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Medical Missions--Caring
Doubly For India's Masses

By Larry Jerden

BANGALORE, India (BP)--The three-wing, 78-bed, Baptist Hospital here stresses both medicine and evangelism as Southern Baptist medical missionaries rise to a double challenge of caring for the urban and rural populous.

The hospital was built after the denomination's Foreign Mission Board had already assured the overworked staffs of its 20 other hospitals no others would be built.

But for Southern Baptists to have entree to India, there was no other choice than medical missions. "We can stay in India as long as we can offer something to the government and the country that they need," said Dr. Russell Rowland, missionary doctor and chairman of the India Baptist Mission (organization of Southern Baptist missionaries).

It isn't that there is a shortage of doctors in India. In fact, there are 30,000 unemployed doctors in the country. Most doctors however, are in the large cities, with remote villages needing more care. There is, however, a dire need for specialists, according to Dr. Rowland.

That the needs are great cannot be denied. Eighty percent of India is rural. And there is one government auxiliary nurse for every 10,000 population. Even with attempts to care for these millions, there, generally, isn't much emphasis on preventive medicine.

Medical needs notwithstanding, the Bangalore hospital's staff fulfills a dual role in medicine and Christian evangelism. "Our hospital has been fortunate because the whole staff is committed to sharing the gospel and at the same time gives quality medical care," said Dr. Rebekah Naylor, hospital chief and chairman of mission evangelism. "Medical missions is primarily a means of evangelism.

"Sharing the gospel is the main reason I am here," said Dr. Naylor, the daughter of Southwestern Baptist Theological Seminary President Robert E. Naylor, Fort Worth.

The evangelistic and medical needs in outlying areas have been recognized, by the hospital staff and are expressed in its community development program.

Before and after the hospital opened in 1973, The India Baptist Mission had some mobile medical work, but it sought mainly to cure common diseases rather than develop community health.

Now the hospital team is working in one village, five miles from the medical facility, which the staff hopes to make a model, "so that other villages can learn what can be done and copy it," said Dr. Rowland.

"Our goals for this project, he continued, "are to provide maternal and child health, family planning, school health, tuberculosis and leprosy control, environmental sanitation, minimum health care for all age groups, agricultural consultation, health education and nutrition rehabilitation.

"We're talking about serving a population of 5,000 the first year, going to 10,000 after that. Most of our doctors will take turns going out to the village, as well as our Indian public health nurse, Indian medical social worker and Indian nutritionist," Dr. Rowland said.

One key to the village program is the training of a village health worker. "We will select someone, usually a middle-aged woman who wants to do something for her village and give her some small pay as incentive," Dr. Rowland said. "We will teach her so she can give training to the people. That way, if we ever have to pull out, we can leave something ongoing."

If leaving something ongoing is a goal of the hospital's medicine, it is even more an evangelistic goal. The India Baptist Mission was begun in 1963, with the Bangalore work begun in 1966. The medical mission personnel have been the catalyst for developing seven churches and 13 other preaching points.

With Bible correspondence courses, a mission lending library of 16,000 volumes, a youth center, the Agricultural University across the road for student work, the mission's agricultural program, teaching opportunities at Christian Medical College in Vellore and Serampore College, radio evangelism, that would appear enough.

But none of the outside programs is any more intense than that inside the hospital. "The evangelistic opportunities are also our greatest frustration," said Dr. Naylor, "We need more help."

Besides the doctors' evangelism efforts, the mission employs an Indian woman as an evangelism worker and four Indian men as evangelists. As a result, some 250 patients have invited the missionaries to visit in their homes for further discussion and prayer. Chapel services, evangelism-patient contact in the homes, and other ministries have influenced the hospital's reputation for the good.

"Many patients comment on the differences in attitude here," Dr. Naylor said. "It may be some action at the hospital, they say, that impressed them even before our evangelistic efforts reach them. Patients come from 200 miles away to be admitted."

The Bangalore Hospital "is as well equipped as any community hospital in the United States," Dr. Rowland said. "In fact, we do some procedures here that most community hospitals in America wouldn't do--they would send patients to larger hospitals."

Staffwise, there are three missionary doctors--one each for surgery, medicine and pediatrics. A missionary nurse and a hospital administrator are joined also by six Indian doctors and an Indian nursing staff.

Facilities include a laboratory with four technicians, an X-ray facility, a social worker, a pharmacy staffed by two Indian pharmacists. But getting drugs has been an increasing problem, with costs skyrocketing and supplies hard to get.

An outpatient clinic treats about 150 patients daily, with a general clinic each morning, and surgery, obstetrics, well-baby, leukoderma (skin disease marked by a loss of pigment), mobile clinic, rotated during the afternoons.

A dental clinic stays busy when a visiting dentist is available. Thirteen acres provide corn to feed cows for the hospital's milk and yields food for the kitchen, all nice to have, the doctors said.

But the Bangalore Hospital still needs more help. They could use just about any medical specialist available--short-term volunteers as well as long-term medical missionaries, Dr. Rowland said.

"We especially need a radiologist...a general surgeon to help Rebakah, and we could use a medical librarian, a dentist, lab technician, bacteriologist, pathologist..."

The list just goes on, and virtually everyone of the 20 other hospitals operated by Southern Baptist medical missionaries overseas could outline similar needs.

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33 Conventions Generally
 Calm Amid Sea of Issues

By Robert O'Brien

NASHVILLE (BP)--Thirty-three state Baptist conventions across 50 states have finished relatively quiet annual sessions, although many faced such issues as the charismatic movement, creedalism, women's rights, relationship of state conventions to Baptist schools and points of Baptist polity and doctrine.

The charismatic issue, which had earlier resulted in expulsion of a total of five churches by three associations of churches in three states, did not erupt on the state convention level, although the issue was discussed in some form in five states.

In a year when the Southern Baptist Convention has set its sights on a \$51 million national Cooperative Program unified budget goal--part of a combined \$150 million 1975-76 Cooperative Program goal of state bodies--at least nine conventions increased percentage of contributions to the national Cooperative Program. Those tabulations, however, are incomplete.

On the charismatic issue, no mention was made in two state conventions--Louisiana and Ohio where earlier a total of three churches were expelled by two associations. The three churches apparently sent no messengers to register.

In Texas, where the Dallas Association had earlier "disfellowshipped" two churches, no attempt was made to prevent seating of the two churches, which did send messengers. At the convention, held in Dallas, messengers also vetoed a motion to poll Texas Baptist churches "to find out their acceptance or rejection of neo-pentecostal doctrine and practice."

Maryland and Arizona, while not endorsing the charismatic movement, took middle of the road stances. Arizonans encouraged Southern Baptist pastors to preach and teach the doctrine of the Holy Spirit to counter the "disunity" they said is sometimes caused by "pseudo-charismatic" movements in local churches.

A convention spokesman interpreted the Arizona resolution to mean that "while we want to refrain from a real harsh attitude that could possibly lead to expulsion of churches that allow it, we want also to encourage... (proper) teaching and preaching." He noted that "most of it (the charismatic movement) goes to extremes and is schismatic" but that the resolution does not mean that all those who practice tongues-speaking are "pseudo"--that there is a New Testament basis for charismatic gifts.

Meanwhile, in a news conference in Florida, where SBC President Jaroy Weber went to address the Florida convention, he characterized the modern-day manifestation of tongues as "unbiblical."

Predicting that resolutions on tongues would probably be made at the SBC annual meeting in Norfolk next June, Weber, pastor of First Baptist Church, Lubbock, said, "The mainstream of Baptist belief is not in sympathy with the tongues movement." He said "people have a right to believe as they feel led but not to disrupt fellowship."

In the same news conference, John Pelham of Pelatka, Fla, newly elected Florida convention president, said he would oppose any efforts to exclude charismatic churches and he does not feel that the issue should be a test of fellowship.

In Maryland, a resolution called for "all Baptists everywhere to practice Christian love and patience toward those with whom we may disagree in the interpretation of biblical passages relating to the value and validity of charismatic practices."

Two state conventions adopted strong statements against any kind of creedalism which enslaves thought and interferes with the priesthood of the believer and the right of each to interpret scriptures under the guidance of the Holy Spirit.

In Georgia, messengers rallied around the authenticity of the Bible, unanimously reaffirming the 1963 statement of Baptist Faith and Message as the "theological guideline" for convention employees and ministries. But they voted down all but one resolution brought by "Concerned Georgia Baptists," a group involving a number of persons who have been active in the ultra-conservative Baptist Faith and Message Fellowship.

The messengers went along with a motion to "reaffirm faith in the entire Bible as the authentic, infallible, authoritative word of God" but refused others which would have had the effect of creedalizing and narrowing parameters of the already conservative Baptist Faith and Message statement.

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The Georgia convention unanimously adopted a strong resolution on freedom, which asserted that "every individual has the inalienable right and spiritual competence to interpret the Bible for himself, under the guidance of the Holy Spirit, and to freely express his beliefs and convictions." Maryland Baptists passed a similarly-worded resolution opposing creedalism.

In North Carolina, indirectly, "Baptists United," an ultra-conservative offshoot of the Baptist Faith and Message Fellowship also lost ground. M.O. Owens, a Gastonia pastor, had been named earlier by Baptists United as a candidate for the state convention's top administrative post. He declined to allow his name to be presented and moved to second the motion on Cecil A. Ray, nominee of the convention general board to succeed the retiring W. Perry Crouch as general secretary.

Owens, the first president of the Baptist Faith and Message Fellowship, later was defeated in a run-off for second vice president by Mrs. A. Leroy Parker, wife of a pastor from Greensboro. James M. Bulman, pastor from Oak Ridge, N.C., who nominated an opposition candidate to Ray, was defeated overwhelmingly for the parliamentarian post he has held for 12 years. The opposition nominee, Claud Asbury of Maryland, a former North Carolina pastor, drew less than a dozen votes.

Several conventions took a look at relationships to Baptist higher education.

In a historic move, Virginia Baptists voted their first written relationship with their colleges and academies, giving them two options on receiving convention funds. The action grew out of years of disagreement over what the relationship should be between the schools and the state convention.

Under the new plan they can either receive funds for support of specific ministries on campus (if they have at least 50 percent Baptist trustees) or receive funds, carte blanche, for whatever purpose they wish (if they have at least 75 percent Baptist trustees).

The Georgia convention adopted a lengthy report asking Mercer Univ. to enact a long series of suggestions which would make the university more responsive to the Georgia Baptist churches and convention and would re-establish "communication between the university and its Georgia Baptist constituency."

A resolution was passed saying that "Mercer should not assume we will automatically allocate money to them" unless the convention is satisfied with what Mercer trustees report to the convention in 1976.

In another action, messengers opposed the fact that the student government scheduled and reportedly showed the motion picture, "Carnal Knowledge," on campus and that the student paper, Mercer Cluster, carried "advertisements of alcoholic beverages."

A university spokesman said the paper carried no direct alcoholic beverage advertisement to his knowledge. He said the paper had advertised, among numerous other businesses, eating establishments which sell alcoholic beverages--including one whose advertisement mentioned beer.

In the area of women's rights, one convention, North Carolina, passed resolutions affirming the right of the local church to ordain women for church related ministries and urging more women on committees and boards. Three conventions--District of Columbia (president) and South Carolina and North Carolina (second vice presidents)--elected women as officers, and another convention, Kentucky, asked the Kentucky legislature to reverse its earlier approval of the Equal Rights Amendment.

In scattered actions in other state conventions, two (Virginia and Kansas-Nebraska) condemned the U.N. General Assembly's action equating zionism with racism; two (Arizona and Northwest) took action opposing acceptance by churches of people immersed by non-Baptists, with Northwest holding up seating of messengers of two churches who disagree with a convention doctrinal statement opposing either alien immersions or communion with non Baptists; two (Illinois and West Virginia) expressed appreciation for family viewing time on television, with West Virginia calling it "inadequate" to rid other television hours of violence and sex.

Also, four conventions (Texas, W.Va., Illinois and Louisiana) defeated motions which would have either strengthened position of associations to nominate executive board members or made associational membership mandatory to seating messengers at the state convention level; two state conventions (Tennessee and Arkansas) took action on ministers in stress, with Tennessee voting 250-238 to establish a liaison office between the convention and churches for counsel and information and Arkansas voting to take some action through seminars and conferences but declining to hire a staff member to work with the problem; three (Arkansas, Michigan, Indiana) called for world hunger offerings on state and/or national SBC levels; and two (Arkansas and Alabama) praised Southern Baptist work with Vietnamese refugees.