

**“Say aaah...men” (Li Xueying and Ken Kwek, ST Insight, 15/10, pS9)**

Proselytising in public institutions such as schools and hospitals has been in the news. Is it acceptable for doctors to try and save not just the body but also the soul? Should teachers be allowed not just to teach but also preach? LI XUEYING and KEN KWEK search for some answers

IN 2002, Mr Alvin Choo, 55, suffered a relapse of nose cancer and sought treatment at Singapore General Hospital.

Not only did his nose get attention, so did his soul.

During separate consultations, not one but three, oncologists urged him to consider Christianity.

Mr Choo, a lapsed Catholic who now subscribes to Buddhist philosophy, recounts: 'The first thing they asked was whether I was of any spiritual leaning. When I said no, they suggested that it was time to go to church.'

The first doctor, who revealed the bad news that his cancer had returned, told the retired general manager to kneel with him and pray.

Mr Choo refused, and later stopped seeing him.

The second doctor was 'very good - he spoke about God for just five minutes'.

But the third spent 30 minutes on religion - and five on medicine.

Says Mr Choo: 'I didn't stop him because he's my doctor and because my life is in his hands. I didn't want to antagonise him.'

It would appear that the experience of Mr Choo, who wrote to The Straits Times Forum Page earlier this month about his encounter with the first doctor, is not an isolated one.

Three other readers also wrote in, recounting experiences with evangelical Christians, this time in schools.

Their letters sparked a lively debate; another dozen letters were sent to The Straits Times while the Internet buzzed with postings.

In Singapore, where religion and race remain sensitive topics, there is uneasiness in some quarters about Christians who are perceived to be over-aggressive in promoting their faith. One area where it is felt more acutely is when proselytising takes place in public institutions such as government schools, hospitals or offices.

Up to half of teachers here are Christians, according to the website of the Teachers' Christian Fellowship, whose members 'yearn to see a closer link between our church-based spiritual life and our ministry in school'.

Given that evangelism is a key thrust of Christianity, how might Christian teachers and doctors discharge their evangelical duty without undermining their professionalism?

Potential problems

Beyond anecdotal evidence, it is hard to determine how widespread the practice of evangelising in government schools and hospitals is.

That it happens and poses potential problems is certain. For while it may be well-intentioned, it is not always conducted in an appropriate manner.

Take the case of a National Junior College (NJC) student whose physics lecturer invited his class to a Christmas party and conducted a prayer session. That sounds harmless enough, except that he also attaches Christian phrases in his tutorial notes and has asked students to church.

Says the student, a free-thinker: 'Even though I respect his religion, I am usually irritated as he seems to spare no thought for students who aren't free-thinkers or Christians.'

NJC principal Mrs Virginia Cheng feels that this is a 'grey area', but adds that students who are uncomfortable 'should raise the issue with us and we will advise the teacher against it'.

The phrase 'grey area' might apply more appropriately to evangelising at mission schools. Some point out that those who enrol their children in such schools must accept the values these places uphold.

Even then, not everyone sees it this way.

At CHIJ St Nicholas Girls' School, a Buddhist student claims: 'During exams, my principal will say if you don't pray to God now, you won't get good results. So I just follow, and say my Hail Marys.'

But the school's vice-principal, Mrs Goh Kok Chan, insists it does not impose Catholicism on its students, adding 'that 80 per cent of our students are non-Catholic shows that we are able to respect each others' beliefs.'

In public hospitals, evangelism takes two forms:

One, when medical staff evangelise to patients.

Two, when religious groups make unsolicited visits to wards and attempt bedside conversions.

They especially target terminally ill patients, in the belief that their souls should be 'saved' before they die.

Madam B.K. Lim, 40, an office cleaner, was recuperating from brain tumour surgery at SGH a month ago when she was approached by a distant relative and two of the latter's church friends.

Her daughter, who was present, tells Insight that 'they just grabbed her hands and started praying very loudly in Hokkien.

'My mother was very uncomfortable, and kept looking around at the other beds in embarrassment. But she couldn't reject them since their intentions were good.'

Despite the accounts of unwelcome evangelising that were related to Insight, Singapore's two medical clusters say that they have never received such complaints.

Both the policies of SingHealth, which oversees SGH among others, and the National Healthcare Group (NHG), which oversees Tan Tock Seng Hospital among others, are clear. Staff cannot engage in any type of religious canvassing activities, including dissemination of religious literature.

SingHealth said it has, on occasion, sent reminders to its doctors to refrain from such activities.

Not often enough, it seems. A Buddhist leader says that bedside conversions have become of 'grave concern' to his community.

'Anecdotally, many Buddhist families are affected by this,' says the Venerable Kwang Sheng, secretary-general of the Singapore Buddhist Federation.

He urges the Government to review whether schools and hospitals need clearer guidelines on proselytising and bedside conversions.

In the civil service, the lines are also drawn clearly.

Says Dr Ong Toon Hui, Director (Personnel Policy) of the Public Service Division: 'Civil servants must not act in any way that can give rise to any perception that they have any special advantage through their official position.

'This covers interactions between senior and junior officers, and officers will be disciplined for any misconduct.'

Unclear picture

WHILE official rules may be laid down in black and white, the picture on the ground is not so clear.

To begin with, not all patients are uneasy with such activities.

Miss Nur Nabilah, 33, a cancer patient at SGH, says that doctors should 'be allowed to reach out to patients as a human being, not just as a professional'.

'Sometimes patients need all the help they can get'.

There is also general agreement amongst doctors that patients who have a religious faith tend to recover faster.

Says Dr Imran Nawaz, 47, a Muslim GP: 'When it's appropriate, I will tell patients, if you believe in God, it might help to pray. A doctor must care for a patient's emotional well-being too.'

Dr Teo Ren Shang, 26, a junior SGH doctor who deals with cancer patients and is a Buddhist, says: 'If they're struggling with their last breath and it's very painful, I'll couch it in terms of their religion. With a Christian, for instance, I'll say, let go, see the light of Jesus.'

The Christian Medical and Dental Fellowship, an 'inter-denominational, evangelical fellowship of Christian doctors and dentists', tells Insight: 'Under no circumstances should doctors abuse the professional relationship with the patient and compel a patient to embrace a certain faith'.

But its chairman Dr Goh Wei-Leong believes that 'in a friendly atmosphere', the doctor can share his religious faith when the patient asks.

The Teachers' Christian Fellowship past chairman Irene Phoon says that when discussing religious issues, 'some teachers do refer to what they personally believe without imposing this belief or belittling the views of others'.

While Christian doctors interviewed say that they do not evangelise themselves, they are unwilling to condemn peers who do.

Says Dr Lucien Ooi, 43, deputy head of surgical oncology at the National Cancer Centre: 'I won't do it. But is it unethical? If you ask a Christian, there's only one way out - and that's salvation through Jesus.'

Some feel that doctors at public hospitals and teachers of government schools should be free to evangelise to their charges - after office hours.

Dr Lisa Koh, 26, a junior doctor at Changi General Hospital, will sometimes visit her patients after work and ask to pray with them.

She admits to being ambivalent about what she does: 'I cannot say that it's completely correct ethically.

'But I'm not trying to convert patients, only trying to offer them solace. Besides, I'm doing it as a friend, not as a doctor.'

Others say that even outside office hours, it is impossible for patients to separate a doctor's or teacher's professional status from his personal conduct.

This is something that many institutions recognise and try to pre-empt in their rules for staff. Both NHG and SingHealth stress that they do not allow their staff to evangelise to their patients - even when they are off-duty.

Says an NHG spokesman: 'To the patient, you'll always be seen as their doctor, period.'

### Complex issues

THERE are complex issues of ethics and power at the heart of public officials' evangelism in or outside the workplace.

The fact is that doctors and teachers occupy positions of authority. Doctors hold their patients' lives in their hands; teachers influence young minds and decide their grades; bosses hire and fire.

As Dr Tan Yong Seng, 46, heart and lung transplant director of the National Heart Centre, and a Christian, puts it: 'I'm always aware or concerned that patients will think that I'm using my special position to get an advantage.

'Patients may worry that if they don't follow what you say, you won't treat them. This is a potential fear, though I doubt it's a real one.'

It is also unethical, some say, to try and convert those in a vulnerable lifestage, such as dying patients and young students.

Venerable Kwang Sheng, who is also temple abbot of Kong Meng San Phor Kark See Monastery, objects to conversion attempts on those 'who are not adults, cannot speak, or are too ill to have a clear mind or are emotionally unstable.'

Several religious groups that spoke to Insight maintain that they never enter hospitals and hospices without first getting patients' permission.

Reverend Kong Hee, City Harvest Church founder, says that his Ministry to the Terminally Ill - which aims to 'share the love of God' - never makes unsolicited visits, and church members only visit relatives who 'ask us to pray for them or uplift their spirits.'

But Mr Mohamad Razi, 46, a security guard at Dover Park Hospice says that small evangelical groups have tried to gain access by latching on to visitors.

'It's only later, when I'm doing my rounds, that I see them trying to preach to patients. In such instances I have to turn them out,' he says.

At the end of the day, religious groups must bear in mind one fact: schools and hospitals are public institutions.

They operate in spaces that Singapore's diverse communities collectively share.

And it is because these common spaces are kept strictly secular that racial and religious harmony can be maintained.

While some may prefer the boundaries between public and private spaces to be fluid, it bears remembering that a healthy exchange of views - including religious opinions - can be accommodated only if, paradoxically, these spaces remain secular.

What religious heads, govt say

## NO CONVERSION TARGET IN SCHOOLS

THE Catholic Church does not seek to proselytise in schools or through doctors. We have the responsibility of sharing the good news of Jesus to everyone. But it doesn't mean that we force people to follow our faith.

'Parents register their children with Catholic schools, and understand that they will be open to learning from the perspective of life that comes from being Catholic. While we will encourage everyone to attend school masses, we also respect those who don't want to. Parents who do not wish their children to do so can write to the principals.

'In class, a teacher may talk about God during lessons. For example, when teaching geography, they may say, look at the mountains, the plains, how wonderful God made the world. They use general terms like 'God' which can be applicable to all religions, instead of saying 'Jesus' which is specific to Christianity.

'Our schools don't have a target of setting out to 'convert' students. But we do hope that we can touch everybody with the joy of our faith.' MONSIGNOR

EUGENE VAZ, who is vicar general, No 2 in the Catholic Archdiocese of Singapore

## EMBRACE FREEDOMS IN RIGHT CONTEXT

'SINGAPORE adheres to a code of religious harmony and religious freedom. This includes the freedom to choose religion, and the freedom to deliver religion.

'However, these freedoms must be embraced in the right context.

'Muslims - like Christians - believe that their religion is best for them. But they should not then assume that those who do not share their faith will necessarily embrace their religion. That distinction must be made especially in the workplace. So institutions such as the secular schools must remain places for acquiring secular knowledge.' -- HAJI ALI HAJI MOHAMED, chairman, Khadijah Mosque

## PATIENTS' RELIGIOUS VIEWS IMPORTANT

'WE HAVE always maintained that evangelism is part of our Christian faith. If you're a good Christian, you have to tell others about Jesus Christ.

'But we have to do that with great sensitivity, especially in our multi-cultural, multi-religious society.

'I disagree with people who use their professional relationship which gives them an advantage to push their faith onto others, whether it's a doctor-patient or teacher-student relationship. That's unethical.

'But I think that if there's an over-reaction to such cases, we may lose out in other fronts.

'We will build walls and erode communication between people of different religious faiths. People will not be willing to talk about religion at all, and I don't think that makes for a healthy, open society.

'I am a medical doctor myself, and you cannot actually divorce faith and religion from health issues.

'When you're treating patients, their religious views are important and need to be taken into consideration.

'That dimension will be cut off from the process of healing if we get to the stage where talking about religion is complete anathema... But if the doctor brings up the issue, and the patient is uncomfortable, then I think a line has been crossed.'  
-- METHODIST BISHOP DR ROBERT SOLOMON, who is also a medical doctor

## MUTUAL RESPECT FOR ALL RELIGIONS

'MOH expects all healthcare professionals, whether they are in the private or public sectors, to conduct themselves in a manner that upholds the integrity of their profession, do not abuse the special relationship that they have with patients, and to exercise mutual respect for all religions.

'The Singapore Medical Council's Ethical Code states that 'A doctor is obliged to provide access to medical care and treat patients without prejudice of race, religion, creed, social standing, disability or socio-economic status. A doctor shall not allow his personal beliefs to influence his management of his patients.' ' --

STATEMENT FROM MINISTRY OF HEALTH

## TEACHERS SHOULD BE GOOD ROLE MODELS

'THE MOE takes a firm stand on religious proselytising by teachers.

'Our schools are secular, and teachers should not be engaged in proselytising their students. Otherwise we face a real risk of undoing the multicultural and multi-religious sensitivity and harmony that Singapore has built up over the years, and which our schools seek to cultivate in each new generation.

'Teachers are expected to be good role models for their students, including being sensitive to other religions and cultures, and teaching them respect for their parents.

'Mission schools cannot compel any student to attend mass or religious instruction against the student's wish.' -- STATEMENT FROM MINISTRY OF EDUCATION