

The Church in Indonesia

BY W. DEAN BELNAP, M.D.

At age 65 I retired as medical director of a national hospital chain of psychiatric inpatient and residential facilities. Sister Belnap and I indicated to the Missionary Department of the Church our availability to serve a medical mission. Through various channels, we were approached by the Asian area presidency, who with Elder Neal Maxwell were anxious to once again open up Indonesia for the admission of non-native missionaries.

With 190 million people, Indonesia is the fourth most populous country and the largest Islamic nation in the world. Since declaring independence from the Dutch in 1945, it has had a long struggle for survival, cohesiveness, and freedom—including that of religion. Once a pauper among nations, Indonesia has joined the emergent middle class. On the road to achievement, however, it has had some major challenges to overcome. Church members have shared and are currently experiencing those challenges.

During the 1960s, a communist coup lasting six

months was followed by a takeover by the Indonesian military headed by General Suharto. Elected president of Indonesia for five consecutive terms, Suharto has led the government for the past 27 years and engineered major socioeconomic changes in a country that has become a growing force in the global scene.

Under a new constitution, churches were allowed to develop and follow their patterns of worship. Missionary efforts became aggressive by several Christian churches.

Elder Ezra Taft Benson of the Quorum of the Twelve dedicated Indonesia in 1969 for the proclaiming of the gospel and organization of The Church of Jesus Christ of Latter-day Saints. Formal proselyting began in 1972 with a large force of elders and sisters trained at the Missionary Training Center (MTC) in Utah. Initially under the jurisdiction of the Singapore Mission, Indonesia soon became an independent mission. The Church grew rapidly to 4,000 members by 1981.

During the 1980s, after the Iranian Revolution, however, the Indonesian government became concerned with the steady erosion of the percentage of members of the Islamic faith due to Christian conversions. As a result, all Christian churches with active proselyting programs were expelled from the country.

For the 11 years prior to our arrival there in 1992, all proselyting by nonIndonesians and all building construction for the Church had been stopped. The missionary force and its leadership were all natives of the country; one of the native leaders in Indonesia served as a counselor in the presidency of the mission, which had returned to the earlier jurisdiction of the Singapore Mission.

In 1991 the Church was among nine Christian churches relicensed by Indonesia's cabinet-level Department of Religion. One of the department's stipulations was the church's commitment to humanitarian welfare services in the country.

The General Authorities of the Church wanted to use a physician to offer such service. They made arrangements with a Christian medical organization in Indonesia to allow a physician and his wife to obtain visas from the Indonesian government. My wife and I were asked to work with that Christian medical organization in part-time medical service. Correspondence followed, and my credentials were approved.

At the time of our call there was no Indonesian language training at any MTC. However, through private tutoring from Indonesians who had immigrated to the United States and Americans who had previously served missions in Indonesia, Sister Belnap and I were able to study Bahasa Indonesia, the national language, for seven months before our departure.

I was set apart as counselor in the Singapore Mission presidency and assigned to reside in Indonesia. On arrival we acquainted ourselves with the physician in charge of the Christian medical group, Pel Kesi. Relationships were immediately favorable and the service agenda mapped out. The government, however, refused the request for a visa and indicated that "foreign physicians were not allowed, because they would take jobs away from Indonesians." Without a visa we could not remain.

But fasting and prayer inspired an alternate role that ultimately not only opened the door for outside missionaries to come into Indonesia but also removed obstacles of Church building construction and allowed for the opening of new Church units.

The impression came to us to seek out the appropriate department in the University of Indonesia School of Medicine. Physician contacts led to a meeting with the heads of the Departments of Psychiatry and Pediatrics. They were gracious and cordial and invited us to dinner at their homes. Conversations about qualifications and

needs led to my giving two seminars in those departments. I had my mission office translators interpret the seminar material into Bahasa Indonesia. Following the presentations, the medical school invited me to join the faculty as a visiting professor. Relationships were optimal and led to friendships for a lifetime and hopefully for eternity. These warm and receptive people soaked up ideas and recommendations for programs like a sponge.

We were able to establish the concept of multidisciplinary communication and relationships between the child psychiatrists and the Department of Pediatrics. They had not previously enjoyed mutual insight and good interdisciplinary consultation; when an exchange was requested in the past, it was formal and written only. They were delighted to feel the value of interdisciplinary diagnostic evaluations, staffings, and follow-up using the same team model.

Psychologists, social workers, communication disorder specialists, occupational therapists, and special educators were housed in a separate campus 10 miles outside of Djakarta. We were able to bring some staff members from those facilities into the medical school in central Djakarta.

I wrote up and gave presentations on the university public radio and television stations about outreach programs for education on pediatric and psychiatric subjects. Various ecstatic faculty members joined with me, enjoying the experience immensely. This type of public information dissemination had never been tried before by the medical school.

Residents in training in pediatrics and also psychiatry were assigned to me not only for their education but also to assist me in lectures. I delivered regular lectures and seminars in Bahasa Indonesia with their assistance and with their translation help where necessary.

Our work with clinics and schools for the developmentally disabled became known to the Indonesian Cabinet of the Department of Education. I personally worked with the minister of education in several programs. My past experience as a member of the Utah State Board of Education and the Presidential Advisory Council for the U.S. Department of Health and Human Services, as well as for the U.S. Department of Education, were invaluable. The Indonesians were most receptive in being guided into the concepts of team diagnosis and prescription through individual educational planning. They asked me to deliver the keynote address to their National Convention for Special Education in the Djakarta Convention Center. During our mission I also delivered papers at the annual national meetings for Pediatrics, Psychiatry, and Psychology, including the All-Asian Conference for Child Development hosted in Djakarta.

During the 25 years he led the government, President Suharto of Indonesia had noted a deterioration of morals

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and values, especially among youth. He requested programmatic recommendations from religious organizations and churches to help solve the problem of an ever-widening generation gap between adults and youth. In the name of the Church, I was the first to respond to the president's request and submitted a program for morals and values education—over my signature and those of our four Church district presidents and those of some of our members who had held government positions. This resulted in doors opening to the cabinet departments of religion and to what is comparable to our U.S. Department of Health and Human Services. During this next year we will be publishing a “generic version” of the material for both Muslim and Christian youth and their parents.

I continue to be involved with ongoing programs with the Department of Psychiatry at the University of Indonesia. There are only 280 psychiatrists in the country, where restrictions of funding for resident training has been a major impediment. I suggested to my colleagues in the department faculty that we establish a rotating itinerant program with large multispecialty clinics throughout Indonesia. These are often operated for Indonesian and American employees of large oil, mining, and agricultural companies owned and operated by Americans. I continue to make biannual trips to Indonesia to follow-up on a program that has been able to fund and double the number of residents in training.

I have been able to arrange for a one-year postgraduate training in the United States for one of the resident physicians who assisted me at the University of Indonesia. That experience will prepare the physician to take over the medical directorship of a new school organized in Djakarta for children with learning disabilities and attention deficit disorders.

Perhaps the most important and critical reason for being led by the Spirit to the university affiliation instead of the Christian medical group was my association with the present head of the Department of Psychiatry. After we had been in Indonesia for eight months, the government released the former head of the Department of Psychiatry, who had so graciously brought me onto the faculty. He is ethnic Chinese-Indonesian, and the government felt that he had a majority of ethnic Chinese on the faculty (the Chinese/Indonesian conflict is a story in itself).

I had noted over our months of association that the professor who was the new department head had been more reserved and more cool toward me than the other 13 faculty members. We had enjoyed a healthy exchange of ideas about our various religious affiliations with all of the faculty. Everyone in Indonesia is required by law to have a declared religious affiliation. The new professor told me, after his appointment, that he was most curious

about my Church membership. He confessed to two issues of import: first of all, he thought “Mormonism was a fanatical cult”; and secondly, he indicated his chairmanship of a government-appointed committee of “intellectuals” selected 11 years previously to justifiably support the government in its expulsion of outside Christian missionaries. He also recommended that our partially completed future stake center for Djakarta be stopped in its construction at that time.

He told me that he was misled in his thinking before getting to know me and learning about our church. He promised to help and would see that all roadblocks for missionary involvement and building construction would be eliminated and used his influence to do just that. The future Djakarta stake center is now completed and dedicated, and two other chapels are under construction in other areas of the country.

We have been able to gain admission for several couples and several single missionaries from outside the country, with the government issuing them social visas. Each missionary is expected to give 10 hours per week of social welfare service. We were able to integrate them effectively with our average force of 45 native elders and sister missionaries; they have all set a model for Indonesian members to give similar voluntary service. More importantly, all three missions of the Church are more adequately served in leading people unto Christ.

We initiated the Church program of welfare service set up to handle a load of acute and chronic health problems and welfare and educational needs, affecting up to 25 percent of the total membership. The Asian area presidency integrated our program with the Church program of welfare. Translations of Church welfare programs into Indonesian were well accepted by the government Department of Religion.

During our tenure in Indonesia, Sister Belnap and I visited each of the units of the Church, covering 3,500 miles every two months. We were met after each visit or conference session by as many as two dozen members with chronic illnesses and special needs. I saw many illnesses I had only read about in medical school. Underemployment and lack of finances restricted many members from travel and participation in Church activity and also prevented them from providing funds for the education of their children. Forty percent of the member children were not attending school because of inability to pay the U.S. \$1.50 per month for elementary age and \$2.50 per month for secondary school tuition. Half of our native missionary force had not completed high school.

We were able to set up branch and district welfare committees to solve these seemingly overwhelming problems and needs. With the help of choice missionary cou-

ples admitted into the country from the U.S., Europe, and Australia, we were also able to establish training and service programs to aid us in this effort. In addition, government agencies and medical facilities were made available to us.

The law of the fast was more vigorously emphasized. After a year of development, the 5,000 members of the Church in Indonesia have built their own fast offering funds and are now independent in their welfare service needs. Initially dozens of requests per month for welfare assistance were submitted. The average branch now receives only three to four requests per month. All of the children are provided schooling. Unit activity has increased, and many branches have doubled.

The Church leaders in Indonesia have been able to establish Yayasan Liahona, a foundation separate from the formal organization of the Church. With government approval, they are able to make loans with nominal interest for specialty educational training as well as for start-up capital for small business. Co-op groups are formed for mutual support and the money returned goes back into the foundation. Such programs are becoming popular and helpful all through Asia.

Sisters are able to establish cottage industries in their homes, allowing for care of children while supplementing family income. Brothers and sisters are educated in business organization and provided funds for start-up capital not otherwise available. The dignity of work, rather than reliance on a dole, has been established following Church welfare principles.

Senior missionary couples assist with the welfare programs, aided in their proselyting and leadership training by native members who act as translators.

English language and computer classes are very popular with members. Nonmembers are often invited to join classes, and many become interested in learning about the Church as well.

It has been a great joy to see special needs met through the power of the priesthood and by medical, social, and educational resources. As the Church missionary force has focused on spiritual needs of the members, it has put the spiritual energy to work on the social problems in the community. This effort has been observed by Indonesian government agencies and has opened many doors and prayerfully will continue to do so.

One of the unexpected "open doors" has come in the area of family history. An American aeronautical engineer, brought into Indonesia to assist with the national aircraft company, and his wife were called as family history consultants for Indonesia. The couple, both certified genealogists, had been previously assigned to work on the Irish royal lines for the Church.

Touring all 19 branches and four districts of the Singa-

pore Mission every six months, they assisted the saints in procuring tens of thousands of names for the temple. In a remarkable way they were able to obtain all of the records of 13 of the 23 royal and sultan lines from various islands and provinces of Indonesia. About a quarter of our members had genealogies that tied in with these lines.

One of the former Indonesian missionaries from the U.S. had become expert in translating early Javanese and Arabic records. These royal lines dated back to and beyond the Arabic invasions of Indonesia in the 11th and 12th centuries. He was able to translate all of those records.

We knew that the other 10 royal lines were in the Indonesian National Archives. We had accumulated millions of names on microfilm from the Church microfilm team in Indonesia. Previously we had been blocked from access to the National Archives for microfilming.

We were able to arrange a brief appointment with a national archivist and present her with a copy of all of our genealogy records, including the four volume set of the *Encyclopedia of Mormonism*. She was very pleased that the 20-minute interview had turned into a two-hour visit with a personal tour of the library and archives. At the end of our meeting she offered us the privilege of microfilming all the records in the archives. Hence, we now have access to all of the royal and sultan lines, many of which go back to Mohammed and on back to Adam and Eve.

We had the temple endowment translated into Bahasa Indonesia. In conjunction with the Annual Mission Presidents and Leadership Seminar in Hong Kong, the area presidency allowed me to take the district presidencies and their wives through the Taiwan Temple. I was able to administer the ordinance work in their language. Since then, more than 200 members have gone to the Manila Temple, and tens of thousands of names have been submitted to the temple for work for the dead.

English-speaking members in Indonesia branches have cooperated with Indonesians in building a fund to help members to go to the temple. Many spiritual experiences have been forthcoming.

We loved the work. We were awed, as anyone, by observing the hand of the Lord in building his kingdom in the nation of Indonesia. Sister Belnap and I had previously served in a presiding capacity in the British Mission, and we found this administrative assignment to be radically different but equally enjoyable. We look forward to serving another full-time mission in the future. □

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