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Faith and Healing: The Role that Faith Can Play in Healing – Incorporating Both a Medical and Ecclesiastic Perspective

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Second Quorum of the Seventy, 1994-2000
and
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The Church of Jesus Christ of Latter-day Saints

Thank you for that kind introduction. The only part of the introduction that’s important is the last part – who my wife is, and about our children and grandchildren. When you have gray hair, like I have, you know that “you can’t take it with you.” But we can take out families, and that is all we really want anyway. It is a privilege to be invited to participate in this convention. I begin by extending my appreciation to all of you for the services you render. I’ve served in a number of capacities in the Church, and you and your counterparts received many referrals from me while I served as a Bishop, in several Stake Presidencies and as a General Authority. I pay tribute to your skills and your integrity and the healing that you provide to members and those not of our faith. You are part of an honored and respected profession.

I want to say a word about my current activities in the Bountiful Utah Temple. Of all the things I’ve had the privilege of doing, in and out of the Church, no other assignment has provided the peace of mind, satisfaction and sense of accomplishment that is associated with worshipping and serving in the temple. It is a crowning life experience for my wife and me. I’ve come to comprehend the significance of the healing that occurs in the temple. You would be surprised at the number of people who come to the temple specifically to seek the healing influence of the Lord. You might also not realize the amount of time patrons spend there, not only performing vicarious ordinances for those on the other side of the veil, but also meditating and pondering in the Celestial room. Many heartfelt prayers are offered. I know these prayers are heard and appropriately answered.

You might also be surprised to know how many names are included on the prayer roll of the Bountiful Temple. Those names represent the concerns, desires and prayers of members of the Church who see the temple as a source of healing in their lives and the lives of loved ones.

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The temple, of course, deals with eternity. I heard yesterday that one of the illustrious philosophers of this age, the late Woody Allen, said, “Eternity is very long, especially the end” (Allen, 1992). I think he really caught the spirit of it!

I’d like to begin talking about faith and healing from the perspective of the Church of Jesus Christ of Latter-day Saints by using two scriptures. The first is a statement the Savior made when he appeared on the American continent after his resurrection: “Woe unto him that shall say there can be no miracles” (3 Ne. 29:7).

The second is found in Ether: “If there be no faith, God can do no miracles” (Ether 12:12).

I testify that a God of miracles dwells in the heavens above and that miracles occur in the Church in these latter days. It is refreshing to see what is happening in health services regarding faith and healing. On March 14-16, I participated in a conference sponsored by Harvard Medical School, George Washington University and the Beth-Isreal Deaconess Medical Center on faith and healing. Representatives of Christian, Jewish, Muslim, and Buddhist religions participated.

A particularly large number of Protestant Christian faiths participated. All there were united in the belief that good health care services are not provided until both the scientific and spiritual dimensions of our existence are considered. The subject and content of the conference on faith and healing would not have taken place while I was attending medical school during the 1950s at the University of Utah, or doing an internship and residency at Johns Hopkins Hospital in Baltimore and the Harvard Medical System in Boston. We would have been labeled as quacks had I, or anyone else, been involved at that time in these discussions. Significant progress is beginning to occur in linking health care services and faith. Many medical schools have established departments dealing with faith and health care. It is refreshing to see what is happening across the width and breadth of this nation. I hope it continues.

In President Gordon B. Hinckley’s current book, Stand A Little Taller (2001), he quotes from James, chapter 5:

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. (James 5:14)

President Hinckley continues:

The power to heal the sick is still among us. It is the power of the Priesthood of God, it is the authority held by the Elders of this Church. We are indebted to the dedicated men and women of science and medicine who have conquered so much of disease, who have stayed the hand of death. I can’t say enough of gratitude for them. Yet they are the first to admit the limitations of their knowledge and skills in dealing with many matters of life and death. The mighty Creator of the heavens and the earth has given to his servants a divine power that sometimes transcends all the power and knowledge of mankind. (Hinckley, 2001)

That is the position of our Church. It has been the position since its restoration. We acknowledge that the Savior Jesus Christ healed using the magnificent powers he possessed. The Holy Priesthood is after the Order of the Son of God (JST-Heb. 7:3, Alma 13:7-9). The Savior healed in accordance with the faith of the sick and afflicted (Matt. 9:22), or the faith of those who asked him to heal loved ones (Matt. 8:6-10). The Savior healed by uttering a word or phrase, or by performing some act such as making a paste of spittle and clay (John 9:6). He instructed his disciples to lay hands upon the sick (Mark 16:18; Mormon 9:24). Healings occurred long before the earthly advent of the Savior. The Old Testament (Num. 21:8; 2 Kings 5:14) and the Book of Mormon (Mosiah 3:5; Alma 5:8) contain numerous examples of healing miracles before the time of Christ.

It is insightful to review the history of the restored Church regarding healing. In its early history, the annals of the Church are replete with examples of faith healing. The 7th Article of Faith, written by the Prophet Joseph Smith, states, “We believe in the gifts of tongues, prophecy, revelation, visions, healing, interpretations of tongues, and so forth.”

As a boy I was deeply impressed by an account I read in the Autobiography of Parley P. Pratt (Pratt, 2001), one of the early apostles of this dispensation. I would like to share that account which touched my heart and became the inspiration for my faith in healing. It was the beginning of my understanding that the Lord was concerned about our physical well being. Elder Pratt related this experience:

I accompanied Joseph Smith over the Mississippi in a skiff to visit some friends in Montrose, Iowa. Here many were lying sick and at the point of death. Among these
It is interesting to contemplate the marriage, so to speak, in the Church between health services and faith healing. President Brigham Young was skeptical of medical practitioners. He felt that the members should largely scorn university or academically-trained health professors. An 1849 edition of the *Millennial Star* gives some idea of the attitude of early Church leaders toward the medical profession:

The difference between the treatment of cholera by the LDS and those *learned ignoramuses* called doctors, may be easily perceived by the following: By a report of the Board of Health we find that at least two thirds of those who have been attacked by cholera have died, or in other words, helped out of the world scientifically. Whereas out of at least one hundred cases that have been administered to by the elders of the Church in and around Glasgow, only four have died. *(Millennial Star, 11,4, February 15, 1849, p. 62)*

Isn't that a wonderful scientific study – comparing healing through the Priesthood with health care outcomes obtained “scientifically”? We now recognize that at that period of time, even the best-trained doctors were unable to prevent and cure epidemics or diseases. They utilized phlebotomy, for example. That’s the last thing we would do today – bleed people who are acutely ill. They purged their patients with large doses of calomel, a mercury compound that is recognized as a poison today. Those were the major treatments employed by the medical profession at a time when a living prophet wisely warned, using my words, “scorn those guys, don’t get near them.”

Isn’t it interesting – it’s a testimony to me – to see what happened as medical care began to be placed on a sounder scientific base? About the time Louis Pasteur discovered germs and other scientists began to put the healing arts on a firmer basis, President Brigham Young altered his thinking. In the latter 1870s, he encouraged the Relief Society to sponsor sisters to attend Women’s Medical College in Philadelphia. Participants returned to Utah as doctors who particularly served patients with medical problems associated with childbirth and pediatrics.

**Health Services and Faith Healing Are Not in Conflict**

Understanding the conditions for exaltation helps our comprehension of how modern health services and faith
healing may interact. Nephi taught, “for we know that it is by grace that we are saved, after all we can do” (2 Ne. 25:23). Doing all we can to stay well or recover from illness should be our goal. The Word of Wisdom (D&C 89) is a certain foundation for health promotion and disease prevention. Many of the commandments contribute to the prevention of emotional illnesses and other problems you as a professional group deal with. Members embrace prevention and treatment while enjoying the blessings of faith healing.

At the conference on spirituality and health, I was asked where we start in the LDS Church: do we start with medicine or with faith? I answered that I don’t think Church members give it a second thought. Faith is the foundation from which they can reach out to providers of health services.

In this context I quote another statement by President Hinckley:

The history of this Church is replete with miracles of healing. I know that. I am confident of that. I recall once when I arrived in Hong Kong I was asked if I would visit a woman in the hospital whose doctors had told her she was going blind and would lose her sight within a week. She asked if we would administer to her and we did so, and she stated that she was miraculously healed. I have a painting in my home that she gave me which says on the back of it “To Gordon B. Hinckley in grateful appreciation for the miracle of saving my sight.” (Hinckley, 1997, p. 343)

President Hinckley apparently was uncomfortable with what the woman had written on the back of the painting. He told her, “I didn’t save your sight. Of course, the Lord saved your sight. Thank him and be grateful to him” (Hinckley, 1997).

President Spencer W. Kimball also spoke on healing:

A question often asked is “If miracles are a part of the gospel program, why do we not have such today?” The answer is a simple one. We do have miracles today – beyond imagination. If all the miracles of our own lifetime were recorded it would take many library shelves to hold the books which would contain them. What kind of miracles do we have? All kinds: revelations, visions, tongues, healings, special guidance and direction, evil spirits cast out. Where are they recorded? In the records of the Church, in journals, in news and magazine articles, and in the minds and memories of many people … The rationale says, many people are administered to and are not healed. This is true as it has been in all times. It was never intended that all should be healed or that all should be raised from the dead, else the whole program of mortality and death and resurrection and exaltation would be frustrated. (Kimball, 1982, pp. 499-500)

We read in the Doctrine & 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” (D&C 42:44,46). Those are the promised blessings of prayer and anointing the sick. If we had time, I suspect that each one of you could stand up and relate personal experiences related to faith healing. I certainly can – from my childhood growing up in a Latter-day Saint home, in my home with a wife and children, and in my practice. Members are careful about talking about sacred things because we are commanded “They shall not boast themselves of these things, neither speak them before the world: for these things are unto you for your profit and salvation” (D&C 84:73).

Faith is a prerequisite for healing, it is not a consequence of healing (Kimball, 1972). With some hesitation, I share an experience from my practice. One day I was called to see a nine-year-old boy at the Primary Children’s Hospital in Salt Lake City. The day before his admission to the hospital he complained of headache. He had a slight fever and his mother kept him home from school. The next morning she had a hard time arousing him and realized that this was not the usual problem that goes away by itself. She drove him to the hospital where the doctors that attended him observed that he was semiconscious and had a high fever. The boy’s stiff neck led them to suspect that he might have meningitis. A small needle was inserted between his vertebrae to obtain a sample of spinal fluid. The fluid was cloudy as it dripped into a test tube. It should be crystal clear, like spring water. After the fluid was spun down in the centrifuge and put under a microscope, many bacteria and white blood cells were present.

I had been asked to come to the hospital to consult on how to treat this critically ill boy whose blood pressure
was now falling. Massive doses of what we hoped wereappropriate antibiotics were started intravenously along with medications to maintain his blood pressure. As we left the boy’s room after we had done everything we could, I had doubts that he would survive until morning, and felt that if he did live, he would have lifelong impairment.

I met the boy’s mother and father in the hallway. They had been excluded from his room during the medical procedures. I told them the diagnosis, what had been done, and that the prognosis was guarded. The father asked, “Dr. Mason, would you help me administer to my son?” I said to myself, “I’m the wrong person, I have all these doubts about the outcome of this illness.” But, what could I say? I reentered the boy’s room with his parents. The father anointed the boy and asked me to confirm that sacred ordinance. Brothers and sisters, I put my hands on his head and the Spirit told me at that very moment – there was no question about the outcome, he would live and have no damaging after-effects. I blessed him to that end. As I left that room the second time my outlook was completely changed. I had felt the prompting of the Spirit and promised a complete recovery. The promise was fulfilled.

I am sure that the antibiotics helped, but there was a power greater than medicine that resulted in the boy’s rapid recovery. You and I can testify of other experiences of that kind. Some are more subtle, but there is no question that they occur.

In our Church, we recognize a number of sources of healing power. Prayer is one; I believe prayer is more commonly applied in healing than any other modality. Scripture study is another source of power. We turn to the scriptures for comfort and strength when we are troubled with matters of great concern. Partaking of the sacrament is another. How many thousands of silent prayers are offered during that quiet time while the bread and water, the emblems of the Savior’s atonement, are distributed and partaken of? I have already mentioned the healing influence of the temple and the temple prayer roll. The inspired counsel that Bishops and other Church leaders provide is a significant source of healing power. Fasting and the payment of fast offerings is another.

During the conference on faith and healing, common modalities ran through the talks given by the representatives of the various religions. Prayer, in one form or another, was common to all. The “sacraments” was a frequently used term by those of other religions as a source of faith and power. I am not referring to our sacrament, but a group of practices and ordinances that other churches observe. I found that there was little emphasis on scripture study by others. The Rabbi mentioned the Torah, but it was not in the context of scripture reading by lay members. There was no mention of the temple or fasting by the other religions. The only other mention of anointing with consecrated oil was by a representative of the Catholic Church (known as extreme unction).

I wish these talks had been available to me before I began practicing medicine. It would have been very useful had I better understood the belief systems of all my patients. I hope that those of you who are caring for those of other faiths will try to know something about their beliefs. Thereby, you can better assist them in focusing their faith. This is a marvelous way to help others – by recognizing and respecting their beliefs, and by assisting them to use their faith as part of your treatment.

I would like to conclude with some observations on faith healing as it relates to your profession. I hope you will forgive me because I am not an expert in the fields you represent. With acute diseases like cholera or typhoid fever, if one survives for a few days the disease is healed completely; it is over, one way or the other. This is not usually the case with the illnesses and conditions you encounter in your practices. Your illnesses usually take a chronic course, with ups and downs that are exacerbated by many factors. Let me illustrate what I am talking about by using diabetes mellitus as an example.

Diabetes is caused by either too little insulin being produced by the pancreas or by insulin resistance: the body may produce antibodies that inactivate insulin. This chronic disease may become acute and life threatening. When the life threatening stage is healed, the patient still has diabetes and must continue to take insulin and remain on a special diet. As you know better than I do, your areas of practice – including mental illness, addiction, alcoholism, abuse, gender confusion, and such things – are chronic, lingering problems. Healing the acute episode does not always eliminate the underlying chronic genetic or acquired pathology.

Is faith healing, with its various modalities, applicable to the illnesses and conditions you treat? My answer to that question is a loud and emphatic yes! Faith healing is not just applicable to acute physical conditions. Your areas of practice are also susceptible to healing by faith. Your patients may be healed immediately or over time.
The story of the Savior’s raising Lazarus from the dead (John 11:1-46) illustrates the marvelous extent of the Lord’s power to heal. After the Savior was taken to the tomb, He asked those with him to roll away the stone. Certainly it is easier to remove a stone than to raise the dead. The onlookers could handle that. But Martha was concerned. She explained that he had been in the tomb for four days, “by this time he stinketh” (verse 39). The Savior proceeded without any apparent hesitation or comment. In a loud voice he commanded, “Lazarus, come forth” (verse 43). And Lazarus emerged, still wrapped in burial cloths. The Savior said, “Loose him” (verse 44). Again, he allowed them to do what they could and used his faith and sacred power to do what they could not.

The power of God can bring forth a dead man who has lain in the tomb for four days. Then God can, if he wishes, restore pancreatic insulin producing cells and heal diabetes. He can also restore abnormal brain chemistry. He can fix anything that needs restoring. The power is there. A loving and powerful Heavenly Father, if it is in our eternal best interest, can and does repair those things that need it. He lets us move stones and take off burial wrappings, expecting us to do all we can before and after he intercedes.

I am impressed with a conference address given in 1992 by Elder Richard G. Scott. You are probably aware of what he said: “Unless healed by the Lord, mental, physical, or sexual abuse can cause you serious enduring consequences” (Scott, 1992, p. 31). This is also true of all the conditions you are asked to treat. The Lord is a partner in your profession.

Healing occurs in many ways – and faith is the foundation. Knowing that Heavenly Father and his Only Begotten Son desire to help and heal us builds confidence as well as faith. Recognize that God is the supreme healer who will not only heal but will also empower us to do so, using our skills and our faith.

I testify of the healing power of the Gospel. When we drink the healing waters of the Gospel of Jesus Christ, we are promised that we will never thirst. Ultimate healing occurs when we cast our burdens upon the Lord (Matt. 11:29). I have family members that suffer from obsessive-compulsive disorder. Medications help. However, a priesthood blessing, either with or without consecrated oil, brings refreshing relief from those acute, crippling symptoms. I know of the power of healing in the fields in which you practice.

I bear my testimony that you have a power within you that goes beyond your academic training, beyond your wonderful skills and professional experience. It flows from the Gospel of Jesus Christ and gives you the ability to go beyond yourselves and to assist patients to draw upon a divine source of power that can even raise the dead. I so testify to that, in the name of Jesus Christ, Amen.

References


