoro Church, Surabaya.)
MASAKAN EUROPA

Gluten

Bahan-2: 1 kg. tepung terigu, 500 gr. air.

Cara membuatnya: Tepung dan air diaduk jadi satu, di-
ulen dan dibanting hingga menjadi adonan yang licin, sepe-
ti membuat roti. Lebih lama menguleninya lebih banyak gluten
akan terbentuk. Biarkan adonan terendam dalam air selama 1
jam atau sampai malam, baru dicuci. Remas-2 adonan dalam a-
ir rendamannya, ganti airnya, diremas-remas ulang, buat ca-
ra seperti ini sampai 2 kali lagi dan gluten terbentuk. Ben-
tuklah gluten sesukanya, masukkan kedalam air air yang se-
dang mendidih dengan dibubuhi garam atau kecap asin, vetsin,
dan biarkan mendidih dengan api kecil hingga airnya habis.
Dapat digunakan untuk ber-macam2 menu.

Chicken Mornay

Bahan-2: Daging gluten, roti, susu, telor, tepung ro-
ti, merica, vetsin, garam, pala.

Cara membuatnya: Daging gluten dipotong tipis-2 kira-
lebar 3 cm dan panjang 7 cm, lalu sebagian gluten digiling
diberi bumbu-2 dan rendam diroti yang sudah diberi susu da-
hulu. Isi atau cacahan daging ini ditaruh ditengah-2 dari 2
lapis daging itu, lantas celup dicocokan telur dan diberi
tepung roti lantas goreng hingga kering. Dapat dimakan de-
ngan saus tomate atau acar muster.

Tuna Bake

Bahan-2: Gluten, roti, susu, telor, wortel, acar ke-
timun, bawang merah goreng, mentega, merica, vetsin, garam,
pala, kentang rebus.

Cara membuatnya: Gluten sesudah dikukus dihaluskan
dengan diberi bumbu-2 secukupnya dan rendam diroti yang
sudah diberi susu secukupnya. Lalu masukkan potongan wortel
kecil-2 dan acar ketimun yang juga dipotong kecil-2 aduk
semau ini hingga rata taruhlah dicitakan yang sudah dise-
mir dahulu dengan mentega dan tepung roti, isi kira kira
separo dari citakan itu dan atasnya semprotlah dengan ken-
tang yang sudah direbus and diberi mentega dan telur ku-
ingnya saja. Buatlah bentuk bunga-2 lalu bakar, dimakan
dengan rebusan blumkool, selada, doperten dan saus tomate.
**Beef Supper**

**Bahan-2**: Gluten, kentang, susu, keju; bawang Bombay, tepung roti, mentega, merica, pala, vetsin, garam, paprika, doperten, jamur.


**MASAKAN INDONESIA**

**Soto Ayam Madura**

**Bahan-2**: Gluten, kool kecamba, suun, telur rebus, kentang, bawang daun, seledri, jahe, kunir, laos, bawang putih, merah, ketumbar, pala, garam, vetsin.


**Sate Ayam**

**Bahan-2**: Gluten, kecap manis, bawang merah, mentega vetsin.

*Cara membuatnya:* Gluten yang sudah direbus dikupas dengan tangan agar mirip dengan daging ayam. Lalu kecap dan bawang merah diluiskan dan rebuslah dengan diberi air sedikit. Bila sudah tusuk sate ini dan bakar sambil dicelup beberapa kali di kecap manis dengan diberi bawang sedikit dan mentega hingga cukup kering. Makanlah dengan bumbu sate.
Martabak

Bahan-2: Gluten, bawang prei, brambang, telur, garam, merica, vetsin.

Cara membuatnya: Gluten yang sudah direbus digiling atau dicacah kecil-2 lalu tumislah dengan brambang hingga agak kering dan masukkan bumbu gule rabuk jangan terlalu banyak, juga vetsin dan garam. Dengan diberi air sedikit dan masak hingga keset.

Cara membuat kulitnya: Tepung terigu diberi garam halus dan air secukupnya sehingga menjadi adonan yang agak lemas. Lalu pulunglah bundar-2 dan oles dengan minyak goreng. Diamkan untuk 15 menit. Lalu gileslah dengan gilingan gluten tadi yang sudah dicampur dengan kocokan telur, bawang prei, brambang yang sudah dirajang kecil-2 dengan vetsin, garam, merica, taruhlah di tengah dari kulit dan lipatlah kearah tengah, angkat dan goreng diminuyak yang panas hingga kering.

MASAKAN TONGHOA

Young Tahu

Bahan-2: Bawang daun, bengkoang, rebung, bawang merah, wortel, tepung kanji, telur (merahnyassaja), mentega, vetsin, tahu.


Bakmoi

Bahan-2: Tahu putih, jamur hitam (Tiongkok), gluten, bawang putih, kecap asin, merica, gula, vetsin, sedikit kanji.

Cara membuatnya: Tahu putih dipotong kecil2 lalu digoreng setengah matang, jamur hitam dipotong kecil-kecil persegi, gluten dipotong kecil2 persegi. Bawang putih dipukul lalu ditumis, beri kecap asin, air sedikit dan bahan2 tadi masukkan, beri merica, gula vetsin dan sedikit tepung kanji supaya agak licin.

Kuahnya: Bawang putih dipukul lalu tumis, beri kecap
asin dan air secukupnya untuk kuah, beri vetsin, garam, gula, merica. Kalau makan taburi atasnya nasi dengan rajangan selederi, bawang merah dan putih gorengan.

**Bakpao**

**Bahan2 untuk kulitnya:** 1 kg. tepung terigu, 3 s.m. gist, 4 s.m. gula, 3 s.m. mentega, 1 gelas susu kira2 250 gr, 2 putih telur, air kelapa secukupnya.

**Bahan-2 untuk isi:** Gluten, tangkwe, jamur, bawang daun, bawang putih, kecap manis, kecap asin, merica, mentega.


**Cara membuat isi:** Gluten yang sudah direbus dipotong persegi-2. Tumislah bawang putih yang dipotong tipis2 hingga agak kering, lalu tumis pula bawang daun yang sudah dirajang sampai kering dan harum, dan masukkan gluten tadi dengan diberi air secukupnya juga jamur dapat dimasukkan dan juga tangkwe yang sudah dipotong-potong dengan diberi bumbu2 sampai cukup rasa. Masaklah ini dengan api kecil agar merasuk. Taruhlah di-tengah2 adonan tadi dan bentuk lalu kukus lebih kurang 15 menit.

**Kepiting Goreng**

**Bahan-2:** 1 ons tepung terigu, 1 telur, 2 buah wortel gigobet, 3 batang bawang prei, garam, vetsin.

**Cara membuatnya:** Telur dikocok lalu masukkan wortel dan bawang prei yang sudah dirajang, juga tepung hingga merupakan adonan dan beri bumbu-2 lalu goreng satu sendok demi satu sendok.

**Udang Goreng**

**Bahan-2:** Taoki (tahu kering) RRT, ngohiang, taouji, vetsin, kecap asin, gula, telur, air, tepung terigu.

**Cara membuatnya:** Taoki direndam satu malam lalu dipotong-2 kira-2 12 cm lalu diikat dan kemudian direbus dengan bumbu-2 ngohiang (sepucuk sendok teh), taouji, vetsin, kecap asin, gula. Tepung terigu diberi air, kopyokan telur, taouji, vetsin, aduk sampai rata. Masukkan taoki kedalam
tepung lalu goreng (seperti pisang goreng).

Kulit Ayam Goreng


Egg Fu Yong

Bahan-2: Wortel taoge, vetsin, garam, merica, telur, tomat, ercis atau doperten.

Cara membuatnya: Wortel digobet, lalu kocoklah telur dengan diberi bumbu2, lalu masukkan taoge dan wortel. Aduk hingga rata, dapat pula diberi tepung sedikit bila suka agar agak kental. Beri bumbu secukupnya, lalu goreng adonan ini bulat2 seperti wingko, dan masukkan saus dari buah tomat yang direbus dan disaring dan diberi bumbu vetsin, gula, garam, harus rasa asam manis, lalu kentalkan dengan kanji dan masukkan ercis atau doperten dan siramlah diatas dadaran telur tadi.

MASAKAN INTERNASIONAL

Japanese Tempura

Bahan-2: Blumkool, putih telur, tepung terigu, kanji, baking puder 1 s.t., air es, garam, vetsin.


Mexican Enchilada

Bahan-2 untuk kulit: 1 cangkir tepung terigu, 1/4 cangkir croma, 1/4 cangkir air, 1/4 s.t. baking puder, garam
sedikit.

Bahan-2 untuk isi: Bruine boon, gluten, saus tomat, chili puder, paprika puder, vetsin, garam.


MASAKAN FAVORITE INTERNASIONAL

Spagheti & Garlic Bread

Bahan-2: 1/2 pak spagheti direbus, 1/2 botol saus tomat ditambah 1/2 gelas air dan 1/4 s.t. jintan, 1 batang roti (Garlic bread), 2 s.m. mentega, 1 s.m. parutan keju, 1 s.t. garlic powder (powder bawang putih).

Cara membuatnya: Taruhlah spagheti dalam lengser, tuangkanlah campuran saus tomat hingga spagheti terendam, lalu dioven lebih kurang 15-20 menit. Roti dipotong memiring setebal 3 cm, disemir dengan adonan dari mentega, keju, sedikit garam dan garlic powder, kemudian di pan hingga kuning. Makanlah dengan saus spagheti.

Korean Kimchee

Bahan-2: Sawi putih, daun bawang, bawang putih, jahe, cabe merah, garam, vetsin sedikit, paprika bubuk.

Cara membuatnya: Sawi dipotong lebar-2 dan beri garam biarkan 2 jam. Rajanglah daun bawang, pukul bawang putih dan jahe.
Bila sudah 2 jam sawi tadi, bila tidak terlalu asin boleh langsung diberi air, hingga sawi tadi terendam dan masukkan bawang putih/daun, vetsin dan paprika bubuk juga cabe yang sudah dirajang kecil-2 harus rasa cukup. Lalu masukkan ini dibotol yang mulutnya lebar tutup rapat-2 dan biarkan 2 hari, bila sudah rasa asam sudah cukup waktu untuk dimakan, bila ada sisa harus ditaruh dikulkas agar tidak bertambah asam rasanya.
Enak sekali untuk dimakan dengan nasi.
APPENDIX E

BRIDGING PROGRAM

Health from the Viewpoint of Your Religion
Qur'an/Islamic Teaching

"Surely Al-khamr has been prohibited." "Al-Khamr as used in the Holy Qur'an and the Hadith of Prophet means any material which causes intoxication." All intoxications are khamr and all types of khamr are forbidden! "

"O you who believe! Strong drink and games of chance and idols and divining arrows are infamy of Satan's handiwork. Leave it aside in order that you may succeed. Satan seeks only to cast among enmity and hatred by means of strong drink and games of chance, and turn you from remembering Allah and from prayer. Will you then desist?"

"They question you about strong drink and games of chance. Say: In both is great sin, and (some)utility for men, but the sin of them is greater than their usefulness."

"O believers, do not pray when you are drunken until you know what you are saying. . . ."

Bible

The Bible strongly condemns the "slip" of drunks: Noah, Lot, Nabal, with a stern disapproval of excessive drinking.

Isaiah's sarcastic reference to those who drink (Isa 5:22).

The book of Proverb adds a scathing denunciation of heavy drinking as well as a solemn reminder of its degrading effects (20:1; 23:29-35).

Man's economic security is disturbed (Proverb 21:17, 23:21).

Paul condemns it as an enemy of the soul, describing it as the work of the flesh (Gal 5:21), capable of invalidating one's claim to membership in the kingdom of God (1 Cor 6:10).

Isaiah's inclusion of drunkenness among the reason for God's abandonment of Israel indicates a similar disposition to regard drunkenness as a sin against God (5:11-17).

The New Testament mentions drunkenness with practically the same frequency as the Old Testament (1 Cor 5:11, 6:10; Gal 5:21; Eph 5:18).

The Old Testament usually use the word yayin, which means fermented juice of the grape. The following are a few examples:

"His eyes shall be red with yayin." (Gen 49:12).
"yayin is a mocker" (Prov 26:1)
"Woe. . . run after strong drink. . . til yayin inflames
them" (Isa 5:11).

The symptoms of yayin's bad influence include confused thinking (Isa 28:7), indecent exposure (Hab 2:15, 16), unbridled speech (Prov 20:1), various types of sickness (Hos 7:5).6

Science

Dr. J. Wayne McFarland gives some facts on alcohol:

1. Protoplasmic poison
2. Depressant drug
3. Personality changes: Loss of self-control and will; alcoholic, delerium tremens
4. Stomach: Gastritis
5. Liver: Cirrhosis
6. Neuritis
7. Malnutrition (loss of appetite) -- infections
8. Addiction: might bring death.7

A recent discovery by a University of Southern California neurologist, Dr. Theodore L. Munsat, indicates that alcohol damages muscles. "... alcohol harms muscle fibers, leaving them in much the same damaged shape as those of people affected by muscular dystrophy."8

References


2 Ibid.


5 Koran, Surah 4:43.


The Bible makes a distinction between "clean" foods, which could be eaten, and "unclean" foods, which were to be avoided. The only animals suitable for food were those that chewed the cud and parted the hoof, since they were exclusively vegetarian (Lev 11:3-8 and Deut 14:4-8).

All the blood was to be drained from the tissues before cooking and the abdominal visera were to be avoided, as were all animals that died from natural causes. Among aquatic creature only those having fins and scales were considered clean. Among birds the rapacious, aquatic, and predatory species were rejected (Lev 11:13-19).

Muhammad said to Muslim that "What was allowed to the People of the Book was allowed to them."2 ("People of the Book" refers to Christians).

Moslems believe that Allah has forbidden:
1. The flesh of donkeys.
2. Beasts with claws, such as lions, tiger, wolves, and bears.
3. Birds with talons, such as hawks, eagles, and falcons.
4. Creatures which the prophet ordered killed, such as snakes, mice, crows, ants, and bees.

For hygienic reasons, and in order to form kind and good habits, Moslems are forbidden to eat pork and sea creature that not shaped like fish. This includes frogs, crocodiles, turtles, and the like.

By using the flesh of only vegetarian animals, the Hebrews greatly reduced the probability of infestation of parasites (Trinchinella spirilis, Taenia Solium or Echinococcus granulosus) or the protozoan toxoplasma, or all of which are common in cardivora living under subtropical conditions.

Similarly the exclusion of crustacea which frequently live on sewage and putrefying substances decreased the pos-
sibility of infection with typhoid or paratyphoid fevers."^6

"Pigs suffer from many diseases. Half the bacon pigs examined at an abattoir were found to have external parasites. ... mange, mites, lice or forage mites. The pig is not a filthy animal. It is a carrier of disease germs; that is why Islam forbids the eating of the pig."^7

It is known that vegetarian foods are the best food. one of the reasons why the Hunza have long lives is because they eat vegetarian food. "They eat a large amount of natural foods. Nothing is refined. Grains, nuts, fruits and vegetables are the staples of their diet. . . . The Hunzas do not suffer from cancer, strokes, heart attacks and atherosclerosis like meat-eating Americans do."^8

References
1  Surah 16:115-116.  2  Surah 5:5.
4  Ibid.
6  Ibid.
7  Namullah Khan, "Why Pig is Forbidden?" The Muslim World 4 (February 4, 1967), 3.

Hygiene and Sanitation

The Bible and Science

The Hebrews stressed greatly the importance of washing the body despite frequent shortages of water. Water was regarded as a symbol of purification and as a disinfecting solution, an integral part of ritualistic purification. Washing of all extremities was specifically set forth by the law, and specific lesions demanded specific treatment (Lev 15:11-13).

Great care was also shown in disposing of excreta (Deut 23:12-14). This was extremely important in controlling air-borne and fly-borne disease. Fomites required sterilization. For example, it was required that material captured from enemies
be purified by fire or water (Num 31:2-24). The factual information in Lev 15 is still useful in our present-day society, especially the regulations regarding cleanliness and purity.¹

The Koran/Islamic Teaching

In the Koran and prophetic traditions personal cleanliness and public hygiene are essential for the purification of the body which is regarded as half the faith. Therefore, great importance is attached to ablution, the bath, and the use of the toothpick.¹

"In Hadith, certain precautions are recommended in the case of natural evacuations, so that no part of excrement or filth should remain on the body or defile the cloth. These consist in the use of pebbles, whose place, if necessary, be taken by toilet paper and water after the passing of urine or stools, or simply water. These are apparently very minor details of life but they play an important part in the preservation of cleanliness and health.²

"O thou that art clothed! Arise and work, and thy Lord do magnify, and thy garments do purify and uncleanness do shun."³

"Hadith also says special stress should be placed on outward purification. 'purification is key to pray' (Tr. 1:3), 'religion is built on cleanliness,' 'purification is one half of faith' (IMI:5)."⁴

"That health and cleanliness are two of the great purposes which wudzu serve, in addition to its spiritual meaning, is shown by the stress which is laid on rinsing the mouth with the aid of miswak or tooth-brush."⁵

More Evidence from Science

(See lecture on hygiene and sanitation.)

References

¹Harvey Rosenstock, "On the Genesis of Public Health: One Facet of Pentateuchal," Arizona Medicine, May 1968, p. 496.
³Surah 74:1-5.
⁵Ibid., p. 399.
CIRCUMCISION

Bible

It was a covenant with Abraham as is recorded in Gen 17:14: "This is my covenant which ye shall keep, every man child among you shall be circumcised."

The Koran/Islamic Teaching

Circumcision is a rite universally observed by Islam, although not prescribed by the Koran. Circumcision is usually performed on the seventh day or on the fortieth or in the seventh year.

According to Moslems, circumcision is sunnah (reward is given if we do, no punishment if we do not).

Science

Discussing the pathology of the male genital system, Dr. S. Robbins, notes that the ritual of circumcision as practiced by the Hebrews during the first two weeks of life has for all purposes virtually eliminated carcinoma of the penis.

"In India, genital cancer is much more frequent in the Hindu than in the Mohammedan; the latter is circumcised as a ruitual of puberty."

"According to a ten-city survey, the incidence of cancer of the cervix in American white women is 35.2 per 100,000, in American non-white women, 61.2 per 100,000. In Israeli women, the rate is 2.2 per 100,000, and this is exceeding low rate is matched by studies on Jewish women in the United States. Among women in most Latin and South American countries and among Hindu women in India, cancer of the cervix accounts for about 40 percent of all malignancies in the female. The most likely common denominator is the introduction through coitus by the uncircumcized sexual partner of cancer irritant or virus."

"There is almost certainly more to circumcision than mere ritual. The historic experience of the people inhabiting the Fertile Crescent and the lands bordering the shores of the eastern Mediterranean has provided a clue that may contribute much to unravelling the pathogenesis and epidemiology of both penile and cervical cancer."

There may have been other motives for circumcision. The foreskin protects the sensitive corona and flans. Exaggerated
sensibility of these structures may initiate a train of reactions, in the unconscionable and undiscipline individual, detrimental to the mores of society. Circumcision permits greater cornification and thus diminishes the by hyperesthesia of the glans. By dulling the edge of sensuousness, man is better able to bridle his passions and to adjust his sexual behaviour to confirm with convention.

The priapic preoccupation of the early Israelites with the foreskin was inspired as much by the goal of survival as by reasons spiritual and aesthetic. Through trial and error, the forerunners of our Judeo-Christian civilization learned of the expediency of circumcision; it became a religious rite, but it was a good public health measure.

References


5 Ibid., p. 42.

6 Ibid.

7 Ibid.
FASTING

Bible

The experience of Moses (Exod 34:28).
The experience of David (2 Sam 12:1, 18).
The Day of Fasting (Lev 16:29).
The experience of Daniel (Dan 10:2,3).
The experience of Jesus (Matt 4:1-4).
The experience of early Christians (Acts 13:2, 3; 14:23, 2 Cor 11:27).

The Koran/Islamic Teaching

"O you who believe. Fasting is prescribed for you as it was prescribed for those before you, so that you may guard against evil."1

According to Islam, "Fasting is primarily a spiritual discipline. On two occasions in the Holy Koran (Surah 9:112; 66:5), those who fast are called sa'ih or spiritual wayfarers. When a person refrains, not only from food and drink, but from all kinds of evil, he is called sa'ih."2

Hadith: "Whoever fasts during Ramadzan, having faith in Me and seeking My pleasure" (Bu. 2:28). "The Prophet said, Fasting is a shield, so the faster should not indulge in foul speech... and surely the breath of a fasting man is pleasant to Allah than the odour of musk, he refrains from food and drink and other desires to seek My pleasure; fasting is for Me only" (Bu. 30:2).3

Moslems are required to fast for twenty-nine or thirty days during the month of Ramadzan.

Science

"Dr. Walter Bloom demonstrated that total fasting with free access to water was tolerated well and, in fact, most beneficial as an introduction to the treatment of obesity."4

"Dr. Garfield Duncan and his associates corroborated Bloom's work and gave evidence of the practicable application intermittent periods of total fasting, except for non-nutritious fluids. Such fasting was followed within a few days by anorexia and frequently by euphoria. Low caloric diets failed because they stimulated hunger rather than anorexia. Furthermore, the loss of salt and of water noted on total fasting failed to occur on low caloric diets. The impression that hunger stressed the individual, resulting in increased corticoid activity by the
adrenals, thus heightening catabolism or breakdown of tissue proteins, was not substantiated by hormones assays performed before and after total fasting periods of fourteen days. A relationship was found, however, between the anorexia and the degree of ketosis (a mild form of acidosis in the faster's bloodstream). [Fasting] is a safe, painless, effective method for the obese individual, if undertaken for one to several weeks under the care of a physician. It helps him to mobilize fat, which burns or is metabolized into fatty acids--hence the ketosis.5

"While the fast is not a cure for any ailment, it does slow down the metabolism of the body and provide a rest for the digestive system. During this period, the accumulated material in the intestines will be cleaned out. The body does have a regenerative function and repairs itself. By fasting, the energy which usually goes into the normal functions of the day-to-day running of the energy system, can be transferred to the self-help, self-repairing systems of the body."6

References

1Surah 2:183.
2Ali, p. 481.
3Rosenstock, p. 45.
4Ibid., pp. 45, 46.
APPENDIX F

SYNOPSIS OF HARVEST PROGRAM
SYNOPSIS OF HARVEST PROGRAM

I. The Marvels of Life

Indonesian thought is based on Pancasila, the five fold philosophy of life. Indonesians believe that the supreme God is the first philosophy. His supremacy can be seen by the fact that He is the creator (Gen 1) of the whole universe. There are 40 billion suns in our milky way system and 200 million milky ways in space which show the glory of God (Ps 19; Isa 40:26; 40:15). The marvel of man can be seen more clearly in the human's nerves. "The hearing ear and the seeing eye, the Lord even hath made both of them" (Prov 20:12). Eye-- has 200 million light receptors which send their messages to the brain. Ear-- sound vibration is increased and is 100 times more concentrated in the inner ear. Brain-- the 10-12 billion cells react to messages sent to them. Nerve-- messages travel 200 miles per hour through the nerves. All of these things show the glory of God, the characteristic of God (Isa 46:9, 10; John 3:16; 17:3)

II. Order in Life

God, who controls the universe, is the God of order, and He wants man to live an orderly life. Families without orderliness will result in broken homes, juvenile delinquency, and various other problems in the society. Family planning includes the timing of marriage, use of the parenthood plan, planning the size of the family, the budgeting of money, and the use of contraceptives. The Bible was given for the orderly instructions of life (2 Tim 3:16, 17). It is God's revelation (1 Pet 2:21) and more evidence can be found in Isa 46:9, 10.

III. The Joy of Living

The physiological effects of stress are resentment, worry, hostility, anxiety, guilt, fear, asthmatic attack, increase of heart rate as well as blood pressure, indigestion, ulcer, colitis, and constipation. Simple causes are: going to bed late at night, getting up late in the morning, tension, skipping breakfast, and frustration. The joy of living means a life free from stress, which only can be found through Jesus Christ (Matt 11:29; 30; Matt 6:25; Luke 8:23-25; 1 John 1:9; Rom 5:1-3; 1 John 4:18.)
IV. Disturbances of Health and Happiness

Heart problems have been a disturbance of health and happiness for many people. Four factors are involved in maintaining a healthy heart: strong heart muscle, proper opening and closing of the heart valves, unimpaired electrical impulses, and a good circulation system which has not been clogged up by cholesterol, triglycerides, and other factors. There is a close relationship between smoking, stress, over weight, and lack of exercise, with heart disease. More people have heart problems in the last days, it is indeed a sign of the second coming of Christ (Luke 21:26; "Man's heart failing for fear and for looking after these things"). Promise of His coming (John 14:1-3; Acts 1:11; Rev 1:7). More signs of His second coming (Matt 24:7; Dan 12:4; 2 Tim 3:1-5).

V. Eternal Health and Happiness

Many health problems which disturbs the happiness of life have happened due to the lack of sanitation and hygiene, i.e., the daily bath, boiled drinking water, sufficient house ventilation, clean toilet, dental care, handwashing—especially before meals, not going bare footed. If all these are carefully observed, it will encourage better health and happiness. However, the Bible mentions eternal health and happiness in the future (Rev 21:4, 22:2, 3). This will take place after the few events that are described in 1 Thess 4:16, 17; 1 Cor 15:52; Rev 20:4-9.

VI. Heaven Here and the Hereafter

God has planned that man and woman should experience a little heaven on earth (Gen 1:27, 28; 2:24, 25), where the love of Christ will control their lives (Eph 5:23, 24). But destructive practices can be found everywhere, practices that cause broken homes, unhappiness, and sickness (gonorrhea, syphilis, and other venereal diseases, with terrible effects on the human body as well as on society). The higher center of the brain should control our lives... "It's time to wake up to reality, let us live cleanly... not playing with sex, and give chances to the flesh to have its fling" (Rom 13:13, 14, Phillips). Balance in diet and rest, as well as exercise, will help to control sex, and then the atmosphere of heaven on this earth can be felt. This will help us prepare for heaven.

VII. Temporary Excitement

The taste of foods is temporary and undoubtedly has some side effects too. Tea and coffee affect the heart
stomach, brain, and muscles, as well as the chromosomes; they also cause insomnia. Our lives here are temporary too (Rom 6:23a). But death will be temporary also for God's people (Gen 2:17, Eccl 12:7; John 11:11-14; Eccl 9:5, 6, 10; I Thess 4:17, 18; 1 Cor 15:12-26).

VIII. Earthly Hell

Hell is commonly known as a hot place for the wicked. The uses of sheol, hades, gehenna, and tartaroo as found in Psa 16:10; Acts 2:27; 1 Cor 15:55; and 2 Peter 2:4 give the proper meaning. All men go to the grave (Job 30:23); the righteous will be resurrected from the grave (1 Cor 15:22); the wicked will be resurrected from the grave after 1000 years (Rev 20:5); and cast to the lake of fire (Rev 20:10-15); the eternal punishment (Act 25:49; Jude 7; Mal 4:1-3). An earthly hell can be experienced by drinking alcohol which will produce various kinds of suffering, such as poisoning of the protoplasm, depression, personality changes, gastritis, cirrhosis, hepatitis, neuritis, malnutrition, etc.

IX. The Slow Murderer

Faith will produce obedience (Eph 2:8, 9; 1 John 2:3, 4; John 14:15). The Lord has given us the ten commandments (Exod 20:2-17) for our happiness. "Thou shall not kill" is one of the commandments. But smokers kill themselves gradually, by causing cancer, heart and blood vessel diseases, chest diseases, stomach trouble, addiction, and other problems.

X. Relaxation

All body systems and organs of the body have periods of rest. Lack of rest will result in frustration, tiredness, irritation, and lower body resistance. Guidelines for rest are needed. God has given a special day of rest to man, the Sabbath day (Gen 2:1-3; Exod 20:8; Ezek 20:20; Isa 58:13-14; Luke 4:16; Acts 18:4; Isa 66:23, 24).

XI. It Looks Sweet

Sugar looks good and taste sweet, but it is not sweet in value; it is called the empty calorie. Sugar causes many ill effects on the body such as tooth decay, lower body resistance, elevation of triglycerides which promotes coronary attacks, disturbance in sugar metabolism in the liver and pancreas. The kidneys are also adversely affected. Sunday observance looks sweet but it is against God's will (Dan 7:25).
XII. The Most Precious Thing

Human life depends on oxygen. A few minutes without oxygen will severe brain damage and result in death. Fresh oxygen is needed for maintaining good reasoning power, will, judgment, and emotion. Prayer without ceasing is needed to maintain a sound spiritual life (1 Thess 5:17). Conditions connected with prayer can be found in Matt 21:21; Heb 11:6; Phil 4:6; John 15:7; 1 John 5:14; Psa 40:1; 60:18.

XIII. Stand Straight

Poor posture will cause disturbances in breathing, blood circulation, and development, as well as backache and other problems. Therefore, the importance of standing straight in order to obtain better health should be well stressed. Can we stand straight in front of the judgment seat of God? (2 Cor 5:10; Rev 14:6-12; Dan 8:14; Heb 18:1, 2; Dan 7, etc.).

XIV. Smiling Face

Sunshine gives a smiling face to nature as well as human beings. It kills germs, increase the skin resistance as well as the red and white blood cells, improves the muscle tone, and aids the healing of wounds. Conversion gives a smiling face to the human being due to the peace it brings (Rom 5:1-3, HIl 4:4; Act 2:38; 13:19, etc.).

XV. You have too Much

Too much cholesterol is dangerous to the blood vessels, heart, brain, and the whole body. Keeping too much for self is stealing God's money (Mal 3:10-12; Hag 2:8; Ps 50:10; Gen 14:18; 28:22; Lev 27:30; Deut 14:22; Matt 23:23; 1 Cor 9:14).

XVI. Do What is Good

Exercise is good for the blood circulation, brain, heart, nervous system, and the whole body. God has given man special guidelines regarding the dress we wear, our diet, our recreation, our reading materials, etc. so that the physical, mental, spiritual, and social aspect of life will be able to grow in full balance.

XVII. You have a Choice

"The what, when, and where," of eating is a choice each
individual has to make in order to get a blessing or a curse. We have to develop a certain pattern of eating, after we have made the choice. Such is the case of choosing the true church. We all have to make a choice (Rev 12:17; 14:6-12; 19:10; etc).

XVIII. Need More Evidence?

The Bible, Science and the Spirit of Prophecy discuss the same topic, fully agreeing with each other regarding the holistic nature of man. All things have the same Author.

XIX. You Want to Grow

There is no growth without water. More water increases the human body's resistance to fight sickness. Water is the symbol of cleansing and the starting point of growth (Matt 28:19, 20; Mark 16:16, 17; John 3:5).

XX. Alive or Dead

Cancer has been the prime worry of many people, because some cancers are incurable. We have to be aware of symptoms and signs of the various types of cancer. The sin against the Holy Spirit is like cancer that cannot be helped; it is unpardonable (Matt 12:31-32).
SELECTED BIBLIOGRAPHY

Books


Periodicals


Kaan, F. "Indonesia, Church and Society." Reformed 31 (December 1971):368-402.


Reference Works


Unpublished Manuscripts


Miscellaneous


Hopp, Joyce. School of Health, Loma Linda University, Loma Linda, California. Interview, September 3, 1978.


________. "Historical Perspectives of Health." Syllabus, School of Health, Loma Linda University. Loma Linda, California, 1975.

________. "Keys to Health and Happiness." Adult Education Guidance, School of Health, Loma Linda University. Loma Linda, California, 1974.


Scharffenberg, J. A. "Heart Disease Preventive Cookery." Instructor's Guide. School of Health, Loma Linda University. Loma Linda, California, n.d.


Sie, Tiong Gie, (Mrs.) to Jonathan Kuntaraf, February 25, 1979.

Spangler, J. R. Loma Linda University, California. Interview, September 3, 1978.


White, Ellen G. MS 1, 1875, EGWRC.

White, Ellen G. MS 124, 1902, EGWRC.

White, Ellen G. to S., February 24, 1887.

VITA

Jonathan Winata Kuntaraf or Oey Giok Koen was born at Bandung, Indonesia, on June 7, 1947. He completed his elementary school education at Bandung public school in 1961. For his high school education he first went to S.M.P. Negeri I Bandung, and then to S.M.A. Negeri II Bandung. From here he graduated in 1967.

His being the only Adventist in his family after his conversion in 1964 helped him decide to be a minister of the Gospel. Therefore, he attended Indonesia Union College from where he graduated in 1971 with a B.A. in Theology. His ministerial internship was spent in Medan, and then he went to Kupang where he served as Bible worker and church pastor at the Seventh-day Adventist churches at Kupang and Airnona.

In 1974 he received a scholarship from West Indonesia Union Mission of Seventh-day Adventists to continue his studies, so he went to Philippines Union College, Manila and completed his M.A. in Theology in 1975 and Master of Divinity in 1977. While working on his Master of Divinity degree, he had the privilege of serving as associate church pastor of Manila Chinese Church for a year.

On August 6, 1978, he was married to the former Dr. Lie Kiem Hoa, or Kathleen Hanayanti Liwijaya, whom he had courted for seven years. Soon after his graduation from Andrews...
University in 1979, they went to Indonesia Union College, where Jonathan is currently serving as Bible Teacher, and Kathleen as college physician.