

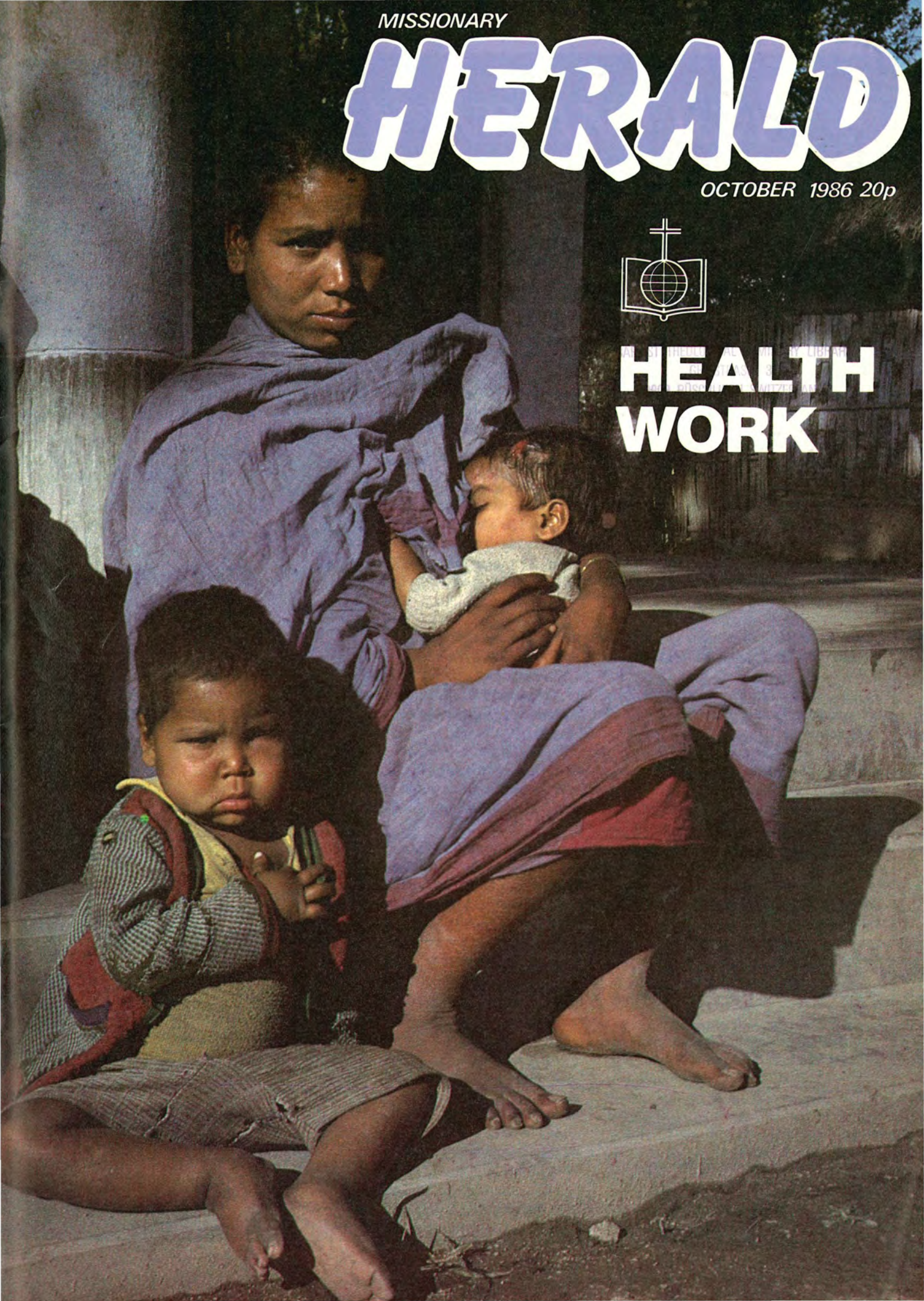
MISSIONARY

HERALD

OCTOBER 1986 20p



HEALTH WORK



Editorial Comment

IT's hard enough for some of us to feel part of the British church scene never mind developing a global vision. The programme and life of the local church seem to take up most of our time and energy so that there is little left to develop links with the wider church. 'Association, missionary, ecumenical and other work is best left to the enthusiasts,' is the way many people think.

Yet there is no doubt that we miss out if we narrow our vision down. It's not that we are doing the wrong thing in buckling down to a good job of outreach and service in our own localities, but rather that we could do that job much better if we took seriously our family ties within the world-wide Church. There is so much to share with our fellow Christians, and perhaps a great deal more to learn as well.

We talk so glibly about the 'cost of discipleship', but is it really costing that much? When you think of the hazards of travel in a country like Zaire, the length of time, often days, it takes to visit isolated villages and communities and the willingness of folk to go out on evangelistic or community health trips, it puts the use of our time in some sort of perspective.

It may be difficult to witness as Christians and to hold on to Christlike standards in face of the different values we find in society, but remember your Christian brother and sister in Asia — members of a minority group — who often face downright opposition, the possibility of being ostracized by family and community, and, in some case, the threat of imprisonment.

And then there is the question of giving. Most of those who are linked with us through the BMS are poor, yet how generously they give out of their poverty! Is it easier to give when you only have a little, but have often known what it is like to have nothing?

Gift and Self Denial marks the end not only of October, but also the end of the BMS year and the beginning of another. Will you take this opportunity to look again at your world-wide Church family ties and to ask, 'Just how much is it costing me to be a disciple of Christ?'

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MISSIONARY HERALD

THE MAGAZINE OF THE BAPTIST MISSIONARY SOCIETY



OCTOBER 1986

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We share in the work of the Church in:

Angola	India	Sri Lanka
Bangladesh	Jamaica	Trinidad
Brazil	Nepal	Zaire

Rev Stanley J Samartha, a minister of the Church of South India, is a Visiting Professor at the United Theological College, Bangalore. He is a former Principal of Serampore College and was the first Director of the Dialogue programme of the World Council of Churches, Geneva, Switzerland.

AN INDIAN VIEW OF COMMITMENT AND TOLERANCE

In recent editions of the 'Missionary Herald', British visitors to India and a former BMS nurse in India have written about the Indian church. Its need for self sufficiency, its struggle with identity, its place in a Hindu society are among the issues raised. The following article is taken from a speech by Rev Stanley Samartha, an Indian minister of the Church of South India. Addressing the Convocation of Serampore College he is speaking to the Indian church, but is this a message that we in Britain need to hear as well?

IN India at the moment the struggle of oppressed people for a life of freedom, self-respect and dignity is gathering momentum. The secular framework of the country seems to be under strain because of an inability to provide creative space for more harmonious inter-religious relationships.

Ours is an ancient civilization and a young nation. Under new leadership, a new political culture is in the making that seeks to cleanse public life of its entrenched evils. Attempts are being made to strengthen the unity and integrity of the country. We are moving into the 21st Century with a mixture of hope, anxiety and a determination to solve some of the most persistent problems in the life of the nation.

Pluralism

The plurality of religions, cultures and ideologies, of ethnic groups, languages and customs, has been the mark of our country for many centuries. No other society in the world has been more pluralistic for a longer time in history than India. The Church in India is in a

very different situation from that in some other countries in the world where such a plurality does not exist or where it is only recent and marginal to the mainstream of life. Plurality belongs to the very texture of our life together. To forget this is to ignore the rhythm of life around us and within us

These reflections will deal with religious pluralism because it is in the encounter between different religious traditions that commitment and tolerance become both urgent and serious. They influence the attitudes of different communities towards each other in the life of the nation. Throughout history religious intolerance has caused untold suffering to human beings.

Commitment without tolerance becomes fanaticism. Tolerance without commitment slips into indifference. Questions emerge in the critical space between commitment and tolerance. Is it possible to be *committed* to one's faith without being intolerant of other faiths? Or, is it possible to be *tolerant* of other faiths without diluting one's

own commitment? In a pluralist society every religious community faces this dilemma. At this time particularly when making religion a political issue threatens the unity and integrity of the nation, Christians cannot afford to ignore this matter.

Truth and Justice

There are different kinds of commitment and degrees of tolerance. In life, there are different values to which people are committed. Sometimes they overlap. Sometimes one excludes the other. When they are not too serious, adjustments may be made and people learn to live together with those who hold different convictions. But there are certain areas of life where one commitment excludes others. In personal and public life, truth cannot tolerate falsehood, nor honesty falsehood, nor compassion cruelty. Where there is injustice, commitment to truth has to be translated into justice.

In the depths of religious life the tension between commitment and tolerance becomes serious, often an unbearable fire within one's consciousness. This is because religious commitments touch ultimate questions about God and the Mystery of existence. In matters of faith, not just theological beliefs, but also emotional, spiritual, social and cultural factors are bound together. There is a network of meanings, patterns of behaviour,

rituals, symbols and tradition that together give an identity to community of faith.

Tolerance

In a pluralist society, inter-religious relationships become an encounter of commitments. To ask a people to give up their commitment amounts to asking them to commit spiritual suicide. For one religious community to seek its own extension through the extinction of other communities is to diminish rather than enhance the total life of the larger community. In a pluralist society tolerance should become an expression of genuine neighbourliness.

In matters of religion, the relation between tolerance and intolerance becomes more complicated. In Hinduism there is a theological tolerance that affirms that all religions are equally valid pathways to God, but this is mixed up with a great deal of social intolerance, particularly where caste and untouchability are concerned. In Christianity, there is a theological intolerance that claims only one way to be valid, but this is combined with a social tolerance where the equality of individuals is concerned. The ability of any community to enhance life rather than diminish it depends on how it is able to tolerate dissent within itself and how it relates to people who hold different religious beliefs or ideological convictions.

In India during the decades since independence, a *secular* tolerance has developed. In practice this has come to mean 'equal indifference' towards all religions. This can be defended because in a pluralist society, with so many powerful religions competing for the allegiance of people, the secular state provides the only viable political framework for life together as a nation. This should be guarded and cherished.

There is, on the other hand, a *religious* tolerance which is the result of a double failure – the failure of any single religion to conquer the others and the failure of all religions to move beyond sterile co-existence. This is a tolerance of the dry desert not of the green orchard.

Christian Commitment

What then of Christian commitment and Christian tolerance in our pluralist society in India?

Christians believe that Jesus Christ has revealed the love of God to the whole world and has provided a way of salvation for all people. To be touched by Jesus of Nazareth, his life, work, teaching, his death and resurrection, is to experience salvation as from God. To be saved by Jesus Christ means to be reconciled to God and to our fellow human beings. It is to be delivered from the bondage of sin into the glorious liberty of the children of God. Christian commitment in the world is not to Christianity as a religion nor to the church as an institution, but to God in Jesus Christ. God alone is worthy of total human commitment at all times and in all places.

Christians in a pluralistic society witness to the One who is always with us (Matt 28:20) who is present where two or three are gathered together in my name (Matt 18:20), where human needs are met without making any demands on people (Matt 25:37-40) and who is recognized in the simple act of breaking bread (Luke 25:30-31). To witness is to confess our faith without condemning others. It is to make positive affirmations about our faith without making negative judgements about the faith of our neighbours. When we witness to our neighbours, we should be open to their witness to us. Otherwise it cannot be mutual witness. Christian witness does not lead to any compromise but demands co-operation with all our neighbours who are struggling against the forces of death and who seek the fulness of God's life which, to us Christians, has come in and through Jesus Christ.

To the depth of Christian commitment should be added the breadth of Christian tolerance. Commitment and tolerance are held together in Christian obedience to the twin commandments of Jesus Christ, *You shall love the Lord your God with all your heart, and with all your soul and with all your mind and with all your strength* and *You shall love your neighbour as yourself. There is no other commandment greater than these* (Mark 12:30-31).

SEEING

Nepal

OUR first sight of Nepal was from the window of the Royal Nepal Airlines Boeing 727. The view was of the long, snow covered range of the Himalayas set against a clear, blue sky. Then descending into the Kathmandu Valley there were the hillsides, terraced for cultivation to a high level.

We found the Nepali people small, smiling, kind and helpful. But their beds were short and made of solid wood, and their seats were small!

We went to a 'Sunday church service', which took place on a Saturday, and walked along the raised footpaths between the rice fields to the upstairs of a house. Shoes were left outside. We sat down on the floor with about 45 Nepalis and five westerners and remained seated for the two hour service. Men were sitting on one side of the room and women on the other. No musical accompaniment, a lay pastor, a language we could not understand – but we were unmistakably in the presence of God.

Kathmandu was a city of contrasts. A family in their shanty hut living below the large advertisement hoarding for video recorders.

Nepal appeared to be a country in need of assistance. The fields were full of manual labourers. There was one trolley-bus route, built by the Chinese,

FOR OURSELVES



Margaret and John Corbett were able to visit Nepal and India a few months ago just to see for themselves. Now they too are missionaries about to leave for a period of short term service in Zaire.

and the blue buses were labelled 'Japan-Nepal co-operation'.

Right amongst the medieval living conditions of most of the Nepalis is the modern hospital built by the United Mission to Nepal at Patan. Both through the work of this hospital and other institutions and through the work of the Nepali Christian Church itself the message of Jesus is spreading.

India

We only had seven days before moving on to Calcutta. The main purpose of our visit was to stay with Margaret's twin sister, Pansy James, who serves with the BMS in Cuttack, Orissa.

As the light faded on a Sunday evening in Calcutta we had to walk carefully

along the pavement. Under each sack was a sleeping person and the remaining space was reserved for drying cow-dung.

By contrast, minutes later, we were inside Lower Circular Road Baptist Church — brightly lit, fans, public address system and the service in English.

Then later we made our way over Howrah Bridge, the busiest bridge in the world, to Howrah Station, which is also the sleeping quarters for a few hundred Indians.

Cuttack

After eight hours we watched the red sun rise over dusty plains just before our train arrived, at 7 a.m. at Cuttack.

Soon we were in a cycle-rickshaw, the Indian rider straining at the pedals as he took us the mile or so to Buckley House, a huge building and a reminder of the days when the British were in India. It was once occupied by several BMS missionaries, but now the only BMS missionary in Cuttack is Pansy James.

However the rooms in Buckley House are in full use. There are frequent visitors on church or missionary affairs and several girls from the various colleges also live there.

Downstairs is used for the Stewart



View of Calcutta from BMS Guest House



Margaret Corbett and girls visited in India

School Nursery Classes and school offices.

We found a lot to do in Cuttack — visits to colleges and schools of the Church of North India, the Rice Research Institute, watch England play cricket and several talks with the Bishop of Cuttack.

Berhampur

One hundred miles south is the Christian Hospital for Women and Girls at Berhampur, where Betty Marsh is the BMS doctor. Here we saw many happy mothers with their babies, but also, sadly, a malnourished young mother with a very small baby who would not survive for long. There was not the staff, the special food and equipment necessary for such children.

Udayagiri

When we went up to the Kond Hills to Udayagiri, we received a lovely welcome. As we emerged from the Morris Oxford (series III) we were covered with garlands of sweet scented flowers. Here we saw the hospital, schools and girls' hostel. We ate with the girls. Sitting on the floor we used our right hand to eat the rice and other unknown food from the leaf plates — also on the floor.

Balliguda

Sixty miles further into the hills is Baliguda, the frontier of Christian work, which is now performed entirely by Indian Christians. Here is a boys' hostel, which it is hoped to make self-sufficient in food with the help of Operation Agri.



Circular Road Baptist Church, Calcutta, India

Life in the hills is so different from that on the plains. Our driver, and possibly the car, had not been up a hill before. This came to light when he stalled the engine on a hill and we discovered there was no cable on the handbrake. Handbrakes are not used on the plains. The car is simply parked in gear!

Conference

We travelled back to Cuttack on a very over-crowded country bus. There was no need to hold on to anything as we bumped along. There were so many crammed into the bus that no-one could move!

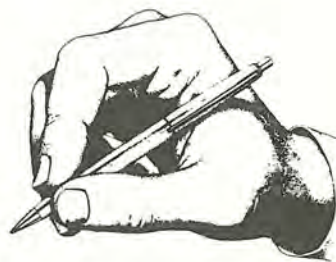
Back in Cuttack we met many more Christians from all over India and neighbouring countries at the Missionary Conference of the Union of Evangelical Students of India.

It was a privilege to share worship and instruction with about 1,500 others, mainly young people. What an encouragement to realize the wealth of talent and leadership there is amongst Christians here. There is no need to be disappointed about the difficulty of sending missionaries to India. We heard the Gospel preached there in Cuttack, both at the conference and in the local church, by their own leaders and pastors. We found out that the churches in India are very much alive, but they face an enormous task as a minority in an over-crowded country.'

When we compared our comfortable church-life back home with the enthusiasm and excitement of that conference and with the warmth of fellowship and love given to us by all the Christians we met, we felt we had much to learn from our experiences.

The real India for us was made up of a great variety of people. People everywhere, crowded in the streets and on the buses and trains, in rickshaws and riding three or four on a bike or scooter. Ten per cent of the world's population lives in India and sometimes it felt that they were all staring at us! Most people were friendly and happy, the Indian Christians in particular gave us a warm welcome. We thank God for the opportunities we had to worship and share with Christian friends there.

REFLECTIONS



PLANTING A MISSIONARY . . .

Missionaries are often out of sight, out of prayers. Although not intentionally, people do forget their churches' emissaries around the world.

Calvary Church in Miami, Florida, used an unusual reminder. At the annual missionary conference, they lined the platform with small potted plants. A lollipop stick with the name of one of their missionaries, written in indelible ink, was inserted in each pot. A florist from the church donated the plants — a type that demand watering daily — and another individual donated pots and soil. Volunteers potted the plants.

At the closing meeting of the conference each person was encouraged to take home a plant. As these plants were watered daily throughout the year, the missionary whose name was written on the stick was remembered and prayed for.

. . . ON A SLOW BOAT TO KINSHASA . . .

'It was an unforgettable experience, writes Yvonne Errington. 'The steamer — the *Kokolo* — is a beautiful boat, one of the best. It was towing two huge barges on its left-hand side and another two on its right-hand side. In front it was pushing another two older type steamers, so we really were a crowd of people. Some estimated there were 3,000 people on board. Some people lived permanently on the boat. They were part of the floating market, selling peanut butter, bread, types of tea, material, fish, etc. Other women were

Some people actually became so involved with their missionary plant that if it wilted, they prayed for the missionaries all the more until the plant was vibrant again!

(Altrinham Baptist Church)

buying as much fresh or smoked fish as possible to sell it in Kinshasa. The boat had enormous cold storage rooms.

'For many of the villages that we passed, the river steamer was their main source of trading. The villagers paddled frantically in their canoes to the moving boat, risking their lives to attach their canoes to the side of the boat. Bringing fresh or dried fish for sale and buying their basic needs, such as flour, soap or medicines from the boat. I saw one canoe nearly overturn as it approached the steamer. The man attached his canoe to the boat and bought one loaf of bread! Imagine risking his life for a loaf of bread! Many of the riverside villages were built on stilts, very picturesque houses, usually made of palm leaves and beautifully woven together.

'We were on the boat seven days altogether. It resembled a floating church at times since we had a service each day. Before each service, people walked around the boat encouraging others to come to the service. On Good Friday, there was a particularly lively service. We joined in the dancing and the hand clapping. We had many opportunities to give out tracts and we saw the people studying their Bibles and using their tracts. It was encouraging to see small groups of people having their own Bible Studies and discussions. After the service, Brenda Earl and I placed ourselves in strategic positions to give out tracts. We were almost submerged by the crowds of people demanding tracts. There is such a shortage of literature that every small tract is appreciated. Our boat trip was certainly an interesting experience.'

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DIACONIE

by Ruth Clinch



THE Diaconie is the committee appointed to be in charge of the gathering and distribution of funds allocated from the offerings of the International Protestant Church of Kinshasa. Much of the money comes from the English speaking parish with a contribution from the French speaking parish.

The committee was made up of Zairians with Judith Brown and myself giving assistance, mainly with handling the accounts. Most of the clients can only speak French and I can converse in French.

The committee inquires into the needs of those who ask or beg for money, and makes inquiries where possible on the validity of the requests.

These are the notes I made one Tuesday evening in March 1985.

We have just finished working at the Diaconie. Only Judith and I were there today, the other committee members had gone to join the Chorus singing at the funeral of the Papa of the Christian Choir. Les Herillers (the inheritors).

At the beginning of the formation of the Diaconie in 1982 the amount of money available for us to use was very little, probably about 800 zaires a month, about £16 then. We sometimes

received gifts of bags of rice and second-hand clothes. Judith and I discussed the fact that many more people in the European and American sector would give money if they could be assured that it would reach the right people intact. This giving, sadly, would only take place if the money was to be handled by an expatriate. At the time that I came back we were handling on average 10,000 zaires a month, and also had donors to whom we could go with specific requests. We were able to pay for operations, to buy new velos (tricycles), to buy artificial limbs and to give needy people a bag of tinned goods to set them up in a little shop.

We got out the box of records we keep on each client. There were the usual requests.

A man who wants tools and a little kiosk in which to repair watches.

'Do you know how to repair watches?' Help refused.

A leprosy patient who came to Kinshasa for treatment and now cured needs help with his fare home.

'Where is your village, do you want to go by boat or lorry?' Request granted.

He is then put in touch with a Zairian Catholic Brother who will buy the ticket on our behalf and will actually see the man onto the boat or lorry.

Help to repair a (Velo) tricycle damaged in a crash. A huge *maman*, with no life in her eyes.

'Yes, it certainly has been in a crash, were you hurt?'

Well, we don't usually do repairs, but as it was an accident I will go to the Centre for the Handicapped and arrange to have it repaired and we will pay. Call in at the centre next Monday.

One of our clients stole 50z from us.

6.30 pm and night has fallen, a man comes to my door, showing me his broken plastic sandal, he wants 50z. I give him a piece of string.

Another day finished in Zaire.

Do not imagine an office where the



International Protestant Church

Diaconie meets, with armchairs, desk and files. We meet in the quadrangle of the Church and School building. Some benches are carried out into the cool shade, a table, our box of record books. The committee bow their heads as someone asks a blessing on our work and we are ready.

I happened to be at the school one afternoon and, seeing what was taking place, wanted to join in. I could speak very little French and even less Lingala, and was the odd-job girl. Trotting to and fro to fetch bundles of clothing from the office, sitting and filling bags of rice or maize flour, buying tins of sardines and soup. Gradually I found myself in charge of *velo* repairs. Who would have thought that time spent cycle racing and learning cycle maintenance was training me to work with the *velo* of the severely handicapped in Africa?

One day, I said to myself: 'We give these people food for their bodies, we show our joy in the receipt of the Love of the Lord in our service but we do not teach them how to come to share His saving love.'

I prayed and thought.

I practised sentences in French. 'Do you know the Lord Jesus.'

'Do you know that He loves you.'

'We have a gift to give away freely that is much more valuable than rice and soap?'

'The gift of everlasting life glorifying God.'

Now, if it's the choice between knowing the Lord and not knowing the Lord that gets you a bag of rice — well, yes of course you know the Lord!

I went home and prayed and thought.

What am I to do Lord? They are so black, mostly men, so frightening, sometimes so grotesque. Am I to preach to them? Am I to gather them around me like infants and read them a Bible story in Lingala? Me a middle-aged primary teacher. The Lord didn't seem to reply.

I continued to pray: 'Lord if this is what



Some of the Congregation at the International Protestant Church

You wish me to do I will do it and I know You will guide me and enable me to do it.' Despite the knowledge that the Lord would indeed do this I was very nervous, anxious and didn't look forward to Tuesday.

My agitation increased when Tuesday came, was this really what I had been sent to Kinshasa to do? To teach the Word to these people, forced to turn to begging by their handicap, literally the outcasts of city society? Then one of the team led us in prayer. It immediately shone through, that was not my role. Here was somebody already prepared, with a better knowledge of the language and the Bible than me.

After the prayer I spoke out, hesitatingly in my French. 'We are feeding their bodies with earthly food — we should be giving them Heavenly food.'

Once the people of the committee understood what I was saying they were in complete agreement. They would take it in turns to lead a short act of worship each week.

And so, after that, a little group of ten to twenty beggars made their way into the church hall, some dragging useless legs along the ground, some walking legless on their hands or blocks or tins to lift their bodies clear of the ground, some old women, some obviously pregnant, to hear the Word, in their

own language. I greeted as many as I could with a handshake, to sing choruses and to pray in their own language. And I went and sat in the service, silently praying for them all in my own language.

In Zaire physical disability is thought to be a punishment or curse. A parent or relation did something bad, and this malformed child is the result, and so the physically handicapped are cast out of the family and consequently society. However, many of our clients were victims of a polio epidemic about ten years ago. The illness has robbed them of the use of feet, legs or hands. Consequently the only way they can survive is to use this disability to invoke sympathy and pitying gifts. I generally found them good natured, even when I told them that we had given them their three weeks of help. I found them caring for one another, often a *velo* was loaned or another passenger carried on the foot board and I often had reason to be grateful when someone was willing to translate my crude French into gentle explanatory Lingala.

They are not the starved beggars of Ethiopia or Bangladesh. I never saw one who was frail or weak, but they are entitled, as much as anyone else, to be shown the Love of the Lord at work in Zaire, and as much entitled to receive the message of Christ's love for us as any of those sitting in the churches each week.



Worlds Apart WORKING HEALTHY

The hospital runs several clinics for children under five, incorporating vaccination programmes and health education.

'The hospital also directs work of several village dispensaries. Each of the rural dispensaries is self financing and they also run clinics for under fives, ante-natal clinics as well as providing health care and health education.

'Unfortunately due to a lack of vaccines and an incomplete cold chain within the interior, there is no adequate vaccination cover for the majority of children within the Zone at the present time.

'This is something we wish to rectify especially just having seen the devastating effects of a measles epidemic in many villages close to Bolobo. In some villages up to 50 children died as the result of measles and its complications. These children had not had the opportunity of receiving the measles vaccine. In Bolobo itself, the effects were much less severe due to the vaccination programme carried out by the under fives' clinics.'

With community health programmes

health workers, those who can teach, those who can organize. As Christians involved in health care, we have a greater incentive than those organizations working purely on a secular basis in that we believe that Jesus Christ has asked us to do His work and that He has provided us with the necessary skills and strength.

'Also we believe that all people are equal in the sight of God and so why should those that live in the Third World have less access to health care than those of us living in a more developed country?

Looking at the main problems . . .

'At Bolobo hospital there is a clinic for patients suffering from tuberculosis and leprosy. There is a family planning clinic which is still gaining acceptance with the local population, but the number of people seeking help is increasing.

'HEALTH for All by the year 2000' is the guiding slogan for the World Health Organization. How far are we in reaching the goal? Is there still a need for medical missionaries? Richard Smith, BMS nurse in Bolobo, views the problem from a Zairian town hospital.

'I would not like to say we will achieve what the World Health Organization would desire. Perhaps we will have made more inroads and more improvements in the health care of the people in our Zone. In the foreseeable future, we still need the help and expertise of expatriate

art...Health

ING FOR A Y WORLD



receiving much attention in the western press, the plight of hospitals can be overlooked.

... too institutionalized?

'People often ask why we as missionary nurses become so embroiled in the hospital institution, why don't we get out and around more? One of the reasons in Bolobo is this. Organizations like Peace Corps, Tear Fund and Oxfam — any of the organizations who send out folk for a two or three year period, short term service, insist that their people work exclusively in community health care projects. They are not interested in the hospital. They want solely to push and be involved in community health care. Therefore, we are virtually obliged to stay tied to the hospital in order to maintain the service because nobody else wants to work in the hospital. Now I happen to like working there! Please don't misunderstand me!

'I am not saying that we don't need community health care programmes — of course we do! It is extremely important and vital to the health of the people of Zaire.

'What I am saying is that we need a balance between community health and hospital care to be solely and exclusively committed to one without the other is not being realistic.

Health as the last resort

The whole pattern of patient care is very different from Britain.

'People often come to the hospital as a last resort. They have tried all the local traditional cures and when that doesn't work they will come and try the "white man's" medicine. Unfortunately, they often arrive too late. This is especially true of malnourished children.

'The families try everything and everyone else first, they then arrive at the hospital expecting us to perform a miracle and when we can't produce the miracle, the child dies and the problem is compounded.

'Western medicine doesn't work either. If only we could break down the traditional barriers and get the families to bring their children earlier before it's too late.

Yet in spite of the problems, people do come to the hospital and many of them do get well and do go back into the community and resume their normal lives.

'We often say at Bolobo that in spite of all the difficulties, in spite of our own lack of expertise in many areas, the Lord in His graciousness blesses our efforts.'

HEALTH IN THE

... so the baby needs a check-up?

Janet Kerrigan spends some of her working time with Ante-Natal clinics in Chandraghona, Bangladesh.

'The Tuesday clinic held in the hospital tends to attract the "relatively" better off people as they are willing to pay the 20 taka (50p) needed to be seen. Although we have a poor fund that pays for the treatment of anybody who cannot afford to pay, few if any of the poorest come to the ante-natal clinic. Those who do come tend to be women with bad obstetric histories - either difficult births or perinatal deaths in the past. It would be most unusual to see a woman having her first child for instance. Child birth is too everyday an event to warrant going to the hospital just for a check-up.

'The Monday village clinic is part of the Under-5 programme co-ordinated by Sue Headlam, but on this day we only see the mothers. Those who come are mostly poor but not exclusively - most being happy to pay the 1 taka needed for their medicine. This is often just worm treatment and vitamin tablets but in all cases we try to ensure that they get a triple injection of Tetanol before the birth in an attempt to avoid the all too common sight of either mothers or their babies with tetanus - as it is the general practice of the village birth attendants to cut the cord with a piece of bamboo or a dirty old blade.'



Family attending clinic

HEALTH STATISTICS

	Life Expectancy at birth	Hospital beds	Physicians
Angola (8 million)	37 (male) 40.1 (female)	306 per 100,000	6 per 100,000
Bangladesh (97 million)	70.8	833 per 100,000	76 per 100,000
Brazil (131 million)	61.3 (male) 65.5 (female)	488,323	68.1 per 100,000
India (740 million)	52 (male) 50 (female)	75 per 100,000	26 per 100,000
Jamaica (2.5 million)	65 years	6,299	700
Nepal (16.5 million)	42.2 (male) 45.0 (female)	2,586	420
Sri Lanka (15.5 million)	68 years	44,029	2,889
Trinidad (1.2 million)	54 (male) 56 (female)	99,177	27,241
Zaire (31.3 million)	46 (male) 49 (female)	291 per 100,000	2 per 100,000
United Kingdom (56 million)	70.2 (male) 76.2 (female)	894 per 100,000	153 per 100,000

... 'Just take two tablets and a large piece of wood. ...'

Sue Headlam is nursing at Chandraghona. She has responsibility for the Under-Five's Clinic. She writes, 'One of the children who came to the clinic during their stay was Rafiq Ulla. He is five and a half years old. He had come to the clinic three months previously with a large piece of wood through the thick part of his ear - not the lobe. His mother told us that Rafiq had had a sore throat and the village witch doctor put the piece of wood through his ear as a cure. At that time I advised removal to the Mission Hospital, but she hadn't gone. So here they were at the clinic again. I was amazed the child hadn't died of tetanus already.

'Once again I said that it must be taken out. The mother said, "No." She was terrified. The witch doctor was so powerful, and she daren't disobey him. Out of fear she refused and we were aware of the force of superstition. One thing we could do was pray. Silently we all prayed believing in the power of Christ, and I talked with the mother. Suddenly the woman changed her mind! Immediately one of the clinic workers pulled the wood out of his ear. We gave him antibiotics and a tetanus toxoid injection.

'I've seen the mother at the clinic several times since and she had never mentioned the incident again. We were reminded again of the power of the Gospel over the power of superstition and evil.'

HEALTH STATISTICS

Angola (8 million)	182 per 1,000 live births
Bangladesh (97 million)	28.3 per 1,000 live births
Brazil (131 million)	92 per 1,000 live births
India (740 million)	139 per 1,000 live births
Jamaica (2.5 million)	26.3 per 1,000 live births
Sri Lanka (15.5 million)	37 per 1,000 live births
Trinidad (1.2 million)	15.3 per 1,000 live births
Zaire (31.3 million)	117 per 1,000 live births
United Kingdom (56 million)	13.3 per 1,000 live births

... so you want to nip round to the surgery?

Lyn Bulkeley is a doctor at Yakusu, Zaire. He is involved in planning and setting up dispensaries to fit in with the aim of a Health Centre within walking distance of everyone by 1990. He writes,

'Some drugs and a lot of

equipment have now arrived and need to be distributed. However, in some cases, dispensaries have yet to be repaired and made fit for use in villages where they have got into a state of disrepair and all this takes time and organization. The

monthly visits to our own dispensaries continue. Last month's trips round Yalamba, Basoko, Bandu, Yangambi and others revealed that all had got into debt. Currency devalues all the time making the struggle for nationals to make ends

meet no easier. For so many there is barely enough for food to eat so that it's not surprising when they can't pay for medicines, particularly when you realize the rice and coffee crops both failed due to changing rain patterns.

THIRD WORLD



Line-up for Clinic at Chandraghona, Bangladesh

... so you need a simple blood test?

Janet Wilson needed a blood test when she lived in Upoto, Zaire. It proved to be quite an experience. She wrote,

'The test could only be carried out some hundreds of miles away at Kimpese. On our second attempt to get a blood sample sent there, we spent a large part of the morning waiting for the doctor to arrive at the Lisala office of the local vaccination programme. We left the blood to settle and Ian (her husband) arranged to pick it up later. There were no vehicles available that afternoon, so he borrowed an old pushbike and set off, going over the handlebars as the mud guard fell off, and smashing the thermos flask of ice cubes. Back home to fix the mudguard and

find another flask and more ice. The chain kept coming off on the ride to Lisala, and when he got there, the office was closed. There was no nurse at home so it was back to the doctor who consented to open up the office. The blood had not separated and there was no electric current to centrifuge it. Ian walked back the four miles trying not to disturb the sample any more. Once at Upoto, he and the dispensary nurse centrifuged it in a hand machine. The resultant serum looked rather pink but nevertheless we packed it in ice and off it went with the missionary passenger on a three day boat trip to Kinshasa. I'm glad to say that it eventually arrived intact and the result was good!

LEPROSY TREATMENT TODAY

'With early and regular treatment, leprosy can be cured,' says Dr Bob Hart at Chandraghona. That is the message we are passing on to our patients and their families, to all health workers and to the general public.

If we can start treatment at an early stage of the disease there is every chance of cure without any of the complications and deformity which were so common and distressing in the past. This is why our workers spend part of their time looking for people with early leprosy. They check the members of the families of those already under treatment, they visit schools and they sometimes check from house to house in areas where leprosy is known to be common. They are looking for early signs of leprosy.

What are the signs of early leprosy?

Pale skin patches with loss of normal feeling.

Thick or painful nerves.

Painless ulcers on the hands and feet.

Thickening of the skin on the face, especially the ear lobes.

If they find any of these signs, a skin

smear is taken and examined under a microscope by a specially trained technician. Treatment is started as soon as leprosy has been diagnosed.

What treatment do we give?

In the past the main drug was DAPSONE (DDS, AVLOSULPHONE) and there were different ideas about the best dose to use. It is now realized that, as with TB treatment, only one drug is not enough, as the germs may become resistant to it and so the treatments have no effect. Since 1982, in accordance with the recommendation of WHO we have been using two or three drugs together – a combination of Dapsone, Rifampicin and Clofazimine (Lamprene). For this treatment to be effective it is essential that patients attend the clinic at least once a month. Treatment with a combination of drugs is more expensive but results in a quicker cure, so that many patients can stop their medicines after one year. It is exciting for our leprosy workers to have as many patients completing

treatment as new ones starting, and to see so many folk cured without any deformity at all through our Out-Patients' clinics.

Who then needs to go to Hospital?

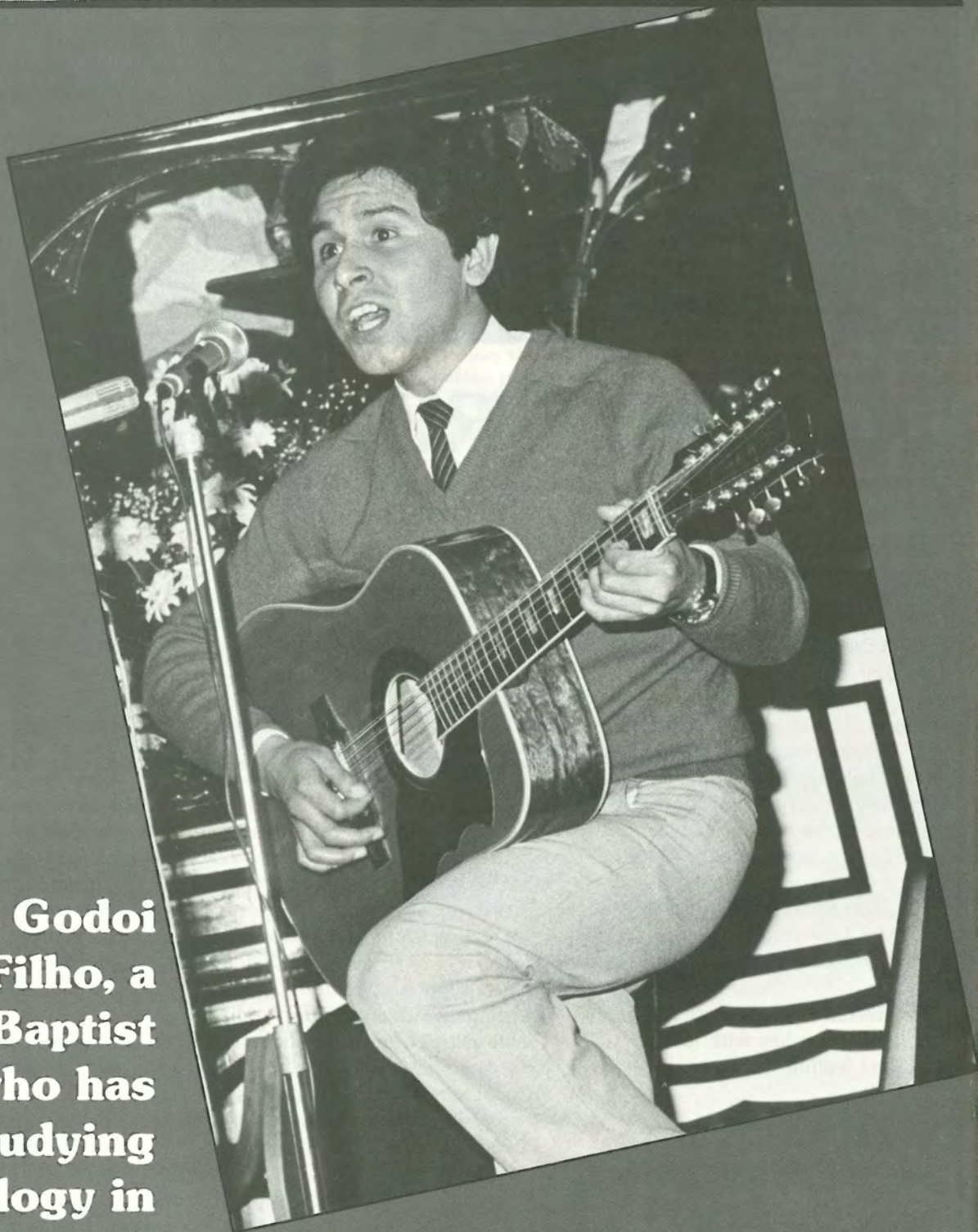
Most of the patients admitted to the Leprosy Hospital have problems resulting from the leprosy germ damaging their nerves. This causes paralysis of small muscles resulting in a claw hand, or a drop foot or weakness of the eyelids. Nerve damage also causes a loss of pain and normal sensation in the hands and feet which in turn leads to painless ulcers particularly on the soles of the feet. Physiotherapy, Reconstructive Surgery and education in self-care can do much to help these problems and we know that our new Operating Theatre will be well used.

For leprosy treatment to be effective teamwork is required. Our team consists of our Doctor, Nursing Sisters, Physiotherapist, Para-Medical Workers, Laboratory Technician, Shoe Maker and Driver. We also need the co-operation of the patient's family, friends and employer for the promise of cure to become a reality.

TALK ABOUT



JOSE DE GODOI FILHO



Jose de Godoi Filho, a Brazilian Baptist pastor who has been studying theology in Britain, through the BMS.

HOW DID YOU BECOME A CHRISTIAN?

'I was born into a Christian family and from the earliest time of my life, I was introduced and led in the Christian way of life. This education received from my parents certainly played an important part in my conversion. I realized that Jesus is the only way to salvation and that He is the only secure example for our living. It was not until I was 11 when I definitely made a personal commitment to that person whom I had been taught to admire since my childhood – Jesus. And thanks to that education and commitment to Jesus I had the strength and guidance to face the future with all its ups and downs.

WHAT DID YOUR PARENTS THINK OF YOUR DECISION?

'My parents are Christians, so my decision to become a Christian was the fulfilment of the hopes they had for each one of their children. Thanks be to God their hopes were realized. All the members of my family are Christians and fully integrated in the work and fellowship of the church.

WHAT LED YOU TO THE CHRISTIAN MINISTRY?

'Since my teens, I have been involved in church work. But I had no idea that God was through this involvement preparing me for the pastoral ministry. I was sure that I would be a psychiatrist! It didn't take me long to realize that I had come to love church work more than anything else. An unexpected but gradual sense of calling was being built up in me. In July 1976, my dear father died of cancer. It was a difficult time for me, since, apart from the great loss of my father, I had to find a job to support my mother, brothers and sisters. This meant that I had to transfer my studies to the evening. At the end of that month I went to a service in our church and there was an appeal for those who wanted to go into the ministry. I don't know how, but that night was the climax of everything that

had been happening to me. I went forward during the service and made the decision to go into the ministry. Later on, someone came and told me that my father always prayed that one of his sons would become a minister. I had not known that until that very moment. I was very pleased about that. The joy and peace which that decision has given me over the years, leaves me with no regrets. I have a wonderful sense of being at the centre of God's will.

WHILE STUDYING FOR THE MINISTRY YOU ALSO HAD A FULL TIME JOB. HOW DID YOU MANAGE TO BALANCE THE TWO?

Very hard! I worked full time in a bank. It was a job which dried up my energies leaving me just grains of it to undertake my theological course at the Seminary in Curitiba in the evenings. Very often the little energy I was left with at the end of the day, had to be kept alive by the strength of the Lord which gave me a strong sense of calling and willingness to go on. In 1982, I finished my course and was ordained to the ministry in the following year.

HOW DO YOU VIEW THE OPPORTUNITY TO COME AND STUDY IN THE UK?

As a lovely and an unexpected present from heaven! It corresponded in full with what I had always dreamed of, but never believed. It came as a surprise despite the dreams! It's been marvellous to be able to come and study in England, especially on this scheme of BMS which gives you the freedom to choose and deepen your knowledge on any subject you want. This freedom of choice coupled with the fact that I love studying has made my time in England very enjoyable and profitable. I would sincerely like to thank the BMS for giving me such an opportunity and Spurgeon's College for being so willing to help me in my studies. Certainly my future ministry in Brazil will be greatly enriched by this time I've spent here in England.

WHAT IMPRESSIONS OF BRITAIN WILL YOU TAKE BACK TO BRAZIL?

Having been here for nearly three years and visited so many places, I have learned to love and understand Britain. It is impossible to live for such a time in a country and not be touched somehow. I wouldn't do you justice if I tried to list all my impressions of Britain and what I have learned while here. But I would say that, despite all the problems it has – as does any country – Britain is still an example for other countries in many respects. My impressions of Britain are very positive indeed.

WHAT HAVE YOU LEARNED FROM BRITISH BAPTIST LIFE?

Lots of things could be said. But just to give a few examples. I have learned the importance of doing a children's talk, not only for the sake of teaching but also for the link that you as a pastor establish with them. In Brazil, most of the pastors leave children's talks for others to do. I am not saying that our children are not taught, but I see a big gap between the pastor and children in Brazil.

Another thing is the flexibility and variety of forms and approaches within the Baptist denomination. There is not an imposed structure and form of worship, a freedom which is so important for the life of the church within the context of the denomination. Of course, variety must have its boundaries, but I appreciate the importance of it.

The cooperation between evangelical denominations, or even with other churches, is something which I have been pleased to see here. There are so many things we could do together as a church within society. There is already some kind of movement towards church unity in Brazil, but not as much as I would like there to be.

Social concern, the priority of worship over evangelism, are among other things I appreciate in the British Baptist life. However, the strongest impression I will take with me to Brazil is the love and the

warmth with which the churches have received me in their midst throughout Britain.

MUSIC IS OBVIOUSLY VERY IMPORTANT TO YOU. WHAT PART DOES MUSIC PLAY IN YOUR MINISTRY?

I learned to play the guitar when I was 14 and ran a music group for five years before I went to the Seminary. I used to travel a lot with the group singing, preaching the gospel and teaching people how to play the guitar, especially in the country where so many churches don't have any musical instruments. So you can imagine how important music used to be for my ministry. Nowadays, since there are a lot of people in our church who are capable of leading the music, I have put aside the ministry of music. It was difficult to handle both a pastoral and music ministry. When I came to England, this ministry has been revitalized. Although I am not a singer or a musician as such, it's been marvellous to be able to serve the Lord in this country through this ministry also.

WHAT CAN WE LEARN FROM BAPTIST LIFE IN BRAZIL?

Perhaps the main thing would be the desire and involvement in the work of the church and in witnessing about Jesus that most of the Brazilian Christians have. They believe in Mission and engage in it personally. That is why the church is growing there. The Brazilian church is far from perfect but I have to admit that their zeal for the work of the Lord is something to be commended. There is a strong awareness that Mission is not a responsibility of a few, but of everyone who comes to Jesus. I would encourage British churches to be fully involved in Mission with the firm knowledge that people in Britain need Jesus as much as those who never heard His name. Mission is Mission wherever you go. For even the nearest places like our own homes or our neighbours need Jesus. And the closest missionary to them is each one of us.

MISSION TALK

THE REAL WORLD OF REFUGEES

THE BBC SUNDAY PROGRAMME recently interviewed Baptist minister Peter King about his visit to Zaire. Peter's son, Michael, is a BMS agriculturalist working in Kimpese in southern Zaire. He has been involved in resettling a number of Angolan refugees who are fleeing the civil war in their country.

2,000 refugees per month fleeing over the border. 10,000 refugees are now living in southern Zaire.

'They are more or less being driven out by the fighting that's going on,' says Michael King. 'UNITA is the rebel party who are fighting against the communist backed MPLA and UNITA has captured, apparently, the south, and penetrated the east and north of Angola. The last group of refugees came from the suburbs of Luanda. The war is hotting up now.'

Michael took his father to a refugee village where the poverty

and suffering made a deep impression on both.

'To my unaccustomed eyes the refugees were in an appalling state,' said Peter. 'They had nothing more in this world than the thin, torn clothes they stood up in. And for Zaire, the day was cold! Some of their number had already died before crossing the border. The children had ginger hair, a sure sign of malnutrition. Many of them and some of the adults were dressed in clothes cut out of flour bags with the name of Matadi mill still clearly printed on them.'

Medical staff in the area are heavily involved in caring for refugees.

'Tata Schaves' practised eye soon picked out a desperately ill baby that he designated for the IME hospital at Kimpese. The baby clung, more for comfort than sustenance, to its mother's dried up breast. I couldn't believe that this little girl was two years old.



Angolan food distribution

CATHOLIC BISHOPS MEET RAJIV GANDHI

THE problems of discrimination against 'dalits' (castes listed in the Indian constitution as having been discriminated against), the country's new education policy and the government's attitude towards missionaries were all on the agenda when bishops representing the Catholic Bishops' Conference of India met with Indian Prime Minister, Rajiv Gandhi, in July.

The bishops emphasized the church's disapproval of caste divisions. New Christians from the Dalit castes continue to suffer social and economic discrimination. They said that dalit converts should be given the same benefits such as some guaranteed seats in

Parliament and educational institutions as available to dalits of other religions. Currently, dalits lose such benefits if they become Christians on grounds that Christianity does not sanction caste distinctions.

The Prime Minister heard the church's grievances on refusal of residential permits for foreign missionaries, and curbs on transfer of foreign money into India. Gandhi was reported sympathetic about missionaries who had spent more than 25 years in the country and would be strangers in the country of their origin if forced to return there.

EPS

Her loose skin lay in folds over her skeleton. We were directed to the hospital, where we left the baby girl with her mother. Michael's 16 year old boy chauffeur, Zashery had come with us. When we were leaving the hospital to return to the Land Rover, he turned to Michael and asked if he could have an advance on his next month's salary. 'Yes,' said Michael, 'but what do you want it for?' Zashery wasn't letting on. But with 150 Zaires in his hand (about £1.70—more than a quarter of his month's salary) he returned in the direction of the ward where we had left the refugee mother. When he got back he admitted, 'She hasn't got any money!' In a country where medicine, food and a bed in hospital has to be paid for, her need was great—even though the Christian hospital would have provided for a refugee.

Every refugee had a story to tell about their flight from Angola.

'There were some people with gunshot wounds in their legs,' said Peter. 'I was told of a pastor who came over with a wound in his foot caused by gunshot, all because he'd been carrying a Bible. He was told by some troops that he had no business to possess the Bible and threw it on a fire they had made. He managed to rescue it and had it with him when he crossed the border. It was all singed down one column of print. He said that when he had gone to retrieve it from the fire, the soldiers had shot him through the foot. That foot was now gangrenous.'

The Zairian government has said that every refugee should be given land on which to farm. In practice this is at the discretion of village chiefs who decide land allocation. Often the Angolan refugees end up with the worst land, but as Michael says, 'They just make the best of it'.

INDIA COUNCIL TO OFFER SPECIALISED HEALING MINISTRY

VELLORE; India — The Council of Baptist Churches in North East India is approaching the Christian Medical College and Hospital in Vellore for co-operation in a specialized healing ministry in Northeast India. The hospitals are running short of Christian doctors and specialized medical personnel. The Council will invite the CMC Vellore jointly to set up this project at Christian Medical Centre, Jorhat.

BWA

TOOLS WITH A MISSION

PROVIDING a vital service to missionary agricultural and technical personnel, Tools With A Mission provides a wide variety of tools and implements for use overseas. TWAM is a Baptist Men's Movement project for refurbishing secondhand tools for use in rural development work overseas. A number of collectors around the country has been appointed to arrange collection of unwanted tools, which range from the usual hammers and saws to antique and craftsman's tools.

The tools are restored at workshops. For example, the workshop at Southend is established in a Baptist Church and benefits from the skills of unemployed people. The tools are rebuilt and sent to missionaries and other workers involved in rural development projects.

If you have any tools which you no longer use but could be renovated and used overseas, Tools With A Mission will arrange for them to be collected from you.

Please write to:
David Rutland
Hillside
Old School Road
Whepstead
Bury St Edmunds
Suffolk IP29 4UA

TALKBACK



From Katherine Tubbs

I AM furious. Really angry. But that I suppose is what provocative articles are for!

I write this purely personal letter in the hope that it may be published and prevent some missionaries from feeling the need to spend time defending themselves at home, rather than being free to do the work they were called to do — things like preaching the Gospel, feeding the hungry, healing the sick.

Fallowfield Baptist Church complains of 'out of touch missionaries on deputation visits'. If your life is spent working on the edge of an African jungle, or in the middle of a Brazilian slum, it's perhaps not surprising that you would be a little out of touch with Manchester. Perhaps Manchester churches that are fortunate enough to have a deputation speaker could take the trouble to tell the missionaries something about the place before hand. Or is it

that missionaries from one place are out-of-touch with those, two continents away, whom they may never meet in a life time of overseas service? They can scarcely be out of touch with their own work.

Perhaps there's a complaint because surgeons, or engineers, for example, aren't always excellent verbal communicators in a West European pulpit (although some certainly are!), but that is not where God has called them to go and so perhaps he has not equipped them for that work either.

Why not use the visit from a furlough missionary as a God-given opportunity to show Christian love and fellowship to those who have left home and loved ones to follow the call of Christ — to give rather than expect to receive. I'm not sure about all of the missionaries, but I am certainly out-of-touch with Manchester.

KATHERINE TUBBS

Cambridge

From Mrs M Rogers

I was interested to read a letter from Mrs Vera Collins and to agree with her comments on the 'Role of Women', featured in the May edition of the *Missionary Herald*.

I remember a minister's wife saying 'I want to be known as Mrs . . . , not the minister's wife. We don't refer to other married ladies as the plumber's wife, or

the bricklayer's wife do we?'

Recently when I have a letter to write to a married couple I address the envelope as Mrs E and Mr C . . . because I certainly agree with all Mrs Collins says in her letter. Thank you for an interesting *Missionary Herald*.

MRS M ROGERS

Nuneaton

'ADVENTURE IN UNITY'

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CHURCH OF NORTH INDIA

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28 minutes in length

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For Your Prayer Diary

BRAZIL – CURITIBA 5-11 October

Curitiba is the capital city of Parana State and is one of the fastest growing cities in South America. It has a population of nearly one and a half million. The challenge has been to match population growth with church growth, a challenge which the churches have accepted. Derek Punchedard is now serving as Co-ordinator of the Association in the region of Parana around Curitiba, promoting fellowship among the churches and pastors and joint evangelistic outreach. Joanna Punchedard helps in Sunday School work, runs Bible Study groups and goes as Chaplain's Assistant to the large teaching hospital in Curitiba. The Parana Baptist College is situated in Zacarias de Aguiar Severa is the new principal, succeeding David Grainger, now Principal of St Andrew's Hall Selly Oak, in February. Let us pray for the churches and pastors in this lively city that they may know best how to live and work and worship as Christ's people.

BRAZIL – PARANA: INTERIOR 12-18 October

Gerry and Johan Myhill report a continued growth and development within the church at Nova Londrina and there have been several baptisms in recent months. Social problems however are severe. A disastrous season damaged many of the crops and has resulted in a lack of work on the farms with many unemployed. The Day Centre for children in need is also functioning well. Many of the children suffer from malnutrition, anaemia, worms and skin diseases, but the local hospital has been giving free consultations and treatment. John and Maria Dyer, at present home on furlough, have been ministering to the churches at Rio Negro and Roseira. Roseira now has new church buildings and adjacent premises. There is an evangelist at Roseira now, Joao Pires, and so John has been able to spend more of his time at Rio Negro. At Piraquara David and Patricia Holmwood are engaged in a wide ministry of pastoral care, evangelism, including caring for those in the Leprosy hospital and state prison.

NEPAL UMN EDUCATION BOARD 19-25 October

The United Mission to Nepal works in co-operation with the government in education by providing teachers, building schools and helping in non formal education groups. Richard Cameron has just returned to Nepal to a new work at the Gandaki Boarding School at Pokhara. As well as being Co-ordinator of the Lower School and doing some teaching he is also Scholarship Officer, which means trekking round the hills to interview prospective pupils. It also means having pastoral care of the scholarship students and being responsible for the purchase and issue of clothing and equipment. There are 70 such students at present. Judith Willis, at Galyang, is teaching missionary children in two rented rooms in a mud and stone house. 'Bookshelves are suspended by wire from rafters, the maths scheme is from England, the blackboard is boards I painted black, and display boards are made from grass mats.' Ten children have started – one Swede, one Norwegian, two Australian and six American.

SELF DENIAL 26 October- 1 November

The end of the BMS year is on 31 October and, as usual, it is asking churches and individuals to mark the beginning of a new period of service by spending time reassessing their contribution to world-mission. More and more we remember that we in Britain are only part of a world-wide Christian fellowship. Our Christian 'family ties' link us with people of different races and languages. For many of them it costs a great deal to be a Christian – not in money, but in the sacrifices they have to make. In parts of Asia, just being a Christian can mean rejection by your family and village. Others are making long journeys over difficult terrain in order to bring the Gospel into the lives of those who have not heard it before. But many are also making financial sacrifices – poor people, by our standards, are giving willingly to maintain and widen the Christian witness in their country. How much are we giving in prayer, in the right use of our time, financially to share the work of those bound to us by the Family Ties of Christ's Church?

MISSIONARY MOVEMENTS

Arrivals

Mrs N McVicar on 1 July from Dhaka, Bangladesh.
Miss A Isaacs on 8 July from Upoto, Zaire (Holiday).
Miss V. Watkins on 8 July from Upoto, Zaire (Holiday).
Mr and Mrs I Wilson and family on 8 July from Yakusu, Zaire.
Rev E Westwood on 14 July from Rio de Janeiro, Brazil.
Miss A Horsfall on 15 July from Kinsangani, Zaire.
Rev C and Mrs Spencer and family on 15 July from Yakusu, Zaire.
Mr and Mrs S Little on 15 July from Tansen, Nepal.
Dr and Mrs R Hart on 16 July from Chandraghona, Bangladesh.
Rev J and Mrs Dyer on 20 July from Rio Negro, Brazil.
Rev F and Mrs Vaughan on 20 July from Sao Paulo, Brazil.

Mr and Mrs M Cranefield and family on 22 July from IME, Kimpese, Zaire.
Miss G Hunter on 26 July from IME, Kimpese, Zaire.

Departures

Rev F and Mrs Mardell on 17 July to Dhaka, Bangladesh.
Dr and Mrs A Hopkins and family on 17 July to Pimu, Zaire.
Mr R Cameron on 27 July to Kathmandu, Nepal.
Rev J and Mrs Furmage and family on 31 July to Sao Paulo, Brazil.
Miss B Olding on 31 July to Kinshasa, Zaire.
Miss A Wadey on 31 July to Kinshasa, Zaire.

ACKNOWLEDGEMENTS

The Secretaries acknowledge with grateful thanks the following legacies, and gifts sent anonymously (to 31 July 1986).

Legacies

	£
Miss Hope Andress	2,445.19
Miss Dora May Atkinson	800.00
Mary Chattwood	123.79
Mrs F J Dare	50,000.00
Miss Kathleen Margaret Farmer	100.00
Miss M M Frankland	250.00
Mr J R Lewis	100.00
Harold Philcox	1,500.00
Miss Elizabeth G Sharp	2,516.65
Miss Edith Kate Smith	7,629.99
Miss Edith Young	200.00

General Work

Anon: £6.00; Anon: £16.00; Anon: £0.79; Anon: £10.00; Anon: £5.00; Anon: £750.00; Anon: £50.00; Cymro: £54.00.

Medical Work

Cymro: £6.00.

Womens Project

£80.00.

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(April-September 1987)

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1 The Esplanade, Minehead, Somerset TA24 5BE

NOTICE BOARD

CONFERENCES

November 8: South West Women's Day Conference at:
Silver Street Baptist Church, Taunton.
Details from: Miss Pauline Trounson,
Coram Cottage, Pound Road, Lyme Regis,
Dorset DT7 3HX

November 11: Woman's Day Conference at:
Aldershot Baptist Church.
Details from: Rev Leslie Gregory,
33 Garden House Lane, East Grinstead,
West Sussex RH19 4JT

CONFERENCE

November 22: Northern Woman's Day Conference at:
Blenheim Baptist Church, Leeds.
Details from: Rev W R Turvey,
22 Netheroyd Hill Road, Huddersfield,
West Yorkshire HD2 2LP

NEEDED FOR MISSIONARY SERVICE OVERSEAS

Ministers for pastoral training in Angola and Zaire.

Theologically trained pastor to work as the co-ordinator of the Leadership Training Institute in Sri Lanka

Physiotherapist for Chandraghona Hospital in Bangladesh.

BAPTIST MISSIONARY SOCIETY General Committee Nominations A Final Invitation

All personal members of the Society and all subscribing Churches are reminded that nominations for General Committee should arrive at Mission House no later than December 31.

Nominations may be for **ELECTION** or **COOPTATION**. The names of those nominated for election will appear on the voting papers and sent to the Churches of their respective Associations. If a person is not elected by the Churches, his or her name will be considered also for cooptation. The names of those nominated for cooptation will appear only on the list of those nominees to be considered for cooptation.

In each case, nominations should be addressed to:

**The Administration Secretary, BMS
93 Gloucester Place, London W1H 4AA**

and should include relevant biographical details of the nominee.



TOP GEAR

YOUNG PEOPLE'S PROJECT is to provide transport for Church Workers in Zaire.

Write to Rev David Martin for publicity material.

Further information about any of these notices can be obtained from:
**Baptist Missionary Society,
93 Gloucester Place,
London W1H 4AA.**