

MISSIONS QUARTERLY

Vol. 5 Issued Quarterly at Washington, D. C. No. 4
By S. D. A. Foreign Mission Board

5 cents a copy Fourth Quarter, 1916 20 cents a year

Entered as second-class matter, July 6, 1915, at the post-office at Washington, D. C.,
under the act of Congress of March 3, 1879.



Giving a Patient Treatment in the Fat Shan Dispensary

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Official Notice

MRS. L. FLORA PLUMMER,

Secretary Sabbath School Department,
Takoma Park, D.C.

Dear Sister Plummer:—

In regard to the object of the Thirteenth Sabbath Offering for the last quarter of 1916, the General Conference Committee has taken action as follows:—

“Voted, That we ask the Sabbath School Department to set before the schools the work and needs of the dispensary missions of Asia as the object for the Thirteenth Sabbath Offering for the fourth quarter of 1916.”

The story of the dispensary missions of Asia has been a stirring one. The Committee includes in the term the evangelistic and school work being conducted in connection with these dispensaries and medical missionary stations. In its very nature the whole work is one. While facilities are provided in certain mission stations to give special care to the sick and suffering, and many thousands are thus helped every year, the chief endeavor in all the stations is to win souls to Christ.

Here is an enterprise calling for large extension in the Asiatic field. We feel sure the missions will hail with joy the announcement that the last quarter of 1916 is to bring a gift for the continuance and enlargement of this blessed work.

Truly your brother,

W. A. SPICER.

The Dispensary at Karmatar, India

MRS. O. SMITH, M. D.

OUR Karmatar station is located just beyond the border of Bengal in the Santal parganas, about one hundred sixty miles from Calcutta and somewhat northwest.

Dispensary work was begun here about the year 1897 or 1898 with Brother and Sister G. W. Edwards in charge. After a little more than a year, they were released and the work was continued by Brother F. Brown. While laboring there he contracted smallpox and died. After his decease this line of work was discontinued for several years. It afterward revived for a time, again suffered a relapse, then again it was resuscitated. Thus through many vicissitudes the dispensary still stands, a light—though a very tiny taper perhaps—to this dark community.

At the time of our arrival, a short time ago, we found Brother and Sister L. H. Leech struggling along, trying to do the work that should be shouldered by three or four.

The building used for the dispensary stands at the farther front corner of the compound on the only road through this section of the country, thus passed daily by large numbers of Santals, Bengales, and Hindi-speaking people. For this reason it has become widely known and quite widely patronized.

Those suffering with every sort of malady, curable or otherwise, come from far and near. It is surprising how readily they respond to even the simplest treatment, and it is indeed

fortunate for all concerned that they do, for no other kinds can be given with the meager equipment. They are so grateful for what is done for them that they can hardly be restrained from falling down and worshipping the one who relieves them of their suffering.

Not only does the worker come in contact with those who come to the dispensary, but he is begged to go to the homes, but on account of the immense amount of work devolving upon these two lone workers, they cannot go unless the patient is really too sick to be brought to them. These would be splendid opportunities for going about and mingling with the people in their homes as we are told in "Ministry of Healing" that Jesus did. But we have not the workers to spare. There is work enough in this out-call department to occupy the entire time of one or two.

Brother and Sister Leech have one or two natives that they are training to help them. Under their direction these young people are now able to give fomentations and foot baths very creditably.

The dispensary itself is a small square building with brick walls and tile roof outside and thatch underneath. When the wind blows, dust and even small pieces of dirt come sifting down over everything—medicines, open wounds, or whatever happens to be exposed. The front room extends the full length and half the width of the building but that isn't much space when one bears in mind that the whole building is very little larger than a good-sized woodhouse in the States. One end

of this room is occupied by cupboards for medicines and supplies, and an instrument case. Along the front wall in the middle third of the room, is a table on which is a book for registering each case with address, nationality, occupation, date of call, disease, and treatment, and any other interesting or helpful information regarding the case. On this table is also literature for those able to read.

This leaves the other end of the room for a consultation office just large enough for the worker, patient, and one other person—the helper who is to administer the treatment.

The back half of the building is divided into three rooms—the one on each end for the ladies' and men's treatment rooms and that in the center contains the only bath tub the place affords and a small, one-burner oil stove with a five gallon oil can on top, for heating water or giving fomentations. These, with a table for each treatment room and a bench for the patient to lie on, form the equipment. A steam cabinet stands in one corner, but the native cannot be induced to get into it and be shut up.

All three of these rooms are so small that when the fire has to be going for treatments, one can hardly be in either treatment room long enough to make an examination without the perspiration dripping from his face. If an attendant is required, a third person can hardly get in and yet have room to work. One small window is all that can well be had in so small a room, and if the door is left open from

the ladies' treatment room, it exposes the patient to the gaze of those waiting on the veranda and there is not sufficient room for a screen, and a purda (curtain) obstructs the air.

Our Needs

We do so need another room outside, where the heating may be carried on without making the rest of the house almost unendurable, for the continued intense heat and excessive perspiration saps the life out of the worker very much worse in this climate than in America.

Another thing that we need very much is another cottage near by with ten or twelve beds where we can put those coming from a distance who need daily care. We have absolutely no place to put such at the present time and the lack is felt very keenly.

Not long ago a wealthy native gentleman (baboo, such are called here) came to the dispensary in a very serious condition. He needed close attention and could not make the journey from his home daily. Some arrangement for him must be made, so Brother Leech went into the native village of mud huts about a mile away and finally succeeded in renting one for the use of the sick man, and each day one of the workers went two miles through the hot sun to give him the needed treatment. Through the blessing of God, it was not long before the man was restored to health and went to his home rejoicing, ready to send others to the place where he had found relief. Although he did not go away rejoicing in the truth, yet seeds were sown in his heart, made

tender by helpful ministry, and we cannot tell how soon these may spring up and grow and yield a harvest.

If only you could see the great need of these darkened millions, your heart would burn within you, and you would cry out from the depths of your heart, "Here am I, send me." But if it was really an impossibility for you to come, you would give liberally of the means God has blessed you with, that others might come and that those already in the field might have the facilities needed to do the best work possible and reach the most people in the short time that is left us before Jesus comes.

Brethren and sisters, please pray earnestly for the work and workers here and ask with a sincere heart, "Lord, what wilt thou have me to do?"

Lucknow, India.

The Great Need of Dispensaries in China

LAW KEEM, M. D.

WE are told that Christ was the greatest medical missionary the world has ever known. Wherever he went the sick and afflicted came to him for relief. No one was ever turned away unrelieved. His sympathy was for all who needed it. Here in this land where sin and its consequences abound on every side we have an opportunity to witness the results of this kind of missionary effort.

Our dispensaries give us a splendid opportunity to meet a class of people which we

otherwise would not be able to reach. The heathen mind is usually prejudiced against all



DR. LAW KEEM TREATING A CRIPPLED WOMAN

Western religions, and many will never come to our chapels where they know they will hear it, but if sick or afflicted, they will come to

us for aid. After being relieved of pain, their hearts are made tender and they willingly listen to what we have to tell them.

Of course, not nearly all who come to our dispensaries accept the truth, but neither do all accept who come to our chapels and listen to the Gospel, but we are to seek for the few honest ones.

We have a small dispensary located at Fat Shan where we first began this work, and many of the members of our church there first became interested in the third angel's message through coming to the dispensary for physical help and there listening to our evangelist while waiting to be treated. Our most faithful and successful Chinese Bible woman came to the dispensary at Fat Shan for treatment and listened to the gospel for the first time. She became so interested that she began attending our meetings and finally took her stand fully for the truth. She has brought many of her relatives into the truth since, and now is doing successful work as a Bible woman. This is only one instance. There are many more, but space will not permit us to give more now.

Large institutions are not advisable for this field, but small institutions are needed, such as dispensaries with treatment rooms and accommodations for a few house patients that need to remain for a while. There should be at least one of these in each province. We are planning to have such an institution at Nanking, Kwangsi, where the headquarters for our work in that province is being located.

We hope and pray that the brethren at "home" will remember us and our needs when the Thirteenth Sabbath Offering is given.

Wuchow, Kwangsi, China.

Medical Missionary Work in China

DRS. A. C. AND BERTHA SELMON

The Needy as We Find Them

THE city of Ying Shan in north Hupeh, is quite typical of conditions as we find them in almost any mission station. We spent one week at this place a few months ago. This station had received no visit from a foreign pastor for nearly a year before the time of our visit. We were there to help them in all lines of work, instructing the evangelist and the enquirers as well as holding meetings several times each day. As our time would be well filled we made no effort to let the people know that we were prepared to help the sick, but it did not take long for them to find this out. In order to save time and give as much help as possible on these itinerant visits, we confine the medical work to certain hours each day. While we were in Ying Shan, we treated over fifty different persons, some of them receiving treatment several times. A large proportion of those who come to us, in such itinerant work, are cases which can be greatly helped by simple measures, such as opening abscesses, dispensing eye medicine, ointments, etc. Some of course cannot be

helped in so short a time and the work of a permanent medical missionary station is much more satisfactory in this respect.

During our provincial meeting in Hupeh, Honan, Hunan, and Kiangsi, we were kept busy, looking after the sick, in every available moment between the meetings.

Open Doors

In the early days of missionary work in China prejudice and superstition prevented many needy souls from seeking the aid of the medical missionary. Those days are past and now dispensaries and hospitals have no lack of patronage. There is a great turning everywhere toward the "western learning." Dispensary and hospital work can now, in almost any location, be made a valuable help in witnessing to the love of Christ and drawing souls to the gospel. But the great difficulty is that the opportunity is so limitless. We have not enough physicians in all our ranks to touch a tithe of China's need, so we must attack the problem from another side. We must teach. Teach, first, our students and workers how to conserve their own health, and how to treat the sick and prevent disease. We must teach them that they may teach others and in this way multiply our forces. The need of this training work is surely not less than the need of such training for our young people in the homeland. We find that the majority of our present staff of Chinese evangelists and Bible women are earnestly desirous of securing some training along these

lines. Any missionary, who has been in the interior of China, can testify to the fact that the Chinese people look upon the missionary as one who can help the sick; and being be-



A CHINESE NURSE TREATING A DISPENSARY
PATIENT

sieged by them day after day, has led more than one missionary without a medical training, to leave his work for the time being, and enter school for a preparation that would enable him to treat the sick. Our evangelists in the interior meet with the same thing as the foreign missionary, for the sick are constantly coming to them for help. Why should it be thought strange for the sick to come for help to the man or woman who holds up Jesus and the work he did as the perfect example?

The time has come when those who have had the training should give time to this line of work. When we take into account the conditions in China, and see that hygiene and sanitation are almost unknown, it is seen to be imperative that all who work here, (native workers as well as foreign) as representatives in the cause of Christ should know the value of cleanliness of food and person. They should know that flies and vermin are agents in the transmission of disease. They should know that air and sunshine are God's messengers of health. These and many other things must be taught and applied to the lives of these people who live in a country where conditions of life favor the spread of every kind of infectious disease.

There is another phase of educational work which presents an exceedingly promising field. By means of health talks accompanied by some simple scientific demonstrations, we may gain entrance to the minds and hearts of the best educated class of people in China. But we have been able as yet to reach but a few of this class. But the few, who have accepted the truth, have rendered valuable service in teaching and leading their own people, thus placing the work on a more self-supporting basis. Our greatest need is capable, efficient workers. Should we not then make the most of this opportunity?

It gives our hearts courage to know that the medical missionary work in Asia is to receive special financial help on the next thirteenth Sabbath. We hope too, that capable

workers will soon be sent to China in sufficient numbers so that we shall not be crippled on account of lack of help as we have been in the past. The special lines of work can then receive the help they need and we shall be able to enter the doors that are now wide open in China.

Peking, China.

Dispensary Work in Korea

RILEY RUSSELL, M. D.

WE are thankful for what the Thirteenth Sabbath Offerings have done for Korea in the medical work. Our dispensary was built from funds raised from a Thirteenth Sabbath Offering in 1913. Since that time many thousands of needy Koreans have received medical help and we are able to treat and properly care for the patients that come to us. It was impossible for us to do this until this fund supplied us with the means to build our little dispensary.

Some of our stations have no medical help and as we now have two Korean Christian doctors, we have thought seriously of building one or two more small dispensaries where our church work is strong and where there is a great lack of medical help. Perhaps I would be able to visit them at certain times, and in this way our medical work could be trebled in different parts of the field. This would strengthen our whole evangelistic work in Korea.

The dispensary work fills a great need in

Korea. While the Japanese government is establishing hospitals and has a medical school in Seoul, still there are vast stretches of country without competent medical help, and there are unlimited opportunities for the medical evangelist everywhere.

A man was brought to the dispensary with his liver protruding through an opening made by an abscess in his side. When we told his people that we would do all we could for him but that he could not live, his mother said she knew he could not live but that they had brought him to the dispensary, hoping that he would become a Christian before he died. He lived only a few days, but died in the faith of a resurrection; his people, all heathen, were much impressed.

One man a few weeks ago came with his throat cut. It had been cut for twenty-four hours, and he was breathing through the cut. We had prayer for him and dressed the wound. Now after two weeks he is on the road to recovery. This all shakes heathenism.

One of our students who died, whose heathen father visited her a few days before, was so impressed with the care given her by her Christian fellow students and the church members, that he returned home and told his wife that she should become a Christian so she could meet her daughter when Jesus comes again.

I am sure that every dollar raised and properly used in the great Asiatic field will bring a rich harvest of souls saved in the kingdom.

Soonan, Korea.

Kobe Sanitarium

MRS. DR. NOMA

IT was in the year 1890 that the third angel's message came into Japan. Four years later I was awakened by this gospel and came into the grace of the true God. At the same time I was made to feel the necessity of founding a sanitarium. Though I was the least among the servants of God, having received some medical knowledge I felt I should consecrate myself to this work and bring many souls to Christ. That the way might be opened for me was my earnest prayer day and night. In the year 1903, when Dr. and Mrs. Lockwood came to Japan and opened a sanitarium, I sacrificed every thing to join in the work.

To lead the people who had so little knowledge of the treatments, we had to meet many difficulties, wants and trials. But the Japanese people began to be interested in this system of treatments, and it is now a live subject of study among doctors and other people. Our brethren and sisters were increased by degrees and now we have three doctors, twenty nurses, and ten other workers, working hard to preach the third angel's message and show to patients the knowledge and power of God that is in it.

The Kobe Sanitarium has twenty-five wards and about seventy outside patients, and the number of treatments we give is about one hundred a day.

The Lord loves the little flock and brings souls to him both through patients and work-

ers. Now, the sanitarium, watched from all sides, needs to improve and reform many things but we always suffer financially and we have no way but to look to your sympathy and prayers. Our most pressing need is to build a set of separated rooms in which to put patients that have infectious diseases, such as typhoid fever, dysentery and pneumonia. The patients that might easily be cured by our treatments are sent to heathen hospitals just because we have no separate rooms, and it is so sad to think that they have to spend their time uselessly there, and often they lose their precious lives.

I pray God that by the sympathy of our brethren and sisters that the rooms may be given to us.

Kobe, Japan.

Medical Work in the Philippine Islands

CARLOS FATTEBERT, M. D.

OUR work in the Philippines differs somewhat from that in other fields. I worked two years in the town of Argao, which is a sample of those in all the provinces,—a small town with a large population living in the surrounding country. There are 45,000 people in the district, but only 2,000 in the town. They are not really poor, as all have some kind of produce to fall back on, but they have little money. Medicine opened our way in Argao, from the first, as it would have been very difficult to get a footing there otherwise. The earnings

from the medical work the first two years paid about five per cent of all the mission expense. During that time we were learning the language, writing tracts, and editing and translating an abridgment of "Thoughts on Daniel." For the last five months, we have been spending half of the time in evangelical work outside of the district. I baptized a Chinaman last month who was the direct fruit of this medical work. Nine have been baptized so far.

Cebu, P. I.

A Dialogue

BOY NUMBER ONE enters, with his right hand and arm bound down tight to his side with a rope.

BOY NUMBER TWO comes up on the platform and looks, in surprise, at the other boy, and says, "Why, Jack, what is the matter with your arm? Have you broken it?"

NUMBER ONE: No, it is not broken; and I'm very glad that it isn't. It wouldn't be much work I'd do, if it were; for it's my *right* hand. Funny, but a person doesn't know how much he uses his right hand until something suddenly puts it out of commission.

NUMBER TWO: Well, if your arm isn't broken, why is it tied down like that?

NUMBER ONE: Just to see how it would seem, and if it would make much difference.

NUMBER TWO: Well, does it?

NUMBER ONE: *Does* it? It seems as though

I couldn't do anything at all. It wouldn't be so bad if it were my left arm.

NUMBER TWO: Whatever made you think of doing such a thing?

NUMBER ONE: I read the other day that medical missionary work is the right hand of the gospel. Then I read about the Lord's work in India, and China, and Japan, and other countries, how it is hindered because there are so few medical missionaries and such poor dispensaries there. I thought to myself, why, the gospel is trying to work with its right hand tied down! I think it's a shame. If it hinders the gospel message, as much as it does me, to have its right hand gone, I wonder that it does any good at all!

NUMBER TWO: Well, what good will it do for us to worry about that?

NUMBER ONE: It won't do any good to worry about it; but it will do a big lot of good to reach down deep in our pockets and make up a good donation for the Thirteenth Sabbath Offering.

NUMBER TWO: Is that what our offering is for, this quarter?

NUMBER ONE: Yes, it's to provide better dispensaries for China, India, Japan, Korea, and other countries. Just think! China and India are "more densely populated than any other part of the globe," and the people over there get sick just as often as we do; and yet they haven't any places at all in which to treat their sick people, compared with what we have! What do you suppose our nurses here would think if they had only "a Rocker-

feller oil can'' and a few old rags, for a dispensary? That is about all some of the nurses in India have to work with.

NUMBER TWO: What good does it all do, anyhow? I thought our missionaries were sent out to save people from their sins, and not just to heal their bodies and make them more comfortable.

NUMBER ONE: Huh! you must have forgotten our Sabbath school lessons in Matthew and Acts. Don't you remember the paralytic and the lame man? Jesus and the apostles first helped the bodies of the people, and that showed the people how good and powerful Jesus is, and helped them to believe that he who could save them from sickness might be able to save them from sin. Don't you remember how the healing of the lame man opened the way for over five thousand people to be converted?

NUMBER TWO: Oh, I know it worked that way back there; but we don't see such things now, do we?

NUMBER ONE: Yes, indeed! We have a small dispensary at Fat Shan, China. Many of the members of our church there first became interested in the message through coming to the dispensary for physical help. "Our most faithful and successful Chinese Bible woman, now laboring in Kwang Sai province, came to the dispensary at Fat Shan for treatment and there listened to the gospel for the first time, and became so interested that she began attending our meetings and finally took her stand fully for the truth. She has brought

many of her relatives into the truth since, and now is doing successful work as a Bible woman;" and this is only one instance. Now, I think that was well worth while.

If some wicked man had bound my arm down like this, and I could not get the rope off, you would jump and cut it off as quickly as possible, wouldn't you?

NUMBER TWO: Sure thing, I would!

NUMBER ONE: Well, isn't the gospel worth more than I am? Don't you think we ought to make haste and cut the ropes that bind its right hand down, and let it go free, so it can finish up the work that Jesus wants it to do before his coming?

MRS. JESSIE F. MOSER.

Dispensary Work at Najibabad, India

BERTHA A. KURTZ

ABOUT six years ago Sister M. Belle Shryock and myself were stationed at Najibabad to give the last warning message to the many thousands of this city.

As the medical work is the entering wedge to the gospel message, we began by fixing up a room in the house in which we lived for dispensary work. But it was not long before we were obliged to look about for a more roomy place in which to treat the many sick who were daily coming to us for help. The place to which we moved our dispensary, and which we still occupy, is not at all bad for dispensary work. But frequently we have patients com-

ing to us from distant villages whose condition is such as to require treatments oftener than can be given during dispensary hours. And then the question confronts us how to properly care for such, as the dispensary offers no suitable accommodations. By way of illustration:—A short time ago, a woman was brought to the dispensary who had been severely injured by a falling wall. She was suffering intense pain and was unable to move herself. She was brought from a village several miles distant, carried on a bed over rough roads and in the hot sun. I knew she would receive very little benefit from the treatments if she were to be carried such a distance every day, being jolted over rough roads, coming to and returning from the dispensary. The only place I had to offer her was a room in which the thirty or forty patients coming daily were treated. This was not a very pleasant place in which to be, with the children crying and some of the older patients moaning and groaning. But it was the best I could do for her. Nevertheless she stayed for nearly a week and when she left she was feeling much relieved.

From this instance, the like of which many more could be related, the great need of a place for dispensary work in which just such cases can be properly cared for, must be apparent to all.

Another great need is a room in the dispensary for the treatment of the better class of people, as owing to the caste system which is quite rigorously observed here, it makes it

difficult to treat both the high and the low classes in the same room. We are also crippled in our work by not having the instruments, etc., with which to carry on the work to advantage. Any one wishing to have a part in making the work at Najibabad a greater blessing to its sick and suffering, can do so by a little self-denial and by praying God's blessing on their offerings as they send them.

The truth of the statement that "the medical work is the entering wedge" has been verified in the work here, as most of the homes in which the gospel is being taught have been opened to us through the medical work.

It is also by means of the medical work that we are given an opportunity to present the gospel to the hundreds who come to us for help at the dispensary, as it is our rule here to first give the message of salvation through Christ and afterward the treatments. Thousands of pages of literature on present truth, also hundreds of the gospels are given to those who come to the dispensary for help.

We are of good courage as we remember the word of the Lord as recorded in Isa. 55:11, and we are trusting him to so prosper his word that many shall accept Christ as their Saviour and so have a part with him in his soon coming kingdom.

We crave an interest in the prayers of all God's people that we may know how to labor for those in heathen darkness and that they may be won for Christ.

Najibabad, India.

Kalyan Dispensary

MRS. M. D. WOOD

One of Many Experiences

THE scripture had been read, the people had been pointed to the coming King, as their personal Saviour. In a little while a crowd had gathered around the medical missionary as one by one they told her of their pain, their sufferings and their sorrows. Presently a little woman pushed her way through the crowd and presented her baby for examination. What a pitiful sight!

The mother's face was sad and pinched by hunger—anxious and careworn. The child of about twelve months was in a starving, dying condition. As soon as the poor woman saw our attention was attracted to the child she began: "I fall at your feet! I am a poor widow. My husband died the month before this boy was born. Daily I have worked in the fields and kept myself and the child alive. He has dysentery trying to eat my unleavened bread and red peppers. What shall I do?"

"Woman, give me the child, I will feed him," I answered. She looked at the crowd. They read her question in her eyes and cried, "Give it to Mamma Sahib." I urged her. He will surely die. I must save him if I can, I thought, and my heart ached for these poor people.

She stood looking at the child in her arms, then at the people around her, and then she looked at me. Finally the struggle was over and she bravely and firmly stepped forward

and said: "I reckon my son as dead, take him, you are his father and mother. Your God is good and great.

I quickly drew up a paper containing her statement that the child was given to me. As she could not read or write, I painted her thumb with ink, then pressed it firmly upon the paper as her signature which was signed by two witnesses—policemen—both waiting for treatment themselves.

I then arose to take my gift, and reached out for the child. She handed it to me at once, then gave one last look at her baby and disappeared in the crowd. I stood, looking, as she had done, at the child. Only a dirty piece of cloth was wrapped around him. His eyes were so large and black! His abdomen so distended! His arms and legs only bone and dry skin! His face so drawn as to appear like an old man. Near me stood a well-to-do high caste woman who exclaimed, "How could she give up her child that way? I could not." Immediately an old woman replied, "Of course you could not, you have not known hunger, you have not suffered what she has, you are not the one to judge her." Ah, how true! Time was flying. Over sixty or seventy people were waiting for treatment. I must attend to these. This was only one incident of the morning to me—to *her* it was a life's sorrow.

There was a light side to this dark picture. I called for Mrs. Kimble (Mr. and Mrs. Kimble were staying with us at the time) who came at once and said, "Let me have the

poor little thing and bathe it." His mother's loss had been his gain. Today he laughs, plays, sleeps, eats like all well-kept children. But friends, remember, his mother reckons him dead. She has never returned. We call him Chintoo. Pray for these poor people, there are many such cases. Let not these people cry out, "No man cares for my soul," but let us heed the Macedonian cry, "*Come over and help us.*"

Kalyan, India.

The Missionary Dollars and What They Do

[Each of the ten members who take part in the exercise should exhibit a round piece of pasteboard, covered with silver paper to represent a silver dollar.]

LEADER: MANY people wonder what becomes of missionary money anyway. You have always heard that money talks, and if you will listen today you will hear these ten dollars tell about the work they are doing on the other side of the world.

FIRST DOLLAR: "I have to begin at the beginning of the work. I get the young men and young women from the colleges and seminaries that are waiting to go as missionaries, and take them out to the countries in which they are going to work. I tell you I am an overworked dollar, and although I work just as hard and as long as I can, I am not sending all of the young missionaries that are waiting for me. There are many more waiting for me to make arrangements to carry

them. Can't you send some more dollars to help me? "

SECOND DOLLAR: "I'm the building dollar. After the first dollar gets a missionary to the field, I have to find him a place to live. You'd laugh, and I expect you'd cry, too, if you could see some of the places they have stayed while they were waiting for you to send me to get them a home. I tell you it is a shame the way some of the missionaries have to wait. I know one who has to put up an umbrella to keep the rain off her bed, and she has been waiting for me three years, but I have had so much else to do I just could not get there. Then I have to build all of the churches and chapels. My! but I'm a busy dollar. I know where there are millions of people without a single Christian church. Do hurry and send some more of me."

THIRD DOLLAR: "I'm the school bell dollar. Whenever you send me out, the school bell begins to ring somewhere. I'm running schools all over the world, but every day I have to see boys and girls turned away because my schools are all full and I do not have any more dollars to start others. I'm a very busy dollar. I have all the kindergartens to look after, too. Do you know that if you cannot be a missionary yourself you can employ a good native Christian teacher for ten or fifteen of me a month? She could be working on the other side of the world while you are working on this side."

FOURTH DOLLAR: "I am the hospital dollar. I send out Missionary doctors and

nurses and build hospitals and buy medicines. Wherever I go to work the people come flocking with the sick folks—the lame, the blind, and the crippled—just as they used to when Jesus was on earth. I have gone into many lands where there was not a single physician until I got there. I help over two million people every year, but there are so many others asking for help that it almost breaks my heart. They need more hospitals, and more doctors and nurses. If I had all of the other nine dollars I could use them every one in my work.”

FIFTH DOLLAR: “I’m the Bible dollar. I run nearly two hundred printing-presses all over the world to print the Bible and other Christian literature. I know you will see that none of the other dollars could get along without me. I have had a big job, too, to learn 360 different languages in which to print over two hundred million copies of the Bible within a hundred years. I am sure if you knew how much need there is for more copies of the Bible and other Christian books you would send more dollars to help me.”

SIXTH DOLLAR: “I am the evangelist dollar. You know the missionaries cannot do all the work by themselves, so they are training native preachers or evangelists so they can preach the gospel to their own people. Sometimes the evangelists preach in the churches, sometimes on the streets, sometimes from house to house, and sometimes they go on long tours through the country. You would be surprised to see the different

kinds of conveyances I hire for the evangelists in different parts of the world,—elephants, camels, horses, mules, donkeys, canoes, launches, steamboats, wheelbarrows, houseboats, jinrikishas, bicycles, and railroad trains. I keep busy all of the time.”

SEVENTH DOLLAR: “I am the Bible woman dollar. In many of the lands where the missionary dollar goes, the women cannot come out to hear the preaching. I get Christian women and train them as Bible teachers and send them into the homes to teach the women of Jesus. I could put many more Bible women to work if I had enough dollars a year with which to support them.”

EIGHTH DOLLAR: “I’m the orphan dollar. Every year, through war or famine, there are many little children left with no one to care for them. I look after them. I build orphanages and schools, and when missionaries rescue them I help care for them. Sometimes I can take care of an orphan for from \$25 to \$50 a year, for most of them live in hot countries where there are no coal bills, and they do not wear many clothes. I wonder why people in this country do not adopt an orphan in India or Africa. It would be a fine investment.”

NINTH DOLLAR: “I’m the ‘etc.’ dollar. You know when there are just too many things to mention, you write down all you can, and then lump the rest of them together under ‘etc.’ You have not heard about nearly all of the things the missionary dollar must do. The missionaries must have a furlough

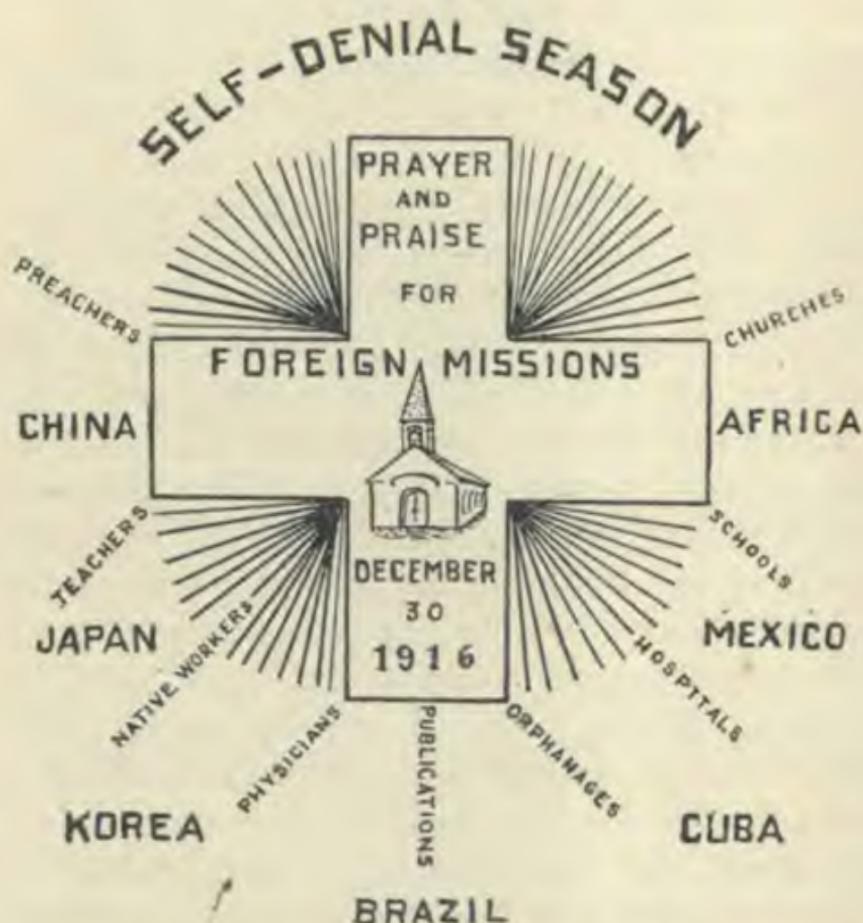
some time; there are rents to be paid, and repairs to be made on property. There are old people to be cared for and many that are in trouble to be helped. The other dollars have definite work to do, but there are calls for me from every direction. You know how many different forms of Christian work there are here at home and how many institutions there are to do it, and even then there are not enough, so you can just imagine what I have to do in heathen lands. I have worked so hard that I am worn thin. Oh, why aren't there more of me?"

TENTH DOLLAR: "I don't go abroad at all. I stay right here at home and keep all of the others busy, for I'm the business dollar. You may be very sure that I am not wasted either. You cannot find another agent anywhere that handles as big a business as I do at as small a cost. I furnish all the missionary magazines and programs. I pay the printer and the expressman and the telephone company and all other bills that come in. I stick the postage-stamps and send out the Thank-offering Boxes. I send the money to the missionaries and keep all of the accounts. I can do this for you cheaper than you can do it yourself. If you want to send a dollar to Japan it will cost you five cents for a postage-stamp and ten cents for a money order. I can put a thousand dollars together and send it for that. Sometimes I wish I could go with the others, but when I think about it I know I am doing more by staying at home and helping to get the other nine together and getting

them off. I tell you what you might do, though, if you want every one of these ten dollars to go direct, just tuck in an extra dollar for me." — *"Missionary Program Material."*

"If any man will come after Me let him deny himself"

Matt 16:24.



THE above drawing may be placed on the blackboard or nicely drawn on heavy paper, large enough so it can be seen clearly by the whole school. Refer to it as the suggestive program is carried out. Encourage both old and young to make a covenant with God by sacrifice. May every believer at this time truly say, "I will sacrifice unto thee: I will praise thy name, O Lord; for it is good."