

For the Health of the Saints

JAMES O. MASON

Thank you, President Oaks. Brothers and sisters, I stand before you in all humility. I am numbed by the knowledge of the stature of those who have preceded me in these devotional programs and by the knowledge of those who will follow. I have a son who formerly was a student at this University and is now serving in the mission field and a daughter who recently was accepted for the Fall Semester. We're delighted that the University would confer that honor upon them, to accept them as students here. It's a great university, and you have an exceedingly capable President—President Dallin Oaks—a distinguished faculty, and an outstanding and unique student body. I pay a tribute to all of you who are here today.

I humbly pray that the prayer that was offered in my behalf by Dr. Whitehead will be fulfilled, because I deeply need the Spirit of my Heaven Father during the time that I stand at this podium. The title of my remarks will be "For the Health of the Saints." Peter stated that the Saints were "a chosen generation, a royal priesthood, an holy nation, a peculiar people" (1 Peter 2:9). And we have seen that in many ways the Saints are peculiar in terms of their health.

Not too long ago, there appeared in a publication of the University of California at Los Angeles an article with this title: "Striking Low Cancer Mortality Among Mormons" (*UCLA Cancer Bulletin* 1 [April/May 1974]). This article, by Dr. James E. Enstrom, reported that LDS Church members sampled who lived in Alameda County, California, during a 6-and-a-half-year period had a mortality rate only 55 percent as great as the total sample in that county. Then the article went on to state that for the entire state of California a comparison of observed to expected mortality for the year 1970 indicated that Latter-day Saints experienced only about 50 percent of expected deaths from all causes and from cancer of all sites. So, indeed, in terms of these California statistics, we are a peculiar people. Of particular interest, low rates occurred for cancer of the stomach, colon, breast, kidney, and other sites which have never before been clearly related to

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factors such as smoking. The article underlined the peculiarities of these Mormon statistics.

Another recent study indicates that Utah residents, who are about 72 percent LDS, experience total mortality and cancer mortality rates which are the lowest in the United States (Public Health Service, "Vital Statistics of the United States: 1969," unpublished data from computer tapes [Washington, D.C.: National Center for Health Statistics, 1973]). A third study with somewhat preliminary data indicates that the cardiovascular disease mortality rate among Los Angeles County, California, LDS Church members is roughly one-half of the rate for the entire Los Angeles County white population. James E. Enstrom, Ph.D., a nonmember of the Church who also made this study, stated, "Almost all forms of cardiovascular disease are lower than expected, and the total cardiovascular disease mortality rate for Los Angeles County Mormons as a whole is about the lowest of any substantial United States population group thus far studied" ("Cardiovascular Disease Among Mormons," to be published). Other statistics could be cited if necessary to illustrate my point—that Mormons are different from their non-member neighbors. What then does this mean? What are the reasons for these differences? Let me for the remainder of my talk mention four significant areas of Church involvement in health that I believe make us a peculiar people in terms of our health statistics.

Church Medical Facilities

The first area that I'd like to mention relates to Church hospitals and clinics. This is of great historical significance because when the pioneers came to the Great Basin there were no health care facilities, and the Church provided these services for the members as well as the nonmembers who lived in these communities. The Church first became involved in the operation of hospitals in 1882 and has continued to provide curative health services since that

time. Today the Church owns or operates fifteen hospitals and four clinics in Utah, Idaho, Wyoming, and Arizona. These hospitals range in size from 15 to 580 beds. They exist in urban and rural areas of these states. The hospitals include over 2,000 beds and employ 6,350 persons. There are 1,100 physicians serving on the medical staffs of these hospitals. In 1973 there were 104,000 patients admitted and over 360,000 emergency and out-patient visits to these fifteen hospitals. An interesting fact is that more than 19,000 babies were born in these hospitals last year, which is well above the national average for the number of beds comprising the Church system. We're proud of this record, and parenthetically I'd like to express appreciation to the married students here at BYU for their wholehearted support of this wonderful record. These hospitals operated by the Church are noted for the high-quality service they provide to members and nonmembers at a reasonable cost. Hospitals operated and owned by the Church are one significant area of Church involvement in health that relates to the wonderful Church health record.

Health Services Missionaries

A second significant area relates to the Church Health Services missionary program. Our Heavenly Father is concerned with the health and temporal well-being of members worldwide. Here in the United States, in Canada, western Europe, and many other countries, modern health-care facilities and well-prepared doctors and other professional people exist to take care of members when they have a health problem. However, in many parts of the world resources are lacking. In those areas where the Church is growing the fastest—parts of Latin America, the South Pacific, the Asian Rim—members of the Church sometimes experience overwhelming and unmet health needs. During the past three years, 136 doctors, dentists, nurses, nutritionists, home economists, and others have been

called by the Church to serve as Health Services missionaries. A total of ninety-six are currently serving in twenty-four missions located on the Indian reservations in the United States, in South and Central America, the South Pacific, the Asian Rim, and southern Europe.

Certain guiding principles are used by these Health Services missionaries in carrying out their work. First, they teach correct principles rather than provide “things.” They emphasize disease prevention through health education. They encourage wise utilization of local health-care facilities and resources. They correlate their activities under the priesthood and auxiliary programs. They complement the proselyting program of the Church. I wish there were time for me to explain the inspiration behind these guiding principles. I’d like to assure you that much good is being accomplished as a result of the efforts of these wonderful people, who give so generously of their time and their savings.

Might I relate one experience that illustrates what is being done as these Health Services missionaries serve in so many countries. Several years ago I had an opportunity to visit Bolivia. On the Altiplano, high above the city of La Paz, at an altitude of 13,600 feet on a beautiful Sabbath morning, I visited a Sunday school of one of the branches. I felt the spirit of those wonderful people as they met there. I watched a wonderful Sunday School president conduct with great ability. When one of the 2-and-a-half-minute speakers did not show up, extemporaneously he delivered the 2-and-a-half-minute talk. What a spirit I felt as he bore his testimony to the divinity of the gospel. And even though I didn’t understand his Indian dialect, I felt of that spirit and that testimony.

After Sunday School, this good man introduced me to his lovely wife, the branch Primary president. Strapped to her back was a little bundle—their six-week-old baby. When they learned that I was a physician, they asked

if I would come with them to their home to examine the baby to see if it was doing all right. I went with them down the unpaved streets to their little home. It was built of adobe brick, had a dirt floor, and was perhaps ten by fourteen feet—about the size of a single-car garage. As we went inside, I saw it was immaculately clean. One could feel the good spirit in that home. In addition to the parents and the baby, the family included two older sons.

The mother sat on the bed and began unwrapping the layers of blankets that she had placed around the baby to keep it warm. When the last blanket was removed, I looked down and gasped. There was a little baby that was no more than skin and bones. Untactfully I said, “What happened? Why is the baby so thin?” and then they explained to me how this mother had become very ill during the latter part of her pregnancy. There had not been enough food in that home to provide her with the nourishment she needed. She had developed all of the symptoms of what we here call toxemia of pregnancy. Somehow she had been able to give birth to that baby, but her sickness was so severe that she was unable to nurse. The family did the best they could. They bought a can of a dried-milk formula, but with an income that was barely twenty dollars a month (converted to United States currency), they couldn’t afford to buy more when the first can was gone. I asked them, “What are you feeding the baby now?” they showed me a baby bottle filled with fluid so diluted that I could have read newsprint through the bottle. The fluid contained only a few drops of milk from a tiny can of condensed milk. The can had to last three or four days. I gave them what instructions I could to help and, as I left their home, said to the branch president, giving him a few pesos, “Please see that this baby receives all the food that it needs.” I heard several weeks later from the mission president that the baby had died. It had gone past the point of no return.

Oh, if we could have brought it here to Provo to the Utah Valley LDS Hospital or to the Primary Children's Medical Center and started intravenous feedings and some of the modern techniques that we employ here, perhaps the baby's life could have been saved. But the baby had lived too long in that environment.

That was three years ago. Today in Bolivia nurses and a doctor, called as Health Services missionaries, are teaching through priesthood and auxiliary channels lessons on home nursing, care of the baby, care of the pregnant mother, nutrition, sanitation—a whole series of subjects that help people better understand how to stay strong and healthy. These health missionaries have investigated what local health resources exist that the people can use. They learned that this little family could have obtained milk from a source that was available in the community. And so today the Saints are being blessed through resources that exist locally that many didn't know about before. The Saints are being blessed in this far-off land through the Health Services missionaries. And in Guatemala, Thailand, Taiwan, and many other places here upon this earth, the devoted efforts of Health Services missionaries are being extended to lift up our brothers and sisters and their nonmember friends.

The Church needs more Health Services missionaries. Requests far exceeding the supply come in from the missions. May I just mention parenthetically that the same criteria for worthiness and self-sufficiency exist for the Health Services missionaries as for the proselyting missionaries. The duration of their call is eighteen months for sisters and couples, twenty-four months for elders. The method of call is identical to that of proselyting missionaries. Begin with your bishop or branch president if you have training and background and the desire to serve your fellowmen, to reach out and lift up those who need help so much. You are needed—whoever you are, wherever

you are—if you have a health background and a desire to serve.

The Word of Wisdom

A third significant area of Church involvement in health relates to the glorious revelation in the 89th section of the Doctrine and Covenants known as the Word of Wisdom. This revelation, given in the year 1833, was more than a hundred years ahead of its time. No document, whether it be a seven-hundred-page medical textbook or an article in a modern medical journal, contains any more useful or relevant information on how to remain strong and healthy. In light of the scientific discoveries that have been made during the last twenty or thirty years, the Word of Wisdom is a testimony to the divinity of the gospel and to the divine calling of the Prophet Joseph Smith.

In recent years, there has been little change in man's life span or progress in reducing infant mortality. Cardiovascular disease, cancer, accidents, and conditions of the lung and liver have taken the place of communicable diseases such as pneumonia, polio, and smallpox. Changes in longevity and infant mortality were significantly influenced by public health programs, such as providing clean, pure water for drinking, sanitary sewers, and immunizations for children. Today's leading killers do not respond to mass campaigns and to community projects.

Individual behavior, as never before, is directly related to good health. Abstaining from tobacco, alcohol, tea, coffee, and addicting drugs; emphasis on a well-balanced diet—particularly the use of fruits, vegetables, and wholesome grains and moderation in the eating of meats; fasting at monthly intervals; hard work and regular exercise; a positive, purposeful outlook on life; a happy family relationship; and peace of mind derived from a conscience free of guilt—all are powerful aspects of the gospel of Jesus Christ which strongly promote physical and emotional well-being.

In the Word of Wisdom, “given for a principle with promise,” the Lord said:

All saints . . . walking in obedience to the commandments, shall receive health in their navel and marrow to their bones;

And shall find wisdom and great treasures of knowledge, even hidden treasures;

And shall run and not be weary, and shall walk and not faint.

And I, the Lord, give unto them a promise, that the destroying angel shall pass by them, as the children of Israel, and not slay them. Amen. [D&C 89:18–21]

Brothers and sisters, so has it been. The statistics that I’ve given show how literally these promises have been fulfilled in the lives of the Saints at home and abroad. Yes, indeed, the Word of Wisdom is a principle with a promise.

The Healing Power of the Priesthood

A fourth significant area that affects the health of the Saints is the power of the priesthood restored in these latter days—a power that is unmatched, is incomparable in terms of what it accomplishes in blessing and bringing about miracles today just as they occurred in days past. You remember James, in the New Testament, declared:

Is any sick among you? let him call for the elders of the church; and let them pray over him, anointing him with oil in the name of the Lord:

And the prayer of faith shall save the sick, and the Lord shall raise him up; and if he have committed sins, they shall be forgiven him. [James 5:14–15]

And this revelation to the Prophet Joseph Smith is recorded in section 42 of the Doctrine and Covenants:

And the elders of the church, two or more, shall be called, and shall pray for and lay their hands

upon them in my name; and if they die they shall die unto me, and if they live they shall live unto me. . . .

And it shall come to pass that those that die in me shall not taste of death, for it shall be sweet unto them. . . .

And again, it shall come to pass that he that hath faith in me to be healed, and is not appointed unto death, shall be healed. [D&C 42:44, 46, 48]

And so in our days is recorded the promise that we can call in faith upon the Lord Jesus Christ with the power of the restored priesthood to bring to pass the same miracles that occurred while the Savior himself was upon the earth, among the Jews in Palestine and the Nephites on the American continent.

Consider the story of Lazarus, the brother of Mary and Martha. When Jesus came to Bethany, where they lived, Lazarus had been in the tomb for four days. As he came to the home and saw Mary and Martha and the rest of the mourners weeping, the scriptures record that Jesus wept. They led him to the tomb, where a large stone had been rolled in front of where the body lay. And then Jesus said, “Take ye away the stone.” Martha was concerned and reminded him that Lazarus had been dead for four days. Jesus replied, “Said I not unto thee, that, if thou wouldest believe, thou shouldest see the glory of God?” And then, with the stone removed, Jesus cried out with a loud voice, “Lazarus, come forth.” And he who was dead came forth from the tomb. He was covered by graveclothes and a napkin, as was the burial custom of the people. And Jesus then asked the astounded, weeping Mary and Martha to remove those clothes (see John 11:17–46). A miracle? Oh, how sublime, how poignant, how wonderful! And those same miracles occur today.

Consider the story of Peter and John after the ascension of the Savior. As they went into the temple, they saw at the gate a man who had been lame from birth sitting and begging

alms. Peter looked at him as they approached and said, "Look on us." The lame man must have expected a coin, but Peter said to him, "Silver and gold have I none; but such as I have give I thee: In the name of Jesus Christ of Nazareth rise up and walk." And then Peter reached down to that man who hadn't walked, who hadn't run, who hadn't leaped since his birth and lifted him to his feet (see Acts 3:2–11). Miracle? Oh, how wonderful! What a blessing! What an outpouring of the Spirit! What faith! What priesthood power! Brothers and sisters, I bear testimony to you today that that same priesthood power exists in The Church of Jesus Christ of Latter-day Saints and that it has a significant effect on the health of the Saints.

May I share with you an experience or two that I've had. Several years ago I was called to the Primary Children's Medical Center to see a nine-year-old boy. Three days before, he had complained to his parents of headache and not feeling well. They had noted that his little body was hot; he had a fever. For three days they watched and waited and hoped that he would recover, but he became increasingly sick. On the day he was brought to the hospital he had lapsed into unconsciousness, and the family realized for the first time how really sick he was. At the hospital he was examined by the doctors. The laboratory tests and the X rays were done. Then, because bacterial or spinal meningitis was suspected, a little needle was put into his back so that they could obtain a sample of spinal fluid to make an examination. As that fluid came out through the hollow hub of the needle, instead of being crystal clear like spring water, it was cloudy. When the fluid was examined under the microscope, one could see the pus cells and the bacteria. Yes, indeed, he was critically ill with bacterial meningitis.

That evening as I left that little boy in his room—unconscious, blood pressure falling, intravenous fluids started, massive doses of penicillin being infused through the

intravenous fluids—I had serious doubts that he would survive. I had doubts, if he did survive, that he would ever be normal.

Walking down the hall, I met that little boy's mother and father. The father said, "Doctor Mason, will you assist us in administering to our boy?" So I went back into that room. There the father and I exercised our priesthood in behalf of the little fellow. The father anointed his son and then asked me if I would seal the anointing and give a blessing. As we laid our hands upon that little boy, the Spirit of the Holy Ghost whispered to me, "Promise him he will recover. Promise him he'll have no aftereffects of this infection." And so in the name of Jesus Christ and by the power of the holy Melchizedek Priesthood that I held, I promised that boy that he would be healed. I promised him that he would have no aftereffects. As I left that room the second time that evening (even though earlier I had had grave doubts), after that manifestation of the Spirit, I had an assurance that was much surer than medical science or previous experience. I knew that he would live. And indeed, he did. His recovery was uneventful and complete.

Brothers and sisters, if time permitted, I could relate other accounts which lead me to believe with every fiber of my body that, although the Lord expects us to apply principles of modern medical science in our lives and although he expects us to be obedient to the Word of Wisdom, after we have done all we can, as members of The Church of Jesus Christ of Latter-day Saints we can call upon a greater power. Miracles are performed as a manifestation of the spiritual gifts that are part of this Church. All of you have had similar experiences with members of your family. These are sacred experiences, indeed, that we all cherish and that strengthen testimony already developed.

Some of you may ask, though, "Why are not the sick always healed? Why don't they always recover when we invoke the blessings

of our Heavenly Father?" I think the Lord has well answered that in section 42 of the Doctrine and Covenants: "And again, it shall come to pass that he that hath faith in me to be healed, *and is not appointed unto death*, shall be healed" (D&C 42:48; emphasis added).

We don't always understand the purposes and the wisdom of the Lord. Not too long ago, a great prophet was taken from our midst—a prophet who had the benefit of every knowledge and discovery known to medical science, a prophet who had been anointed and blessed, but did not survive. Why? "He that . . . is not appointed unto death, shall be healed." I think the significant thing is "And it shall come to pass that those that die in me shall not taste of death, for it shall be sweet unto them" (D&C 42:46).

We often poorly understand the purposes and wisdom of our Father in heaven. If we live properly, if we exercise our faith, and if we

exercise the priesthood, we have the assurance that right will prevail and that God's purposes will occur as they relate to a loved one who needs the help of our Heavenly Father.

Brothers and sisters, isn't it wonderful to belong to a church that has the solution to our temporal problems as well as the spiritual insights, laws, ordinances, and commandments that if we are obedient will lead us back into the presence of our Savior and our Father in heaven? I bear you my witness that our Heavenly Father is interested in our health and temporal well-being. I know that the Saints are blessed. I know that the priesthood has been restored and that we have modern revelation. I pray that we might have the courage to follow the voice of a prophet, to apply these principles, to exercise our faith, and to utilize our priesthood to bless others and ourselves. And I leave that testimony and my blessing with you in the name of Jesus Christ. Amen.