A father and his two sons huddle together as they await assistance at the nutrition-health center at Lalibela.
3 Kids call me Father Jims
An American doctor chronicles his visit to Ethiopia.

7 Through the eyes of a teenage Christian
A university student journeys to Ethiopia to help the hungry.

11 A self-help legacy for Ban Vinai
A World Vision ministry among refugees comes to a close.

Also
9 A newsman’s view of Mauritania
15 Helping survivors at Bhopal
17 I still feel your suffering
18 Addicts lean on the Shoulder
20 Anno Domini and you
21 Is God calling you . . .
22 Samaritan sampler
23 Calcutta’s pastors’ conference
23 Serving the servants

TURNAROUND THOUGHTS
You’d enjoy reading my mail. Especially letters like this one from Richard Lareva of Twin Lake, Minnesota.

"While I was reading your February-March issue," writes Richard, "God impressed three thoughts on my heart. First, as I read that we should pray for rain in Africa, my mind said, 'But God told us to expect famine and such in the end times, so why bother?' God’s answer to me was, 'Are you sure these are the end times?'

"Second, I felt that no real progress could be made with people who often caused their own problems. God’s answer: 'Look what I’ve done with you!'

"Third, when I saw the photo of the child on the back cover, I felt warm at first, then something inside pushed the warmth away and I felt somewhat uncar-

ing. But God touched me with this thought: 'Yes, it hurts to see someone in pain. But if you choose to be one of my children, you will soothe that hurt with action, not apathy.'

"I understand now that I’ve turned my back on others in need because it hurts too much to look at it long enough to do something about it. I know now that the pain I feel is part of a cross to bear for Jesus. I will never again look away from true human need.'

Have you had turnaround thoughts like Richard’s?  

David Olson
Thursday, December 13

The last two days have been incredible—so much to do. I have never felt so completely needed and useful as here; the needs are overwhelming.

I have the responsibility for the less-than-60-percent-weight-for-height children—the most-starved and sickest. Making the rounds of the 40 or so children and mothers takes several hours. Many of the children are on the edge of death.

This morning I found three cases of meningitis (definitely meningococca—the epidemic kind that spreads through crowded living conditions). We treated the children immediately, but by noon those children seemed to be dying, with small but widespread hemorrhages in the skin, and a pale and shocky appearance. We told the mothers we weren't sure the babies would live. They started grieving.

We couldn't isolate the children; there was no place for them to go. I sent an urgent note to the Ministry of Public Health and called the local health officer, who arranged for us to get 900 doses of meningococcal vaccine. I also sent an emergency note by plane to Addis for rifampacin to treat our exposed staff, but I still don't know whether they have it in the country.

I called Addis on the town phone.
Hungry Ethiopians gratefully accept the food prepared for them at the nutrition-health center at Alamata.

last night. (We paid double for a "lightning" call and waited over an hour to get through, and then could barely hear.) We wanted to get a vaccine “gun” and stressed the importance of the vaccine and the prophylactic medicine for the staff. The government said we could have a truck to pick up the vaccine, but we can’t drive our vehicles or run our water purifiers because there’s no gasoline.

A pair of twins has chicken pox, one badly infected. Many children have pneumonia from the exposure and rain, or following measles. There are many skin diseases which, because we can’t wash the children, are almost impossible to treat. By afternoon, two of the meningitis patients died.

Friday, December 14
I went through the pharmacy stock and ordered new supplies and then made rounds. By that time, two things happened almost simultaneously: the vaccine arrived in a Coleman cooler with ice, and California State Senator John Garamendi, his wife Patti and some CBS news people arrived. John and Patti had been in Ethiopia with the Peace Corps in 1966-67. Three of our key medical people had just left on a plane for another camp at Lalibela and I just felt numb! We organized the vaccine program—had to give it all today as we have no refrigeration. I couldn’t turn around without having a camera or microphone in front of me. But the day had a very happy ending.

Debbie, a TV reporter from Sacramento, and Patti, John’s wife, helped me for four hours by holding children for vaccination. Bill, the cameraman, and Steve, a reporter, were filling syringes. Joanne, our nurse, was sterilizing needles in a pressure cooker over the cooking fires because our kerosene burner wouldn’t work.

Herb, a newspaperman, was the funniest. A former sports reporter in his 50’s with a New York accent, he had never before been out of the U.S. He was holding children for one of our

“Starved, sick and discouraged the refugees come—some having walked two days or more and often having sold everything except the filthy rags on their backs.”
Sunday, December 16

The refugees come—some having walked for two days or more and often having sold everything except the filthy rags on their backs. Starved, sick, discouraged, they come to our nutrition-health center. From the thousand or so people outside the gate, we admit about 200 of the worst victims each day. We now have more than 6000 that we feed daily in the supplemental, intensive or super-intensive wards (two, three or four times daily depending on how starved they are).

The very sick are sent to the clinic where one of the Ethiopian nurses or health assistants treats them.

Activity in the center starts at 5 a.m., when the people start to line up. We walk through the crowd at about 7 a.m. giving tickets to those who are starved (their tickets say "screening"), or to those who are sick (theirs say "clinic"). From then on, it's all day waiting in lines inside the fence to be screened or seen in the clinic. Sometimes people wait three days in the clinic line without being seen. A little girl died yesterday while waiting.

After screening, if they are below 60 percent weight for height, they go to Super Intensive Feeding; if 60-70 percent, Intensive Feeding; if 70-80 percent, Supplemental Feeding. In the supplementary wards, where they are fed three meals, they come in three shifts by the hundreds for a warm cereal made from Faffa, a flour mixture with a little sugar, oil and dried skim milk. In the intensive wards, they get four meals a day, and in the super-intensive wards, up to five meals a day. Some need to get nasogastric drip feedings.

Everyone must leave by 5 p.m., and most live without shelter on the hillside behind the camp. This past week has been cold at night, and we have had two heavy rains.

There is a Dutch doctor here, two American nurses, an American and a Ghanaian nutritionist. All the rest on the staff are Ethiopians. We work together very well and all live in a "hotel" in the town, built of straw and plaster painted pink, with concrete floors.

Our biggest problem continues to be lack of water. We have barely enough to make the food for the refugees. We do not have enough to wash them: to wash the infected eyes or the running sores on the children.
We continue to be hopeful that the problem will soon be solved with the help of some water engineers.

For breakfast we have bread and tea. For both lunch and dinner we eat ingerra (spongy bread) and wat (stew which you put on the ingerra and eat with your fingers). We usually have an orange a day, too.

The days are long, hard and hot, but there is a real joy in seeing some of the children getting stronger. They are really loving children, with beautiful smiles.

With four cases of meningitis in our super-intensive ward this week, we had to vaccinate almost 1000 children and put the staff on preventive treatment. We hope we will have avoided an epidemic.

Thursday, December 20
It seems like I've been here a very long time, but it's been only one-and-a-half weeks. Things have been so busy that each day seems like a week. It is difficult each day to decide how best to spend my time.

We still have almost no water in the camp, and yesterday we ran out of drinking water where we live. I smell so bad some days that even the ever-present flies are put off.

We ran out of needles this morning, so had to suspend our meningitis vaccinations. We have been unable to get vitamin A, which I urgently ordered my second day here. We see so much early and late vitamin A blindness—preventable and treatable in its early stages with one shot of vitamin A.

Peter, the Dutch doctor, is in Lalibela for two days, and I am doing the screening from 7:30-9:00 each morning. This is the most difficult thing I have ever done. Up to 1000 people daily, sit in front of the camp wanting to get in. We take children under five who are malnourished or sick, and mothers who are pregnant or lactating. We are only supposed to admit 50 per day. I picked 69 for feeding and about 30 for the clinic. It's a heartbreaking experience. I just keep asking God for wisdom and for forgiveness for not helping all.

Yesterday, a little girl about ten years old came in with her barely-alive, starved three-year-old brother, who weighed about 12 pounds. She was carrying him, treating him as though she were his mother. They are orphans whose parents both died on the way down here.

Some of the people, including some of the children, look like they have given up and will simply lie down to die. Many do die that way.

Many children hang on to us as we walk to and from the camp. It's not unusual to have six or eight kids running along hanging on to one finger each. They call me father or brother. Some of the older kids call me Father Jims. One boy I see every day has a partially paralyzed leg from an infection when he was little. He says: "Father, fix foot." I wish I could.

This week a 12-year-old boy was standing in line for food when someone threw a stone and broke his elbow. When I saw him, it was badly deformed and infected. I really worried about the infection of the bone and put him on the best antibiotic we had. But I realized that the best we could do was still only to give him a crippled arm or an amputation. I put him on the World Vision plane—all dressed in "real" clothes, happy as a clam—bound for a hospital in Addis. Please pray for him that all goes well. His name is Abade.

So far, I have been healthy. Living in such a sea of sickness, I know that it is an answer to many prayers that I am not ill. Because of the pace and emotional drain every day, I feel that I'll need to get away for a couple of days every two or three weeks.

Someone's radio is playing "White Christmas"—another world, so far away. Yet I know the Lord will continue to come into this place and into the hearts of people who turn to Him, just as He came to Bethlehem. It helps to know that Christmas is not only anytime He is born in someone's heart, but also anyplace. And perhaps His arrival is even more quietly earthshaking in a refugee camp.
At the beginning of this year, Liz Kliewer, an Azusa Pacific University student, spent two weeks in Africa, including four days in Ethiopia where she visited Addis Ababa and World Vision's Lalibela nutrition-health center. In this article Liz relates her impressions, despair and questions, and tells what it's like to meet and try to help people there who are hungry and dying.

As the Twin Otter plane began its descent, I caught my first glimpse of the World Vision nutrition-health center below. So many people were there, so many who were dying!

A sudden fear swept over me. Those people below would soon become real and personal to me. No longer would they be people in magazines whom I could quickly dismiss with a flip to another page. These would be people with feelings, emotions, pain and sorrow. I would become involved. On impulse, I wanted to turn the plane around and return home. But deep down I knew I really didn't want to leave.

We drove by jeep the short distance from the landing strip to the camp. The land was so dry and brown. I had never thought it would look as bad as it did.

Reaching the camp and walking among the people, I felt as if I were in a dream. Dying children looked at me with pain-filled eyes as mothers tried to comfort them. Weaving my way through the crowd, I heard a woman sobbing in anguish and sorrow. I turned to see her crawling in the dust, her hands covering her face. I knelt to comfort her and saw the tiny bundle at her feet. Her baby had just died.

Frustration and anger filled my heart. What could I tell her? That everything was going to be all right? That she could always have other children? That this was something she just had to live with? Tears began to fill my eyes. All I could do was hold her hands and cry with her. I thought of Jesus and how He would have walked among the people and comforted them. Words could not bring comfort. Unspoken compassion was all I could give this mother.

I turned and watched the doctor walk through the crowds. Because there was not enough food for everyone, he had to choose which people would be fed that day. What terrible pressure he must have felt.

I stood up and walked along with him. A young mother about my age lifted her frail child for the doctor to see. Looking at the mother he shook his
Wherever she walked at Lalibela, Liz found children following and clinging to her.

head. "No," he gently told the woman, "there is not enough food for your child today." I looked in the mother's eyes and could see and feel her desperation. She would have to wait yet another day to feed the one she loved so much. It all seemed so insane.

My thoughts were interrupted by a firm hand on my shoulder. I turned to see a staff worker with a package of protein biscuits in her hands. She wanted me to feed the children. I hesitantly took the package and began handing the biscuits to them. I tried to give one to a little girl, but she would not eat it. What was wrong?

A staff worker explained that since the girl had not had food for so long, she had forgotten how to eat. I was shocked. I sat down in the dirt and cradled her in one arm and began to feed her with my other hand. After a long while, she looked up into my face. I will never forget the expression in her eyes. It was as if she saw me as an angel giving her life.

Nothing could replace that special moment. Yet it all seemed so unfair. Why did this little girl have to suffer so much? Did people back home realize what was going on here?

As I fed some of the children, doctors weighed others on scales. One tiny girl who sat on a scale weighed only 22 pounds. I couldn't believe it. It had to be wrong. I looked at the scale and asked the doctor how old she was. "Thirteen," he replied! Can this really be a part of our world?

I wondered if that little girl knew anything about the "other" world where people eat too much; where people laugh and smile and worry about new clothes and new cars.

I walked to the edge of the camp and looked down at the barren valley below. It was starting to get cold and dark. Soon the temperature would drop to the 40s, and these people would have to sleep outside with no shelter or blankets to keep their bodies warm.

People would die that night and there was nothing I could do about it. Helplessness and frustration swept over me.

Then I felt a frail cold hand slip through my fingers. Looking down through my tears, I saw a little boy at my feet. He smiled at me. Even in the face of death, this little boy was able to smile. He had a hope which I could not even grasp. I picked him up and held him tight. His body was so weak and thin. He wrapped his tiny arm around my neck and I saw that his wrist was the size of my two fingers. I wanted so much to tell him that I loved him and that I would never let him die.

"Please don't die," I whispered in his ear. He just hugged me tighter. There was so much love in this dying child.

After some time, I tried to put him down. But he kept clinging to my neck. I carried him back to the camp. There the little boy's mother took him from me. As they slowly walked away, I wondered if he would be alive the next morning.

Suddenly I felt like an old woman. I had seen so much that day. I was tired.

Walking to the tiny cement room where I would spend the night, I wondered if I would be able to sleep. I felt my way to the cot and lay down. As I lay there, thoughts of all those people huddling outside in the cold began to haunt me. All they want to do is live! Shouldn't they have this right?

Closing my eyes, I prayed for the little boy I had held. I thought of my friends back at school and how much I wanted to tell them that we must help. In the United States, it sometimes seems that we live in a plastic bubble. We think that everywhere else is like our country. So many times we forget about the needs and hurts outside our comfortable plastic world. We try to avoid the problems which we think need not concern us.

I thought of Jesus. How He would have wept with the mothers and held the dying children. He would not have turned away from them. We must not do that either. "I tell you the truth," He said in Matthew 25:40, "whatever you do for the least of my brethren, you have done it unto me."
Life is full of surprises, but some of them—the surprises, that is—shouldn’t be. Why be surprised that the boarding music on Air Afrique’s flight 33 from Charles de Gaulle Airport in Paris to Nouakchott, Mauritania, was African music: chant and reply, chant and reply, chant and reply?

Most of the rest was familiar enough. No more Arabic was heard. The announcements were made in French and English. The aircraft was an A300 Airbus. Pillows and blankets came wrapped in plastic. The air sickness bag was in the usual place, as were the safety instructions, and the headphones for the in-flight music, which covered the usual range and included some Beethoven, Mendelssohn, and Mozart; and there was a slick in-flight magazine, published in Paris. The stewardesses were not in uniforms but in colorful and all-enveloping blouses and ankle-length skirts.

Here was a difference: We left Paris at midnight, on schedule, so the movie began at ten minutes to two in the morning, and the light the screen gave off did not encourage sleep. It was a British movie, a couple of years old, translated in French as “Trahisons Conjugals.” The stars were Jeremy Irons and Ben Kingsley, two men interested in the same woman, who...
was the wife of one of them. I gathered from an occasional more or less involuntary glance at the screen that the men did a great deal of drinking and looking each other in the eye en route to working things out in what is known as a civilized manner. The film’s original sound track could be heard on one channel and a dubbed French version on another.

There was also something that distinguished the in-flight magazine from others. It carried an article on famine, of particular interest to me because I was going to Mauritania, in West Africa, as part of a television team working for World Vision. The article, by a historian named Elikie M’Bokolo, was in French, with a brief summary in English. It set out to show that famine, of particular interest to me because I was going to Mauritania, in 1639 and 1954. The cause? The melting of the polar ice cap in the north of Europe 7000 years ago, and consequential changes in climate that led to the death of forests and vegetation in the Sahara, less rain, drier air, the disappearance of animal life. Then came overgrazing on what was left, and burning for firewood what was left after that.

As one read the article, one sensed that the present famine is not only a calamity almost unimaginable but also a source of shame to many Africans. The principal thing the rest of the world knows about their continent these days is that millions of Africans are starving and only outsiders can hope to save even a fraction of them.

The article concluded with two points. The first was that modern means of communication, by making these catastrophes known almost instantly, also help to make them “plus banâles,” meaning more common, more ordinary. The other was that the accumulation of means of understanding and remedying “ces phénomènes” offers hope of better days to come. This sounded more dutiful than genuinely optimistic.

At the airport, at four in the morning, the officials, policemen, baggage handlers, drivers, appeared to be in reasonable health and spirits. So did the half dozen passengers waiting for flights, including a family of four asleep on blankets spread on the floor. At the hotel, ten minutes away on sand dunes near the ocean, the employees looked all right, too. These were, however, people with jobs. The light of day in Nouakchott was to show a grimmer picture.

In the early afternoon, we left our hotel and drove past arid land and sand dunes, past slums where people lived in tents, and in huts made of wooden slats, corrugated iron, and burlap bags, and past better sections, too, and street markets, until we reached a nutrition-health center. It was one of our filming locations. Children who are admitted there, like the one with matchstick arms, “qualify” by weighing less than 70 percent of what they should in relation to their height. The building at the center was full, so the mothers sat in the shade of some trees, though trees, especially with leaves, are not easy to come by in Nouakchott. The mothers sat on the ground all day. Their only purpose, and their only activity, was exactly that—to sit there so that their children could be kept alive by being fed six times a day. Catholic Relief Services, we were told, had supplied the food.

It was not something to take in stride: flies everywhere, more flies than you believe the world could support; the women holding babies in advanced stages of decline, many of them not moving at all, some strong enough to let out an occasional whimper or wail. To do your videotape segments, you sat or crouched among them, resisting the natural temptation to attract a baby’s attention, obeying strict instructions not to touch any of the women, even accidentally. They were, by the way, nomads, but their land had gone dry, their animals were dead, the husbands of many were away, working wherever they could find jobs, and the city was the last hope of survival.

It was not clear whether they understood what we were doing; some may have been too tired or weak or discouraged to care. Or perhaps they had seen television teams before. Still, they cooperated, moving when asked to, turning the babies toward the camera, remaining silent, which they seemed disposed to do, anyway. And there you are, well fed, clothed, and shod, a hotel room—rudimentary but clean—to go to, and an airline ticket out after a few days, speaking now to a camera, touching the shoulder of a particularly wasted child as you use the words, “millions of children like these.”

Conditions at the nutrition-health center were less bad than I had expected. There were flies, millions of them, it seemed—“Don’t brush away the flies when we’re shooting, Ed,” the director said, “I’m not seeing them.” The children were not only emaciated; their hair, or lack of it, or its washed-out color, said something. Many had shaved heads, because of infection. Many had sores. Some drooled and dribbled. Most only stared. But there was no smell of death or disease; some of the children were said to be improving; and devoted people, local and foreign, were running things.

Yet the picture lingers, of dozens of women sitting on the ground for hours on end, cradling their babies, willing them to remain alive. At sunset, they left the center for whatever they called home, to return in the morning—if they still had a reason to.
The World Vision staff worked itself out of a job

A SELF-HELP LEGACY FOR BAN VINAI

Ceremonies on September 14, 1984 marked the end of an era for World Vision Foundation of Thailand (WVFT). After nine years of assisting Laotian refugees (mostly Hmong), World Vision's responsibilities at Ban Vinai refugee camp were turned over to other agencies. But WVFT leaves behind a legacy of medical care to thousands, as well as agricultural and vocational training, primary education for children, water and sanitation inputs, and caring support for the Hmong church.

The past two decades have been turbulent ones for the countries of Southeast Asia: Vietnam, Kampuchea, Laos and to a lesser extent Burma. As a relatively stable country located at the center of the storm, Thailand has been host to more than 600,000 displaced Indo-Chinese during the past ten years. When refugees began fleeing to Thailand in large numbers in 1974 and 1975, government and aid leaders felt that the problem would be quickly resolved. Instead, the situation proved to be complex and difficult to solve.

World Vision Foundation of Thailand was one of the first agencies to minister to Hmong and other Laotian refugees when they began crossing the Mekong River in 1975. For the past nine years, World Vision has been the lead agency in the Ban Vinai refugee camp. These young men from the Hmong tribe study Scripture to become more effective church leaders at the Ban Vinai refugee camp.
Watt Santatiwat, World Vision director for Thailand, addresses those gathered to bid farewell to World Vision camp, coordinating the work of other agencies and providing medical care. However, with the condition of the camp stabilized, it was decided that there was no longer a need for emergency relief aid, and that other agencies (and in some cases the refugees themselves) can now take over tasks previously performed by World Vision personnel.

Until the border was officially "closed" by the Thai government in January 1982, World Vision personnel provided food, clothing and emergency care to refugees arriving in Thailand. "World Vision had people right on the spot to help," said Doug Millham, World Vision program director at Ban Vinai for the past two years. The United Nations High Commissioner for Refugees (UNHCR), who had ultimate responsibility for the care of the refugees, could not assist until the refugees were in camp and processed. So World Vision and other agencies provided blankets, clothing, pots, pans, mosquito nets and medicines for the new arrivals. Doctors and nurses met the refugees as they stepped out of the water.

In September 1975, the Royal Government of Thailand donated land for a refugee camp. UNHCR became involved, and World Vision and other agencies stepped in to provide medical and other emergency care for the refugees. Watt Santatiwat, now director of WVFT, remembered the early days of Ban Vinai. "I went with Paul Jones on a survey trip soon after Ban Vinai opened. The road to the camp was very muddy and covered with potholes, and it took several hours to travel from Loei to Ban Vinai." After the difficult trip, he was surprised to see how pleasant the camp actually was. The houses were built terrace style on a hillside and were surrounded by trees and shrubs. At the time, the camp population was only 12,000. (Official census today is 44,000, with another 4000-5000 believed to be living there illegally.)

Except for technical personnel like doctors and nurses, most of World Vision's project work was done by refugees themselves.
By the end of 1975, the refugee camp was established, and World Vision had provided doctors, nurses and other relief personnel. The Royal Thai Government has ultimate authority over the camp, but UNHCR is responsible for housing, feeding and providing other care for the refugees. As in refugee situations around the world, UNHCR seconded this duty to voluntary organizations like World Vision. The final level of responsibility, explained Millham, lies with the refugees themselves. Except for technical personnel like doctors and nurses, most of World Vision’s project work was conducted by refugees.

Referring to the expatriate personnel, Millham explains, “We simply try to supervise the refugees in caring for themselves.” During its nine years of operation at Ban Vinai, World Vision trained more than 350 refugees as public health workers, 28 refugees and one Thai national as medics, 72 refugees as nurses and more than 60 refugees as pharmacy workers and laboratory and X-ray technicians. Some 150 refugees were trained as teachers. And more than 800 refugees and 60 Thai nationals were trained as project staff.

Santatiwat explained World Vision’s role in providing camp leadership as follows: “We were able to gain respect and tie together all of the services into one integrated program, despite the different types of organizations (both Christian and secular) which were working in the camp. We felt that in our role as coordinator, we faithfully served the refugees and united the voluntary agencies in the same common purpose. We were able to channel requests or problems through other agencies working in the camp.”

Ban Vinai’s public health program began in 1979. The hospital, which World Vision had helped build, was expanded, and public health workers were trained. Some 250 people a day visit the outpatient department of the Ban Vinai hospital. (About ten percent of the patients are Thai villagers.) The hospital also has two pediatric wards and one adult ward. The buildings were partially funded by UNHCR, with supervision and funding from World Vision. In the two pediatric wards, entire families often stay with their sick children and assist in their treatment.

Another major area of World Vision involvement at Ban Vinai was in education and vocational training. “In 1980 we saw 7500 primary-age students sitting in a camp with no schools—tremendous minds going to waste because they weren’t being educated,” Millham said. “So World Vision built schools, trained and supervised about 150 refugee teachers, and provided books and other school supplies.”

Although World Vision was responsible for supervising the schools for...
This gift shop provides income and a sense of self-worth to widows at the refugee camp.

World Vision-employed Hmong refugee artists prepare public health posters used to teach basic health principles to camp residents.

Hmong refugee children such as this one, benefit from free classes taught in Lao and the host language, Thai.

three years, the Catholic Office of Emergency Relief and Refugees (COERR) joined the program soon after it began. Responsibility for overseeing the education of the refugee children was turned over to COERR in 1983. Millham said the program continues to be run well, with American Jesuits providing some of the instruction.

Vocational training was offered in several areas. More than 1200 stoves were made in one program and are being used by the refugees for their own cooking. Another project, funded by the United Nations, taught refugees to make water jars out of concrete.

The jars hold 200 litres each of collected rainwater for use in cooking, drinking and bathing. More than 8000 water jars are now in the homes of the refugees who made them. The refugees also were taught animal husbandry and fishery skills under a cooperative program with the Thai government.

World Vision and other Christian agencies, such as The Christian and Missionary Alliance, are active in supporting the Hmong church. "About 15 percent of the refugees are Christian," Millham said. "They arrived here with a very strong indigenous church. But many groups had never met one another because they lived in different parts of Laos. When they arrived here, they found that they had a nucleus for a very solid community of believers."

WVFT’s work also has extended to the Thai nationals living around Ban Vinai. Pak Chom District is extremely poor, with the average family income less than $100 a year. People from the surrounding communities use the Ban Vinai medical facilities free of charge and also participate in agricultural and vocational education programs. WVFT’s childcare projects are assisting 350 children and their families in Pak Chom District.

Over the past nine years, World Vision provided nearly $4 million in aid to Ban Vinai. Also during that period, WVFT assisted thousands of refugees along the Khmer border.

Ban Vinai is now in a "maintenance mode," with the emergency period past. "WVFT feels that its main objective is to assist in a crisis, but not to become involved in camp maintenance," said Santatiwat. "Ban Vinai is now operating smoothly."
When it happened,
Kamalabai Kushva was eight months pregnant. Her husband Phul Singh was on duty at a textile mill where he worked as a cloth weaver. They had three children: a daughter twelve years old and two sons, two and three years old.

On December 3, 1984, about 1:00 in the morning, methyl isocyanate (MIC) gas began leaking out of an air vent at the Union Carbide factory in Bhopal, India. Within a couple of hours, 40 tons of the extremely hazardous chemical blanketed the most densely populated areas of the sleeping city. Kamalabai Kushva’s family was but one of thousands affected. Over 2500 died.

Phul Singh Kushva died as a result of the industrial accident. The rest of the family survived but are still suffering the effects. Kamalabai experiences eye irritation and cannot see clearly. She has headaches and chest pains. Her concern for her newborn baby and the future of her family add to her physical and emotional agony. And although her other three children have partially recovered, they are still in a weakened state.

Kamalabai is now solely responsible for her entire family. She represents a large number of women who lost their husbands in the tragedy. They find themselves widows, without skills and without a source of income. But fortunately, they are not alone.

In response to the disaster, World Vision, in partnership with other agencies, is bringing some hope to people like Kamalabai. It has committed $15,600 to provide emergency food, clothing, blankets and medical supplies.

While many of the recipients are widows with children, this elderly man is among those who also need relief assistance.

Slowly, people are picking up the broken threads of their lives.
It has distributed 10 kilograms of rice and 20 kilograms of Gram-Dal (a variety of split pea) per family to about 7000 families. Widows have received extra rations.

Three thousand other less-needy families have been given smaller amounts of Gram-Dal. Approximately 50 widows and children were given blankets. And 2000 people have received World Vision-purchased medicine for chest pain and sore eyes, which was distributed through Missionaries of Charity. World Vision also sent a medical team to Bhopal to distribute medicines and administer treatment.

In cooperation with a local church, World Vision is working to establish a day-care center for the children of widows whose husbands died in the disaster—widows like Kamalabai and many of her friends. The organization has also opened an orphanage for at least 25 children who lost their parents as a result of the accident.

At present, the future looks bleak for many of the survivors. Horror is still visible on some of their faces. Yet slowly, people are picking up the broken threads of their lives. As Christians respond with acts of compassion, they are helping citizens of Bhopal to do just that. And as hope is fostered through ministering as Christ calls, the primarily Hindu community can see His light in their city.
An open letter
to my African hosts

I STILL FEEL YOUR SUFFERING

by Rory Starks

Tonight I sat at my own table to enjoy my first home-cooked meal since my visit to your country. After nearly a month, I looked forward to eating my wife’s cooking again. But I had difficulty eating. My thoughts drifted to you and your country. Just 36 hours ago, I was with you. I had been a guest in some of your homes. Now I keep remembering the words of one villager: “We are very thankful to God because we now get two meals a day.” Two meager meals, he might have said.

Sitting tonight at our own well-laden table, I felt guilty. I could not finish my dinner. Why, I wondered, am I so fortunate, while you and your people struggle daily just to survive? There was no answer. I wept.

Back at work, people asked me, “How was your trip?” I had no adequate answer. I just said, “Great,” or “A real experience.” How can I share with them the impact my being with you has had on my life?

I remember sitting with a woman and her infant who had traveled five miles in mountainous terrain to find food—and who had found none. Yet she was doing everything possible to keep her children fed. She was fighting for her life and the life of her family. For a moment I felt her suffering and shared her feeling of hopelessness. How can I communicate this to someone else so they can feel what I felt?

Tonight I watched the sunset from my front porch. Again I thought of you and your people. As the sun dropped slowly beneath my horizon, I knew it was rising there on yours. My family is settling in for the night.

We have a comfortable place to sleep. My young son is well fed and will not know the pangs of hunger the new day may bring your children. I thank God that He has provided so abundantly for our needs. But what of your needs?

Sometimes I feel that I have seen more than I want to have seen of your life. A selfish part of me wants to wear blinders and get on with living as if all were well with the world. But all is not well. You are suffering and I’m connected to you by our common humanity.

I will relate what I have seen in your country. Although there was much good—your people, your beautiful land—I feel that I must share the darker side of your existence: suffering mothers struggling to feed their precious children; malnourished and diseased children unable even to stand, so weakened are they by hunger; and fathers stripped of their dignity because they are unable to care for their hurting families.

I am struggling with how to end this letter. For in ending it, I feel as though I am somehow deserting you. But I will not forget you, your people and your country. My time with you has burned its way into my heart and soul. I hope in some way to communicate my new burden to others in my own comparatively wealthy land.

Rory Starks, manager of World Vision’s direct mail programs department, recently visited the famine-stricken African countries of Ghana, Kenya and Zimbabwe.
Challenge for a new life

ADDICTS LEAN ON THE SHOULDER

At the peak of her drug use, Rhonda popped 30 pills a day. Yvette’s cocaine addiction started out as “having fun.” Mike constantly drank alcohol because he felt sorry for himself. And Angie, a heavy user of amphetamines, sat on bridges for hours, wanting to jump.

Today, thanks to a place called the Shoulder, the lives of these individuals are dramatically different. They are all free of their addictions and living healthy and productive lives.

The Shoulder, begun in Houston, Texas, in 1977, is a residential treatment program for men and women with drug and alcohol problems. It provides a place for people to “get straight”—to free themselves from their addictions and begin to change their lives. Donald DeVos, amiable founder and executive director of the Shoulder, describes it as “a refuge from the present, a place for gaining insight into the past, a home in which to prepare for the future—an environment supplied with the nutrients of understanding and love.”

The program, whose slogan is “A challenge for a new life,” is designed to last a minimum of 12 months. When a person is admitted to the Shoulder, he or she is provided with living quarters, food, medical, psychological, and dental care and nutritional and vitamin supplements.

A treatment team is responsible for dealing with each resident. Individual counseling and group therapy sessions are scheduled regularly. Vocational training and physical fitness are stressed. Once an individual is physically and emotionally capable, the Shoulder assists in securing suitable employment. No fee is charged until a resident becomes gainfully employed. Only then is he or she required to pay anything.

The Shoulder has both a men’s and women’s facility. The men’s facility currently houses 230, and the recently completed women’s facility, 100. Both encourage recreation and continuing education. For those who do not have a high school diploma, classes are held weekly. Private tutors are available for reading, writing, math and speech problems.

Also, there is a chapel area which is considered the focal point of the Shoulder. Chapel is held twice a day. The morning devotional is conducted by a staff member; the evening devotional is led by area lay leaders who give inspirational messages to the residents, encouraging their progress and reinforcing their goals.

The best description of the Shoulder comes from residents and former residents who have been a part of the program. Rhonda, for example, came to the Shoulder because she was taking up to 30 mandrix a day. Describing the effects of the drug, she states, “Mandrix makes you numb. You can’t walk so you crawl. You lose control and forget your problems.” After going to jail for drug abuse 10 to 12 times in one year, she entered the Shoulder program with the help of her mother.

“The first two weeks I was here, I didn’t say a word. I just stayed in my room,” Rhonda remembers. “Then I rededicated my life to Christ and it hasn’t been the same since.” Her family relationships improved and she gained a sense of control over her life. After several months at the Shoulder, Rhonda was able to leave, find a job and a place to live, and begin handling her own finances.

“If you stay with God and keep praying, you can handle life straight,” she comments. “It’s scary at times, but it feels pretty good.”

Like Rhonda, Yvette, a 34-year-old woman once addicted to cocaine, found Jesus Christ when she entered the Shoulder program. The first day she was there, she committed her life to Christ. After only three weeks she began helping the staff in the office and working as one of the assistant resident managers.

Unlike many drug users who begin as teenagers, Yvette was 28 years old when she first began to experiment with drugs. A friend introduced her to marijuana and that led ultimately to cocaine. Her habit became so addictive that she contemplated suicide. Fortunately, Yvette was directed to the Shoulder.

“At the Shoulder I experienced love and caring. I learned discipline and unselfishness. It’s like someone turned the light on,” she says.

The “light” was also turned on for a man named Mike who entered the

Rhonda: “It’s scary at times.”

Mike (with DeVos): “I’ve learned that I’m worth something.”

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center in June 1984. At that time he weighed only 90 pounds.
During his college years Mike had been drafted and sent to Vietnam. Embittered when he returned, he felt alienated from his family, friends and society. At first he drank occasionally, but not excessively. Eventually, though, he could no longer control his drinking, he lost his job and became deeply depressed. Then, at the request of his family, Mike came to the Shoulder.

"My life at the Shoulder has taught me that I'm worth something. The Lord still loves me," says Mike. Now he is working on staff at the Shoulder as an intern counselor. He plans to go back to school to study law.

Angie also had a drinking problem, but in addition, she was addicted to amphetamines. She started drinking at the age of 13, and would often drink almost a liter of alcohol before school events such as ski meets.

Angie realized that if she wanted to make something of her life, she would have to quit drinking. She succeeded for two years in high school but then succumbed to peer pressure and began to smoke marijuana. After that, Angie was introduced to amphetamines. By her senior year, she was shooting once a week. In college her habit amounted to about $150 a day. She knew she had to stop.

"I was getting suicidal," she remembers. "I'd sit on bridges for hours, wanting to jump. Then someone recommended the Shoulder. I was scared, but decided to give it a try."

And she's glad she did. "The Shoulder is a microcosm of a real Christian society. The staff members care about people and people care about each other. All of your spiritual, mental, physical and emotional needs are taken care of," according to Angie.

Not every resident's experience is such a success story. Although the recovery rate is high, there are some who leave and go back to their old habits. Others reenter to start the rehabilitation process all over again. And for those who manage to stay "straight," there is often still the desire for "one drink," "a few pills," or "a quick snort." The Shoulder, recognizing these temptations, tries to deal with the whole person during treatment so that individuals will have adequate resources to draw upon when those temptations occur.

Also, DeVos states, "All sorts of consequences follow alcohol and drug abuse—the broken relationships, the crime, the legal battles, lost jobs and physical impairments. We try to help in as many ways as we can to make sure our residents succeed."

Through the years, the Shoulder has developed a good relationship with the Houston community. Referrals come, not only from all over Texas, but from other states as well. The program has been found to be a sound alternative to jail and a workable community rehabilitative service. Because of its success, a pilot project has been started with the Texas Commission on Alcoholism. The project allows those who have committed no offense other than public intoxication to go to the 24-hour clinic at the Shoulder rather than to jail.

The Shoulder has been described by the executive director of the Texas Commission on Alcoholism as a unique program for long-term care. Part of its uniqueness is its foundation which is based on love, faith and hope in Jesus Christ. As the staff lean on His shoulder, they are able to effectively give their shoulders to others—to lean on and grow on. And as they do, they enable those with pasts marred by drug and alcohol abuse, to accept the challenge of a new life.

Founder-director DeVos: "We try to help in as many ways as we can."

For more information write Director DeVos at the Shoulder, Box 4300, Houston, TX 77210.
"A.D." (Anno Domini), the television series showing on NBC stations from Palm Sunday through Maundy Thursday, is a dramatic retelling of biblical and historical events in Christianity's early decades. It highlights powerful episodes in the lives of apostles, emperors and various other real and imagined persons between 30 and 68 A.D.

In the opening scenes, Roman soldiers take down the crosses on Golgotha. Through the eyes of a small band of disciples, we see a new convert to Christ. And, at various times during the next 12 film hours, we see—along with much else in the mix of fact and fiction—several other new converts, all from the Bible's Book of Acts. Stephen. The Ethiopian official. Cornelius. Saul.

How well worth pondering is the meaning of those biblical accounts of deliberate personal commitment to the Christ of Golgotha who lay dead for three days and then rose again, instructed His disciples, ascended to heaven with a promise to return, and—until He comes back—prays for His people daily!

To choose to be truly His in a come-what-may commitment is the greatest decision anyone can make. And today, as in those early decades after He gave himself to redeem us from our sins, many make that crucial decision. But many others never get around to it. To their inestimable loss, their neglect is in effect a choice not to become His.

This choice is far too important to neglect or postpone. If you, reader, have not clearly answered Jesus Christ's call to salvation and discipleship, what could possibly rate a higher priority?

For light on what that really means, turn hearing ears now to the 21 short chapters of the Bible's Gospel of John, not overlooking the reminder in 20:31: "... these are written that you may believe that Jesus is the Christ, the Son of God, and that by believing you may have life in his name" (RSV). Let this day in A.D. 1985 become the major turning point in your personal history!

For a free copy of the Inter-Varsity Press booklet, "Becoming a Christian," send your request to WORLD VISION Editor David Olson, 919 W. Huntington Drive, Monrovia, CA 91016.

INTERNATIONAL OFFICE

Director, Corporate Planning  To be responsible for the corporate planning process and for assisting managers in the identification of critical issues in the development of long-range plans. Must have extensive related experience. Contact: Kent Stock, Employment Supervisor.

Macro Project Team  Professionals working according to their particular discipline in a team context to research, develop and implement a regional development plan. Positions require extensive previous experience including Two-Thirds World experience with project management experience highly desirable. Must be flexible and adaptable to a variety of living conditions. The following personnel are required to make up the team:

- Hydrologist
- Economist
- Agriculturalist
- Financial Analyst
- Community Planner

Contact: Kent Stock, Employment Supervisor.

AFRICA

Ethiopia, Nutritionists  To assess and treat nutritional needs of famine victims; involves organizing and training of national staff in Ethiopian nutrition-health centers. Needed immediately. Requires nutrition, dietetics or M.P.H. degree and previous Two-Thirds World work experience. Six months minimum contract. Contact: Pam Kerr, World Vision U.S.
Students from Fresno Pacific College glean oranges for the Fresno Christian Gleaners' program.

Produce that would otherwise be wasted is channeled to those in need by the Christian Gleaners, a ministry of the Fresno, California, branch of Evangelicals for Social Action. Based on biblical precedent, the group contacts farmers to obtain permission to glean fields, and negotiates with packers to obtain edible products not up to supermarket standards. Local church groups glean, and the food is distributed to agencies that aid the needy. The Fresno gleaners would like to network with other such groups to share ideas and resources. Contact Alan Doswald, Christian Gleaners, 1434 Fulton St., Fresno, CA 93721.

Speaking teenagers' language, Campus Life magazine offers constructive, upbeat discussion and information in a Christian context: interesting feature articles; practical ideas for coping with and improving relationships with friends, parents and teachers; straightforward perspectives on sex and dating; education and career guidance; inspiration for spiritual growth; realistic analyses of values expressed in the media; biblical, down-to-earth advice on write-in problems; suggestions for recreational activities, and more. Subscription: $14.95/year, Box 1947 Marion, OH 43305.

Close access to the port cities of Savannah, Georgia, and Jacksonville, Florida, is a primary reason for the upcoming move of MAP International from Carol Stream, Illinois, to Brunswick, Georgia. The two port cities will be departure points for MAP's medical shipments to mission hospitals. Each year, the organization provides some $15 million in donated medicines and supplies to 450 mission hospitals in 75 developing countries. For more information contact Pamela Pearson Wong, (312) 653-6010, or write MAP at P.O. Box 50, Wheaton, IL 60187.

A master of business administration program with an emphasis on economic development in the inner city and in developing countries is now being offered by Eastern College, a Christian liberal arts school located near Philadelphia. The program "aims to equip students with the skills needed to assist local populations establish and manage the type of businesses and industries that will strengthen the economic base and lift people out of the cycle of poverty." For more information, write: MBA Program, Eastern College, St. Davids, PA 19087.

Evangelism is the theme of three series of workshops scheduled at the Billy Graham Center, Wheaton, Illinois, for this summer: Evangelism Strategy Workshop (June 17-21), Preaching for Commitment (June 24-28) and Witness of Women (July 8-12). For registration information, write: The Billy Graham Center, Wheaton, IL 60187.

When 30,000 just-printed New Testament Picture Bibles (text in Polish) arrived in Poland recently, it was a time of great joy for pastors and Christian leaders waiting eagerly to receive them. Trucked in from France with government permission, the Bibles are part of the David C. Cook Foundation World Bible Pix project.

Global concerns of evangelical women will be addressed by the Commission on Women's Concerns, a newly organized commission of the World Evangelical Fellowship. A steering committee of six women from as many countries has identified encouragement, fellowship, communication, and outreach as the means by which women's needs can best be met. Led by Beatriz de Zapata of Guatemala (named executive secretary by the WEF executive council), the committee adopted three broad-spectrum initial projects, including the providing of resources for training women in basic counseling skills. For more information contact World Evangelical Fellowship, P.O. Box WEF, Wheaton, IL 60189.

In Northern Ireland, a united effort in evangelism of young people is planned by Belfast-based International Youth Bridge during 1985's International Year of Youth. A simultaneous province-wide intensive outreach supported by youth groups, fellowships and churches is scheduled for the last two weeks of August. In line with IYB's cross-cultural emphasis, groups are being challenged to bring young Christian leaders able to communicate in English, from as many nations as possible for the August campaign. For more information, write International Youth Bridge, 152 Lisburn Rd., Belfast BT9 6AJ, Northern Ireland.

People Like You, a new 16 mm 30-minute film, features Lutheran Bible Translators' work among the Krio, Limba and Loko people in Sierra Leone, West Africa. The film expresses appreciation for the near-completion of the Krio New Testament, and stresses the need for continued support by "people like you," so "that every tongue should confess that Jesus Christ is Lord" (Phil. 2:11). It is available for showing, free of charge, from Lutheran Bible Translators, 303 North Lake Street, Caller Box 2050, Aurora, IL 60507-2050.

Hope for Victims, Youth For Christ's child abuse seminar, is scheduled for May 9, 1985 at Azusa Pacific University, Azusa, California. Registration is $25. For more information, call or write: Thomas L. Morris, Youth Guidance Programs/Youth For Christ, 461 N. Grand Ave., Covina, CA 91724; (818) 331-0066.
New optimism prevailed in the conference of West Bengal pastors last January. India’s Christian minority (2.6% in 1975) had grown to 5%. Word was out that the new Prime Minister wanted religious freedom for everyone. Hindu-Sikh tensions, inflamed last year by the assassination of Indira Gandhi, were abating. And Christians’ compassionate help for victims of the recent Union Carbide disaster in Bhopal was opening hearts to the gospel.

The conference was West Bengal’s first in 25 years. Several recalled the impact of the 1959 conference in which World Vision’s founder, Bob Pierce, was a prime mover.

The Most Rev. D.C. Gorai, moderator of the Church of South India, chaired this year’s conference, held largely in an open-sided tent on a playing field at St. Thomas School. Postponed twice since planning began in 1980, the event drew 485 participants from a wide spectrum of churches, Pentecostal to High Church Episcopalian. Also attending were the 47 students of Calcutta Bible College, many of whom were of the Naga tribe. Leaders from World Vision’s central office were Dr. Ted Engstrom and native-of-India Dr. Sam Kamaleson, who heads World Vision’s Pastors’ Conference ministry worldwide.

“India’s young ministers possess not only a clear vision for ministry to their own countrymen,” observed Engstrom on his return to California, “but a truly Christian worldview, which they articulate well.”

While in Calcutta, Engstrom visited Mother Teresa, who had just returned to her novitiate training headquarters there after some days with her Sisters of Charity workers in Ethiopia. “Mother” (as both Protestants and Catholics in India affectionately call her) said she believes the situation of Ethiopia’s famine victims will continue to improve “because of the efforts of World Vision and the Sisters of Charity and others serving Jesus there.”

From the conference’s first session to its last, the conferees repeatedly and enthusiastically sang a simple chorus which seemed to have special meaning to them at this juncture:

“This is the day that the Lord has made. We will be glad and rejoice in it!”

They seemed clearly to enjoy a corporate awareness of the presence of the risen Christ.

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Please pray . . .

☐ for Ethiopia’s famine victims and for the relief workers who are providing as much food and medical aid as supplies allow.

☐ for those who are digging wells and providing agricultural and nutritional guidance so survivors can care for themselves.

☐ for Cambodian refugees and for the people who can help them cope with their continuing separation from loved ones.

☐ for India’s industrial accident victims and for workers enabling widows and others to get a fresh start in life despite the damage to their health.

☐ for drug addicts seeking help at The Shoulder and for those showing them how to overcome by Christ’s power.
By 1953, war had ravaged Korea and exhausted its people. Bob Pierce, our World Vision founder, had trudged up and down that weary land for several years, preaching, encouraging, meeting the physical needs of people and trying desperately to get the word of Korea’s plight to American churches.

"Let my heart be broken with the things that break the heart of God," Pierce often said. Among the things that broke his heart was the condition of the pastors, many of whom had fled from the north. These tired and often discouraged shepherds of the flock seemed to be at the end of their endurance. So Bob gathered a group together to let the Holy Spirit recharge them, and that was the first of more than 150 pastors' conferences World Vision has since held in the Two-Thirds World.

The lot of pastors in the Two-Thirds World is often intolerable. Most of them have to earn a living mending shoes or farming or selling goods in the marketplace. Few have had much training. When the church is persecuted, they usually bear the brunt of the suffering. They serve as visible models in both good and bad times.

Yet they are flesh and blood like the rest of us. They wear out and break down. They make mistakes and yield to temptation. They need prayer support, fellowship, understanding.

That’s why, ten years ago, we asked Dr. Sam Kamaleson, himself a pastor of a large church in India, to head a ministry of bringing these men and women together to refresh them physically and spiritually and to help them gain a fresh vision of their calling.

This dynamic and very capable man has a gift for motivating and drawing out the best from people. He doesn’t run around the world telling pastors, “You need a

Many pastors travel great distances and at great danger to attend these conferences. have been gratifying. “In every conference I’ve been in,” says Sam, “some pastors have made significant first-time commitments to the Lord Jesus Christ.”

In Egypt, Pastor Ezzat Abrahim told me he had attended a previous conference as a Baptist minister. He was seeking some direction for his ministry at the time, and from the platform Sam encouraged the pastors to undertake evangelism in a new way.

“That night,” Pastor Abrahim recalled, “God gave me great peace about becoming a full-time traveling evangelist.”

It meant giving up a modest salary guaranteed by his denomination and truly living by faith. Today, two years after his momentous decision, he is assisted by a small group of Christian youth who also preach and evangelize.

This is the kind of story that thrills us and confirms us in our desire to serve the servants of Jesus Christ.

Ted W. Engstrom
President
Dino is one of the premier artists in Christian music today. Now Dino has brought his talent to a new ministry. The album, Great is the Lord, has been recorded as his gift to partners who specially help World Vision reach out to a hungry world at this time.

"It is my honor and a privilege to offer you this gift of music. Our Lord truly is great, and I believe His greatness is best shown in the love of Christ, reflected in our compassion for those who hurt. I hope that you will join me in this ministry, and that you will enjoy this album—my gift to you."

Dino Kartsonakis

Great is the Lord is a collection of your favorites in instrumental music. It features "How Majestic is Thy Name," "Upon This Rock," "Blessed Assurance," "Holy, Holy, Holy," "Jesu, Joy of Man's Desiring/Fairest Lord Jesus," "How Great Thou Art" and others. Arranged by Ralph Carmichael and recorded with the London National Orchestra, Great is the Lord was prepared especially for you, the supporting partners of World Vision.

Great is the Lord will be sent, as Dino's special gift to you, for each contribution to help World Vision reach out to those in need. Your gift of only $20 can help feed 2 of Africa's hungry children for an entire month.

To receive your copy of Great is the Lord this coupon must accompany your gift. All contributions will be used to help World Vision's efforts against drought and famine in Africa.

YES . . . I want to join Dino in the fight against world hunger. Please send my complimentary copy. (Recommended gift is $20—beyond your monthly pledge—to receive Great is the Lord.)

Enclosed is my gift of $_________. (One album or cassette for each $20 donation.)

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