

By Dr Jeremy Lim, Editorial Board Member

IS 'GOD' IN?

One of my fondest memories of Johns Hopkins was attending service on Sundays in the hospital. It was poignant to worship with fellow doctors, nurses and allied health professionals and especially with patients and their relatives. Somehow it drew hospital staff and their patients closer together as they shared the celebration of a common faith and the bond of 'human-ness' before God. I particularly remember an oxygen-dependent elderly lady who was wheeled in by a therapist and a nurse and the gratitude written on the faces of her relatives towards the hospital staff who had made the special effort to bring her. "You don't know how much this means to my mother," I heard whispered.

In Singapore, we pride ourselves on being a multi-racial, secular society where religious harmony prevails. All symbols of religion are conspicuously absent from public buildings including public hospitals but does being secular mean the absence of religion? A secular hospital need not mean shying away and expunging all traces of religion from the hospital; it can also mean welcoming the diversity of religious beliefs in Singapore and accommodating them equally on our premises.

Hopkins adopted a pragmatic but also very human approach to the potentially explosive issue of religious practice in hospital: it was fair to all religions. A medium-sized conference room along a major passage way was designated as the 'religious' venue and all the major faiths had designated slots to host their religious events. Thus, there was a two-hour slot for the Jews, time allocated for the Protestant service, a Sunday morning window for the Catholic priest to celebrate mass and so on. A small room, simple but very tastefully done with no overt

religious displays, was set aside for patients and relatives to spend some quiet time with 'God'* or simply for self-reflection (Hopkins now also has a dedicated Muslim prayer room). I enjoyed starting the day with some prayerful moments there and was always pleasantly surprised that I was rarely alone.

Should our public hospitals follow suit? A cursory 'Google' search of other countries' practices reveals that Singapore public hospitals appear to be in a minority and that prayer rooms and religious services are commonplace in hospitals from Australia to North America. Sceptics may argue that we will run the risk of inflaming religious tensions. What if the early Sunday morning mass runs overtime and eats into the time allocated for the Protestant service? What if the singing or worship is too loud? Will the hospital CEO, a devout Christian, be accused of proselytising? No doubt genuine concerns but if our core mission is to help patients get well psychologically/emotionally as well as physically, then the more pertinent questions to ask would be "Will at least some of our patients value and benefit from the opportunity to worship as a group?" and "Will spiritual nourishment contribute to our patients' recovery?"

The staff perspective further reinforces the call to action: we ask our doctors, nurses and other hospital staff to forego their Sundays in the name of patient care. Will our Christian doctors and nurses answering the call of duty appreciate the possibility of attending Sunday service?

If the answer to any of the last three questions is an unmitigated 'Yes', then perhaps we should overcome our own fears, open the doors and let 'God' in. ■

Editorial Note:

*The term 'God' is used here not in relation to any particular religion but in the general context of a higher being.



Dr Lim is Director, Policy and Research for Singapore Health Services and heads the health services research programme for the cluster. This commentary is contributed in his personal capacity.