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NATIONAL OFFICE
SBC Executive Committee
901 Commerce #750
Nashville, Tennessee 37203
(615) 244-2355
Wilmer C. Fields, Director
Dan Martin, News Editor
Mary Knox, Feature Editor

BUREAUS

ATLANTA Jim Newton, Chief, 1350 Spring St., N.W., Atlanta, Ga. 30367, Telephone (404) 873-4041
DALLAS Thomas J. Brannon, Chief, 103 Baptist Building, Dallas, Texas 75201, Telephone (214) 741-1996
NASHVILLE (Baptist Sunday School Board) Lloyd T. Householder, Chief, 127 Ninth Ave., N., Nashville, Tenn. 37234, Telephone (615) 251-2300
RICHMOND (Foreign) Robert L. Stanley, Chief, 3806 Monument Ave., Richmond, Va. 23230, Telephone (804) 353-0151
WASHINGTON Stan L. Haste, Chief, 200 Maryland Ave., N.E., Washington, D.C. 20002, Telephone (202) 544-4228

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Volunteers Accept Hardship In Extending Baptist Care

By Art Toalston

GUNDO MESKEL, Ethiopia (BP)—Ann Smith can't take a break.

"You must keep that baby's eyes clean or he'll go blind," she tells the mother of a young child through a translator at the Southern Baptist feeding station in Gundo Meskel, Ethiopia.

Mothers and babies, some crying, some suffering from worms or other ailments, are waiting in line, along with two elderly men and several young Ethiopians. Smith, 24, never knows what she'll encounter. A woman's face is badly swollen from an abscessed tooth. A 15-year-old epileptic needs bandages changed on her burned, and now deformed, leg. She suffered third-degree burns when she fell into a cooking fire during a seizure.

Three times a day Smith makes rounds at the shelter among 80 mothers and their malnourished children. The mothers, she insists, must exercise the children's frail legs. "If you don't make them get up and walk, they'll get bed sores, pneumonia and they'll die."

Smith, of Bessemer, Ala., resigned from a hospital's intensive coronary care unit to come to Ethiopia. She's one of 23 volunteers from churches in the United States assisting Southern Baptists' three missionary couples.

A dozen volunteers work at clinics in the five remote feeding stations. Several do administrative work. Three are involved in veterinary work; two in water projects. About 50 Ethiopian Christians work in food distribution under missionary supervision.

Volunteers are meeting needs that, otherwise, would go unmet, says R. Keith Parks, Southern Baptist Foreign Mission Board president, after visiting Ethiopia in April. He notes their willingness "to interrupt a career or terminate a career early, with no regard for financial benefits" and their certainty "that the Lord has sent them here for a spiritual ministry."

"Three missionary families can't feed and treat 100,000-plus people," says missionary Jerry Bedsole, a veterinarian. "We had to have volunteers." In planning for the first feeding station last year, there wasn't time for career candidates to be screened and trained and to learn a new language.

More volunteers, not just career missionaries, still are needed in Ethiopia, especially in nursing, but also in agriculture, veterinary medicine and water development.

Volunteers "extend our mission ministry, meeting an emergency situation," Bedsole explains. "They've moved right into the work," and their labors have become "the foundation, the launching pad" for an ongoing witness.

"They have adapted to very strenuous, emotional work and living situations," says Lynn Groce, mission chairman and agriculturalist, "and they've done a superb job." Several had serious bouts with typhoid or typhus. Yet after a few weeks of rest, they were back at their stations, where the living quarters are without running water and electricity.

"You miss civilization, your friends, your family, your social life," admits Diana McKinnis, 26, a nurse from Fort Worth, Texas. Yet there's "a feeling that you're really doing something unselfish."

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Volunteers have bittersweet jobs, according to Groce's wife, Suzanne. They've seen appreciation on once-starving Ethiopian faces. But because the famine is not yet over, "They bear the emotional trauma of having to deal with hungry, sometimes dying, people."

Smith knew she would see children die in Ethiopia, "but it didn't make it any easier."

"I thought I'd see a lot more die than I have," another volunteer nurse, Kelly Leeper, 23, says. "Still, even one is too many." Her parents are James and Jean Leeper, missionaries in West Germany.

As valuable as the volunteers have been, Bedsole reminds, "You can't run mission work off short-termers. You only see long-term results from people who plant their lives in a country, learn the culture and language and identify as much as possible with the people."

Volunteer nurse Debbie Welch, 29, from Green River, Wyo., understands. When an infant dies, she yearns to tell a grieving mother, "The child is in God's hands." But not knowing the dialect, she can't express it. A hug barely suffices.

Missionaries and volunteers alike here have been disappointed that no doctor has joined their ranks during the 14-month feeding effort. "I can't believe that out of 14 million Southern Baptists we don't have one doctor who's willing to spend a year with us," says Ed Mason of Tallahassee, a former president of the Florida Baptist Convention. He and his wife, Vi, do administrative work in Addis Ababa.

Often Smith has told patients, "There's nothing we can do," lacking a physician or surgeon. "I have never felt so absolutely helpless."

"We're doing doctor's work here," Rosie Fenton of Cocoa Beach, Fla., says. Diagnosing illnesses and prescribing medications aren't done by nurses in the United States. "You certainly pray for wisdom," adds Fenton, who gave up a job as head nurse at a hospital's pediatric unit. She was a missionary to New Guinea with the Christian and Missionary Alliance from 1953 to 1963.

Volunteers have come to Ethiopia via different spiritual pathways.

Dono and Betty Moore are retired missionaries who worked in the Philippines and Ghana. Some friends joke "we should stay home and be grandparents," Moore, 66, the mission's treasurer, says. But "they know good and well we're committed."

Betty Barham, 55, of Sontag, Miss., is a widow and mother of five who will miss the wedding of her youngest daughter and the birth of her fifth grandchild. In opting to work in Ethiopia, she reasoned, "I belong to another family—a church family and a world family—beyond my immediate family, and all of that has to be considered when making choices in life."

Russell Helms, 22, of Birmingham, Ala., a nurse who worked the same shift and same unit as Smith, has "always wanted to be a missionary in some form or fashion." His interest was nurtured by his mother, Reba, who read "Open Windows" devotions to him into his teen-age years and prayed with him for missionaries on their birthdays.

Charles Field, a veterinarian from Tallahassee, and his wife, Millie, friends of the Masons, had long been interested in volunteer missions in gratitude for God's blessings. Several words from Mason stuck in their minds: "You need to come, too."

Mike Camden, who left a state public health engineer's job, and his wife, Martha, made missions commitments in their Abingdon, Va., church in 1984, then a year slipped by. "You can say over and over, 'Yes, Lord, I want to do your will,'" she says, "but until you actually start filling out the applications, you're not really showing him you're serious."

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(BP) photos mailed to state Baptist newspapers by Richmond bureau of Baptist Press
Toalston and photographer Warren Johnson recently returned from a news trip to Ethiopia.

Sacrifices, Sickness Secondary
To Couple's Ethiopia Calling

By Art Toalston

MERAGNA, Ethiopia (BP)—"You couldn't buy this experience with money," says Southern Baptist volunteer Linda Barnett.

But who'd want to buy a near-fatal case of typhus?

For Linda, a close call with death hasn't tarnished her experience as a volunteer nurse in Ethiopia.

She and her husband, Clyde, of Owensboro, Ky., work at the Southern Baptist feeding center at Meragna, a remote village overlooking vast canyons north of Addis Ababa. Linda, who left a job as a pediatrician's nurse to take the volunteer assignment, sees as many as 130 patients a day, six days a week, in the feeding station's clinic. Clyde, a former fireman who also owned a used car lot, does much of the administrative work.

Parents of three grown children, they had been in Ethiopia six months when their third grandchild was born in March.

"I don't guess you're ever in the center of the Lord's will on this earth. There's always something you could do," Linda says. "But I feel I'm as near to the center of the Lord's will as I'll ever be in this life.

"At home you always have this nagging feeling that, no matter how much you go to church or what you do, it's never enough. That feeling's not here. What you do makes a difference."

Linda's bout with typhus, several weeks after they opened Meragna's feeding station last October, pushed her temperature to 105 degrees. For nine days, she was in bed and didn't eat. Deciding something had to be done, Clyde sent an Ethiopian worker on horseback on a six-hour ride just to make radio contact with missionaries.

She was airlifted to a hospital in Addis Ababa, Ethiopia's capital, and, after a day and a half, to a hospital in Nairobi, Kenya. For three days, doctors doubted she would survive.

"We just prayed and that was all," Clyde says.

As nine more days passed, Linda gained strength. "Five days are blank to me," she says. "I think I'm alive today because many, many prayers were answered. The Lord isn't finished with me yet." After several weeks of recovery in Addis Ababa, she returned to Meragna.

At Meragna, the Barnetts and a team of six Ethiopian Christians provide rations of grain, milk powder and cooking oil to about 25,000 subsistence farmers and their families anxiously waiting to see whether summer rains will nurture an ample late-fall harvest.

The Barnetts are concerned half the children they've examined in recent weeks have shown a weight loss or no weight gain.

The grip of drought "is not as severe as it was but most of them still need help," Linda says.

Until April 1985, the Barnetts never talked about or considered missions-related work. They had seen many news reports about the Ethiopian famine, but one Saturday just before bedtime, they watched a segment about a teen-ager whose mother had died from starvation and whose father was near death. The youth was seeking help for a brother just a few months old.

"We just stood there and watched it," Clyde recounts.

The next day, after returning from church, Linda leveled with him: "I need to go to Ethiopia."

During church all she had thought about was that young man in Ethiopia.

Clyde laughed and Linda was perplexed. "He's usually more sensitive than that," she says. But he had felt the same need.

"I'd stayed awake most of that night," he recounts. "Just couldn't get it off my mind. It just seemed like the Lord kept dealing with me: 'This is something that you need to do.'"

"It was like there wasn't any choice about what we were to do," Linda says. "There was never any question from that moment on."

They sold their home and business. "It just seemed like they didn't matter anymore," Clyde says.

Within three months they were in volunteer orientation at the Southern Baptist Foreign Mission Board's Missionary Learning Center near Richmond, Va., preparing for their stay in Ethiopia.

"I don't think we'd be content with a 9-to-5 job anymore," Linda says.

"Wherever we go," Clyde adds, "it's not our decision anymore."

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(BP) photo mailed to state Baptist newspapers by Richmond bureau of Baptist Press.

Missouri Executive Director
Diagnosed With Leukemia

Baptist Press
5/22/86

JEFFERSON CITY, Mo. (BP)--Missouri Baptist Convention Executive Director Rheubin L. South has been diagnosed as suffering from leukemia. He is being treated at Barnes Hospital in St. Louis.

South has experienced health problems since November of last year. Doctors initially diagnosed the illness as anemia. In March, South was forced to cancel his travel schedule and cut back office responsibilities.

On May 12, South was admitted to Barnes Hospital suffering from pneumonia. Additional tests confirmed his blood condition had degenerated into leukemia.

South is undergoing chemotherapy treatment and is expected to remain hospitalized through June, said Missouri Baptist Convention President Wally Jones, pastor of Fee Fee Baptist Church in St. Louis.

Doctors offered encouragement about potential success of the treatments when they met with family members May 18, Jones said.

Jones said cards and personal notes reporting times of special prayer would be an encouragement to South and more appropriate than phone calls, flowers or visits.

South is in Room 6514, Barnes Hospital, St. Louis, Mo. 63110.

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Planning Future Programs Key
To Baptists' Spiritual Growth

By Terri Lackey

Baptist Press
5/22/86

SCOTTSDALE, Ariz. (BP)--Teaching Baptists "basic fundamental beliefs" is a major task of church training, a leader in the field said, and planning programs well in advance is the key to unlocking a closed-door attitude some Christians have toward spiritual growth.

"We've got to teach our church members basic fundamental beliefs and basic biblical behavior," said Roy Edgemon, director of the Southern Baptist Sunday School Board's church training department. "One of our main tasks is to plan programs, curriculum and resources far enough in advance to accomplish spiritual growth and development among our members."

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Presiding over a mid-year planning session for state church training directors, Edgemon said 19 program strategies tentatively planned for 1990-95 are designed to reclaim inactive church members, stimulate active members and push up church training attendance.

Although the programs planned for 1990-95 are merely on the drawing boards, Edgemon said many are designed to support a Sunday School Board goal to achieve a Southern Baptist Convention church membership of 20 million—an additional 6 million—by 1995.

Meanwhile, Edgemon said, the church training department needs to focus on reclaiming inactive church members and retaining those actively on the rolls.

To do that, churches need to orient new members, equip present members for discipleship and train leaders, said Henry Webb, program planning coordinator in the church training department.

An inactive church member study, conducted by the board's research services department, reported "three-fourths of the pastors responding to a survey consider the problem of inactive church members a fairly serious or crucial problem," Webb said.

He said 20 percent of 14.4-million Southern Baptists are resident inactive or have not participated in any church activities within the past 12 months.

He added an average of nearly 30 percent of a church's total membership is non-resident inactive, meaning they have moved out of the area in which their church is located.

"There are probably 49 percent, or seven million, Southern Baptists who are inactive church members," Webb said.

Edgemon said preventing church members from dropping out would be one way to cure the inactive membership syndrome, but he acknowledged preventing dropouts in itself poses a problem for churches. "One way to prevent dropouts is to bond new members to the fellowship of the church," he noted.

"Southern Baptists must come to the realization that discipleship (or teaching basic biblical beliefs) leads to evangelism, and evangelism is the outgrowth of good discipleship, and not the other way around. In other words, if we do the discipling, we are going to win people to Christ," he said. "People who don't know what they believe are not willing to make converts."

However, Webb added, "reaching inactive church members is never going to be easy."

But he said a church training department resource to be released in early 1987 may help church members understand inactive members.

"The Ingathering: Reclaiming Inactive Church Members" is a ministry plan to help train active members how to understand inactive members by learning how to listen to their concerns, Webb said. He noted active church members never really have been trained how to listen and understand why inactive members are not attending church.

State church training directors spent the bulk of their mid-year session discussing program strategies for the 1990-95 programs. Gathering suggestions from state church training directors is the basic reason for holding the mid-year planning session, Edgemon said.

State directors also discussed the status of church training periodicals, the MasterLife discipleship training course, a church training record system and promotion of church training courses.

(BP)

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Nashville, Tennessee 37203

LYNN MAY HO
HISTORICAL COMMISSION
901 COMMERCE
NASHVILLE, TN 37203

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