



QUARTERLY JOURNAL OF CMAI

# CMJI

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*Being To  
Wellbeing*  
*3 John 1:2*

**20** CMAI Healing  
**23** Ministry Week



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enjoy good health and that all may  
go well with you, even as your soul  
is getting along well"

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CHANGE  
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WORLD.**

—MAHATMA GANDHI

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# LETTERS TO THE EDITOR

Dear Members and Readers,

I invite you on behalf of CMAI to share feedback and views and make the CMJI interactive, relevant and vibrant. As you read this edition and each issue of CMJI, we would like to know what comes to your mind?

Please share your thoughts to help guide the Editorial team. E-mail your responses to: [communication@cmai.org](mailto:communication@cmai.org)

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Regards  
Lead - Communication Department

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website for publication.

- Every effort is taken to process received articles at the earliest and these may be included in an issue where they are relevant.
- Articles accepted for publication can take up to six to eight months from the date of acceptance to appear in the CMJI. However, every effort is made to ensure early publication.
- The decision of the Editor is final and binding.

### LETTERS

- Readers of CMJI are encouraged to send comments and suggestions (300-400 words) on published articles for the 'Letters to the Editor' column. All letters should have the writer's full name and postal address.

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**SPECIAL ARTICLES:** CMAI welcomes original articles on any topic relevant to CMAI membership - no plagiarism please.

- Articles must be not more than 1500 words.
- All articles must preferably be submitted in soft copy format. The soft copy can be sent by e-mail; alternatively it can be sent in a CD by post. Authors may please mention the source of all references: for e.g. in case of journals: Binswanger, Hans and Shaidur Khandker (1995), 'The Impact of Formal Finance on the Rural Economy in India', Journal of Development Studies, 32(2), December. pp 234-62 and in case of Books; Rutherford, Stuart (1997): 'Informal Financial Services in Dhaka's Slums' Geoffrey Wood and Iftah Sharif (eds), Who Needs Credit? Poverty and Finance in Bangladesh, Dhaka University Press, Dhaka.
- Articles submitted to CMAI should not have been simultaneously submitted to any other newspaper, journal or

- Authors are requested to send the article in Microsoft Word format. Authors are encouraged to use UK English spellings.
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# EDITORIAL



This exclusive edition on the theme of **Healing Ministry 2023**, is bringing to our readers various dimensions of how wellbeing is crucial and relevant to our day to day lives. The theme is taken from 3 John 1:2 in the Bible.

The devotional By **L T Jeyachandran**, revolves around how wellbeing is an important Biblical fact that contributes to this understanding is the unique constitution of the human being, although similar in a multitude of ways to organic life; this often escapes the attention of the Christian reader.

In **Humour for Wellbeing**, **Rev Dr Jim M R Paul** has drafted a really interesting feature of how Theologians differ among themselves when answering the question whether there will be humour in heaven. This article is joyful intertwining of how humour exists in family, work and is an integral part of our existence as a human.

**Being and Well-being in the Church**, by **M Emmanuel Dutt**, highlights how showing hospitality by taking in travelers was one of the most important virtues. Also how core of

spiritual being is mental well-being.

**Rev David Ebenezer**, in his article titled- **Wellbeing is a God's Health Program**, challenges us that while we are active in God's service of health program, we should try to take the best care of our health and physical vitality and guard against overindulgence, hazards and accidents as far as possible. "Whatever you do, work at it with all your heart, as working for the Lord, not for human master" (Col. 3:23).

We have revisited our legacy by sharing two articles from 1947 and 1973 editions of CMJI. Along with condolence message and important announcements related to the 47th Biennial Conference to be held from 21-23 November 2023 at XIDAS in Jabalpur, Madhya Pradesh. Please register soon by visiting the CMAI website.

Best Wishes,

A handwritten signature in black ink, appearing to read 'Cmoses', with a horizontal line underneath.

Dr Christopher D Moses | Editor - CMJI



# FROM BEING TO WELL-BEING

**L.T. JEYACHANDRAN**

The word being, is normally taken to mean mere existence; what the apostle John implies in III John 1:2 is that there is a wholesome life for the audience to whom he is addressing his letter. As a Jew educated in the Old Testament, he must have been aware of an all-embracing Hebrew word that would have been clearly applicable in this context. That word is SHALOM which has a comprehensive meaning that includes peace, harmony, wholeness, completeness,

prosperity, welfare, and tranquillity and is the ideal synonym for the English word wellbeing.

An important Biblical fact that contributes to this understanding is the unique constitution of the human being, although similar in a multitude of ways to organic life; this often escapes the attention of the Christian reader. We humans are the only creatures (as far as we know) in God's universe who are a combination of spirit and

matter. God – who is Spirit – creates the world of matter (Gen.1:1). Then he forms the first human being from the dust of the ground – matter – and he breathes spirit into that matter (Gen.2:7) to complete the creation of Adam. This unique combination of spirit and matter is then sealed in approval permanently by the incarnation, life, death and resurrection of the Second Person of the Trinity, the Lord Jesus Christ. The above fact of the mechanics of human

creation throws fresh light upon Ill John 1:2. John does not make a comparative value-statement as to whether the physical is less important than the spiritual, a platonic separation that had crept into the church at various points in her history. Some aspects of the philosophy in our own country consider matter as inherently inferior, if not evil, and therefore salvation would involve an escape from the material world.

Christian theology affirms the goodness of all creation including that of humanity as outlined in the two opening chapters of the Bible. Even the Creator, the Almighty God,

takes time to perceptively appreciate various entities as he brings them into being – Gen.1:4, 10, 12, 18, 21, 25. However, after the creation of humanity, he pronounces the whole of creation as very good – Gen.1:31.

Christians jump to describe humans as fallen before taking the time to reflect on the created dignity of their humanity. David, the psalmist, answers his own musings about the insignificance of humans by stating that humans are only a little less than Elohim – Ps.8:3-5. [The Greek translation of the Old Testament uses the word angels to translate Elohim and that is carried on into

some English and vernacular versions of this passage.] Even the great worship song – How Great Thou Art – in celebrating the greatness of various entities of God's creation - stars, thunder, birds, breeze etc. – omit celebrating the creation of humans as the crown of God's creative act.

I may parenthetically add that two more stanzas should have been added to make this song even greater; one celebrating our being made a little lower than Elohim and the other bemoaning the seriousness of our declaration of autonomy from God; the first additional stanza should be followed by the refrain celebrating the





dignity of humanity – taking the cue from Psalm 8:3-5 - and the second additional stanza by a refrain decrying our rebellion – Gen. 3. Thus, the 5th stanza of our version of the hymn will describe our reflection on the incarnation of Jesus the Christ, which is what completes the Biblical narrative. By the way, the incarnation would have been impossible but for the creation of humans in God's image].

This long preamble is given to justify Christian belief that God wants his people – including Christian health workers - to develop a Biblical anthropology. Thus, the use of the word SHALOM would have been uppermost in the mind of the apostle John as he penned this third pastoral letter. John also would have recalled the first commandment of God in Gen.1:28 as not being limited to human procreation – being fruitful and multiplying – but as outlining human flourishing in general.

That was part of the responsibility given by God to his human creation even before human rebellion. When the Lord Jesus commenced his ministry in the synagogue in Nazareth, his manifesto was a declaration of SHALOM – Luke 4:16-21; if we were present at that time in the synagogue, we would have been spellbound by his quotation from Isaiah 61:1-3 and, concluding his

speech that that statement of the Old Testament was being fulfilled in the hearing of his audience – what an audacious claim!

In the Nazareth manifesto, one cannot fail to notice that social, physical, and spiritual needs of humanity are addressed together without making a platonic distinction between these different aspects of human well-being. In the early Church, similar problems must have been encountered when rich people were given preference in some ways – James 2:1-4; a similar point is made by the writer when, in James 2:14-17, he says that physical needs are to be met as well as spiritual needs without making a value-distinction, basically because humans are themselves a spirit-matter combination.

Jesus did not make a confession of his messiahship as a precondition for healing the sick. Thus, healthcare workers who are disciples of the Lord Jesus Christ are uniquely placed in society to minister together to two realities – spiritual and material - that are often assumed to be antithetical to each other. As health workers are aware, even medical science has identified psychosomatic illnesses whose causes do not lie in biology alone.

An important contrast needs to be pointed out so that

followers of Jesus do not fall into this unfortunate mutual exclusivity between the spiritual and the physical that seems to be so pervasive in Christian circles. The contrast is between the raising from the dead of Lazarus by Jesus – John 11:38-44 – and the rising of Jesus himself from the dead – Matt.28:1-6; John 20:3-8. Lazarus is raised from the dead by Jesus physically back to the 3 physical dimensions of our present world; that is why the stone at the mouth of his tomb had to be physically removed before Jesus could call Lazarus out; and after he comes out, the grave clothes in which his dead body was wrapped from head to toe had to be removed before he could move freely. Lazarus, raised from the dead by Jesus, would have died again in the normal course of his human life.

In the case of the resurrection of Jesus, however, the stone at the mouth of the grave was moved away by the angel but we do not see Jesus walking out; instead, the angel tells the women that Jesus had risen already, and the tomb was available for inspection! Peter and John have the courage to go into the tomb only to find the grave clothes in the same position as the body was – his resurrected physical body had gone through the physical obstacles offered by the grave clothes, the stone at the mouth of the tomb and the walls of



the upper room where the disciples were hiding for fear of the Jewish leaders. [This fact does not present itself clearly to readers of translations. This is because two Greek words have not been adequately translated: keimai, for the grave clothes lying undisturbed in the position where his body was, and entulisso, the cloth around his head being noticed by John to be rolled up which leads to his belief – John 20:8 - that something different from Lazarus's resurrection had taken place.]

His body was still physical but of a higher dimension that we cannot know about within the confines of our 3-dimensioned physical world, except with the help of theoretical physics. He comes down to our dimensions so that the astonished disciples could touch him and eat with them – Luke 24:40-43. The resurrected Jesus will not die again!

Why this reference to the physical resurrection of Jesus?

Amid all the struggles through which the member-institutions of CMAI are functioning in their eagerness to provide healthcare for the poorer sections of society, we need the tremendous motivation and the encouragement of this mighty act of God – Eph.1:18-21. Further, the resurrection of Jesus provides the motivation because his resurrection was the inauguration of the

New Creation with which the Bible concludes – Rev.21,22. Redeemed human beings – the Church – will come down to the new physical creation with our glorified physical bodies (Rev.21:1,2) and will continue to steward the new physical creation (Rev.22:5) as they were commanded to do with reference to the present creation (Gen.1:26-28).

May the God of the present creation, of salvation and of redemption convince the members of CMAI that you are truly involved in moving the ones under your care from Being to Wellbeing!

May the promise of the New Creation inaugurated by the resurrection of the Lord Jesus keep you motivated amid the challenges you face and raise you to new heights of service and involvement in our country!

**Register Now**

**[www.cmai.org/47BC](http://www.cmai.org/47BC)**

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THEME 2023  
**"BEING TO WELLBEING"**  
3 JOHN 1:2



# HUMOUR FOR WELLBEING

**REV. DR. JIM M R PAUL**

As rightly quoted by Charlie Chaplin- “A Day without laughter is a day wasted.”

## Introduction

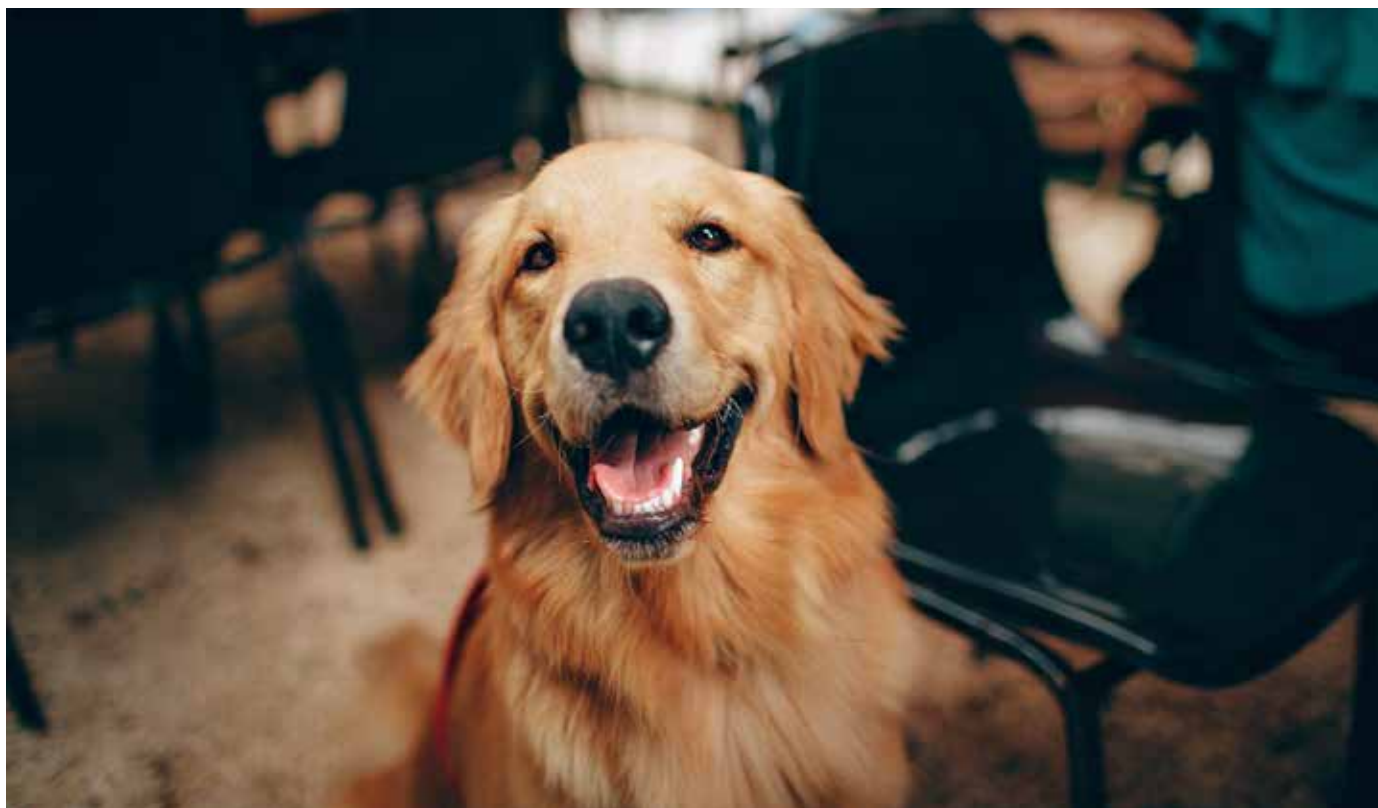
When you laugh, you change and when you change, the whole world changes around you and it turns magical. We all are just like magicians, if we look at someone with a smile, we take away their agonies and work our magic on them by giving them a reason to smile back. World Laughter

Day takes place on the first Sunday of May of every year. The first celebration was on January 10, 1998 in Mumbai, India which was arranged by Madan Kataria, founder of the Worldwide Laughter Yoga movement. Laughter is a positive and powerful emotion that has all the ingredients required for individuals to change themselves and to change the world in a peaceful and positive way. Laughter relaxes the whole body, it

boosts the immune system, and it triggers the release of endorphins, burns calories and protects the heart. Laughing is and will be, the best form of therapy. Always find a reason to laugh, it may not add years to your life but will surely add life to your years. (Rashmi Misra, TOI, May, 2020).

## What is Humour?

Humour means ‘the quality of being funny.’ It refers to ‘an ability to perceive and



express a sense of the clever or amusing' thing. Humour consists principally in the recognition and expression of incongruities or peculiarities present in a situation or character. It is frequently used to illustrate some fundamental absurdity in human nature or conduct, and is generally thought of as a kindly trait: a genial and mellow type of humour. It is 'the quality of being amusing or comic, especially as expressed in literature or speech.' It is the ability to express humour or amuse other people.

## Humour and Laughter

Humour is commonly associated with laughter, although the two are not always and necessarily

interdependent: there can be humour without laughter, and conversely much laughter can be quite humourless.

One difficulty is that laughter has been explained by ethologists in different and fundamentally contrary ways; for some, at the origins, the baring of teeth was sign of hostility, while others, seeing it essentially as a form of smile, understand it as a sign of appeasement. Both laughter and smiling can express very different feelings: they can be bitter, arrogant, false, or apologetic and timid.

However, distinction remains between the laughter that may follow the perception of some amusingly absurd or incongruous remark or event,

and the laughter directed at another's weakness and inadequacy. May of those who have reflected on laughter have pointed out its potential for causing humiliation and pain- a view discussed by Plato and Aristotle and summed up in Thomas Hobbes' much quoted definition of laughter as 'Nothing else but sudden glory, arising from some sudden conception of some eminency in ourselves, by comparison with infirmity of others, or with our own formerly.'

This view questions the human nature as fundamentally cruel and competitive. However, my motive here is to use humour and laughter as a means for intra-personal communication and inter-personal communication for



health and wellbeing.

### Humour and Work

Work is often humourless endeavour. Research (Harvard Business Review, Feb 5, 2021) shows that leaders with any sense of humour are seen as 27% more motivating and admired than those who don't joke around. Their employees are 15% more engaged, and their teams are more twice as likely to solve a creativity challenge- all of which can translate into improved performance.

We begin our day with tension-walk and while reaching office your friendly workmates greets and usher you in. There is a bible verse, a quote or a cartoon on the walls or notice board. Thy bring smile to your face. This smile will reflect and motivate not only you but also the entire team on that entire day. Some of the sign boards can even reduce the stress the visitor, once they come to the office with all anxiety such as; I am already disturbed, please come in!, Thank you for Noticing this New Notice. Your Noticing it has been Noted. Next week has been exhausting!

### Humour in Family

Humour and laughter are extremely important elements of a happy and healthy family life. In fact, we regard them as one of the five characteristic marks of any genuinely thriving

family: conversation, laughter, time spent together, prayer, and regular family dinners. What's more, we'd suggest that laughter is one of the easiest and most fun ways to help your family bloom. The reason for this is simple. Humour creates an atmosphere of joy and delight in the home. Bible tells, "the joy of the Lord is our strength." (Nehemiah 8:10). It strengthens family relationships, forges natural bonds, created shared memories and points of connection.

As writer Agnes Repplier says, "We cannot really love anybody with whom we never laugh." Let us believe in her statement which expresses a profound and indispensable truth. Yesterday, while having a discussion one friend said "people are funny." So, stay on the lookout for the comic element in everyday life.

### Humour for Travelers

Even if it's a business trip, a lot of us go for pleasure. If we run into such unanticipated obstacles along the road, the journey loses all of its appeal. Laughter and humour are essential in such circumstances. As I write this, one of the events from last month is still fresh in my mind.

We got turned around on the route to Bangalore and landed up in a toll plaza, so we chose to pass via the Fastag entry. After some time, we discover

that we are still heading in the wrong path. We then turned around and arrived at the same toll booth. when the sensor for the second time recognised the car number. "You Again!" was written on the screen along with an Emoji. We were all really anxious and disoriented in that strange area. Many people have laughed at this phrase and are now eager to go further.

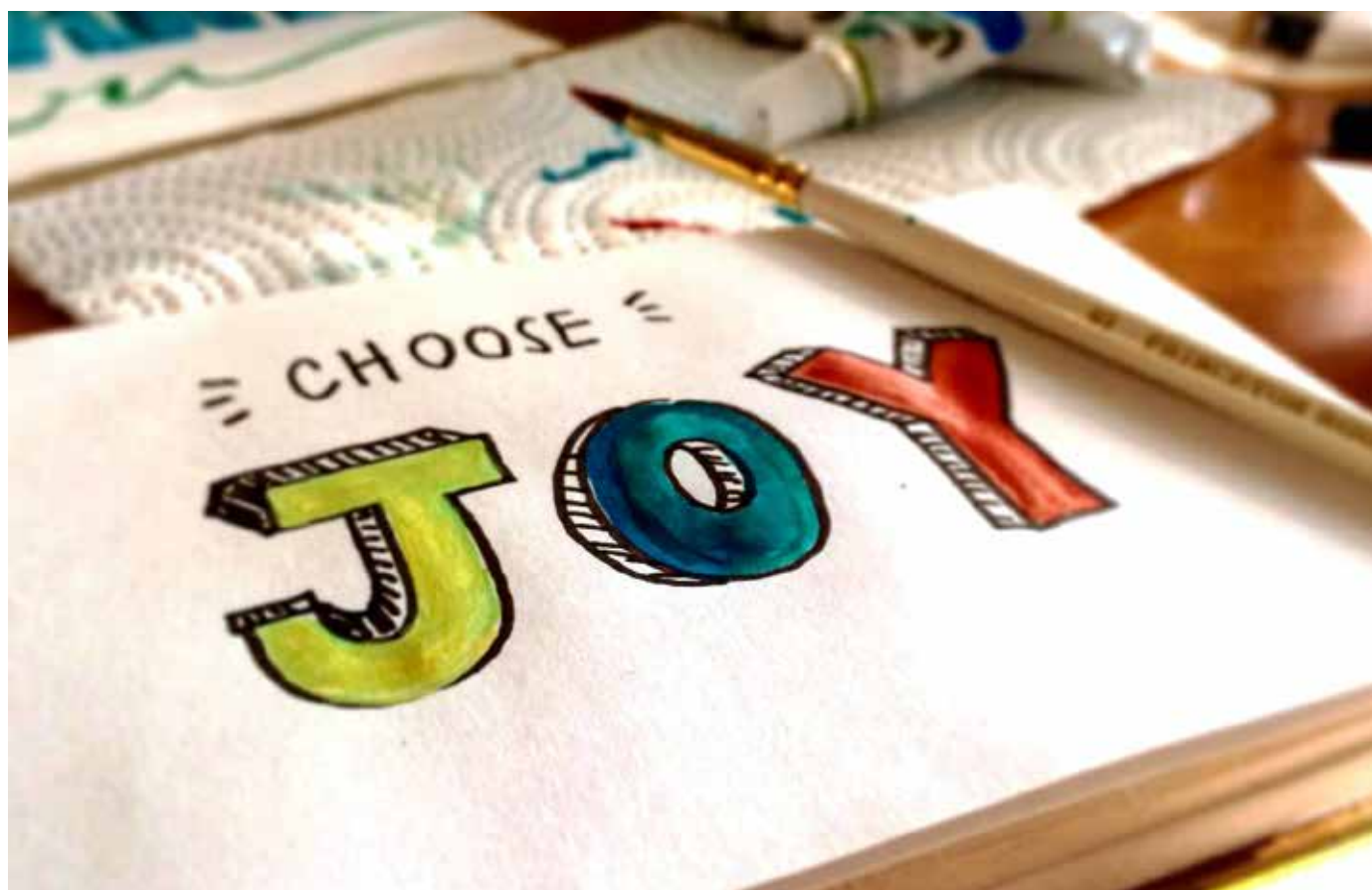
### The Healing Power of Humour and Laughter

Madeleine L'Engle opines "A good laugh heals a lot of hurts." When was the last time you had a good laugh? It indeed is a very personal as well as social question for a profound enquiry to our social existence as a social being. Developing an effective self-care plan can incorporate many types of activities; some of the most common are getting messages, meditating, exercise, seeing a therapist, staying connected socially, connecting with nature and so on.

While each person's self-care plan is unique, one of the most common factors that relate to self-care involves incorporating humour and laughter into your daily activities.

The art of humour has been used for generations by people to cope with stressful situations and self-expression.

In her book "Reclaiming the



Spiritual Power of Humor: Lagh your way to Grace” Susan Sparks writes “Laughter is a GPS system for the soul.” Humour offers a revolutionary, yet simple, spiritual paradigm: if you can laugh at yourself, you can forgive yourself. And if you can forgive yourself, you can forgive others. Laughter heals. It grounds us in a place of hope.

Perhaps most important, laughter fosters intimacy and honesty in our relationships with each other and with God. In fact, laughter and faith are mutually dependent. Theologian Conrad Hyers explained, “Faith without laughter leads to dogma, and laughter without faith to

despair.” It is in these words that we begin to see a tiny glow of the power that can come from the merger of humour and the sacred.

When I say humour, I am referring to joyful, therapeutic humour; humour that lifts us up. I am not speaking of scornful, hateful, or judgemental humour. Certainly, humour can be misused. So can sanctity. A laugh a day keeps the doctor away.

Humour is an Essential Part of Being Human

Humour is not something foreign to the human or a result of the fall. Rather, it is intrinsic to human nature and plays an important role in our

physiological and spiritual health. Ice highlights this distinction when he says, Man is the only animal that weeps and laughs and knows that he weeps and laughs, and wonders why.

“He is the only creature that weeps over the fact that he weeps, and laughs over the fact that he laughs. He is the most humour-seeking, humour-making and humour-giving species that has walked the earth, ever ready to provoke and be provoked with laughter, even in the midst of fear and pain he is capable in incongruously ameliorating his misery by a smile, a pun, or joke.” This is where we need life and skill of fellow-human

beings to find meaningful laughter on our way to build kingdom of God.

### God Affirms Humour in Human Experience

Several biblical passages speak of God giving or causing laughter in human life. Sara's laugh of unbelief was replaced by her laughter of ecstasy following the birth of her promised son, Isaac, and she exclaimed, "God has made laughter for me; everyone who hears will laugh over me" (Genesis. 21:6). In His Beatitudes, Jesus promised, "Blessed are you that weep now, for you shall laugh" (Luke 6:21).

It is because God has affirmed humour that laughter and humour are viewed positively in several biblical passages. The writer of Proverbs in particular seems to have reflected a good deal on the positive aspects of humour. He tells us, "A glad heart makes a cheerful countenance" (15: 13), that "a cheerful heart has a continual feast" (15: 15). The therapeutic effect of humour was already recognized, as evidenced by the statement that "a cheerful heart is a good medicine" (17:22).

Humour takes many forms in the pages of Scripture, including jokes, humorous riddles and proverbs, puns, irony and satire. The humour in the Bible runs the full gamut

from the laughter of religious joy, to chatty banter on social occasions, to riddle at parties, to satire and irony. Each form of humour is affirmed and each has its appropriate place.

### Conclusion

Theologians differ among themselves when answering the question whether there will be humour in heaven. In the dichotomy which Reinhold Niebuhr posed between humour and faith, he concluded that "laughter must be heard in the outer courts of religion; and the echoes of it should resound in the sanctuary; but there is laughter in the holy of holies. There laughter is swallowed up in the prayer and humour is fulfilled by faith."

In the meantime, may we hear the words of our Lord Jesus Christ who said, "Do not look dismal" (Matt. 6: 16, Oxford Annotated Bible)





# BEING AND WELL-BEING IN THE CHURCH

**M. EMMANUEL DUTT**

Being and Well-being in the Church

Showing hospitality by taking in travelers was one of the most important virtues in Mediterranean antiquity, especially in Judaism. A cup of water was the only gift of hospitality the poorest person might have available, but it would symbolize enough. But this virtue proves less dependable during a later mission in the Diaspora. Even

when the early Christian community was germinating into a 'called-out' community; for the first three centuries of her existence, congregations met in homes. During this course of Christian community building. They were many who envisioned the kingdom principles of the eklessia and abided diligently with the Christian theology and ethics; and with a desired passion to follow the master. In parallel others did not attest to the

authority of early apostolic leadership, which created hiccups in the early Christian movement. One such incident of hospitality (being) and acknowledging (well-being) the virtuous act is traced in 3John. In the tradition of letter writing format, like Paul; John the elder writes an epistle (3 John) to beloved Gaius. When we read this short epistle, we notice the words/phrases like wellbeing, overjoyed, be joyful, prosper, great joy, peace (was





a blessing- a prayer implicitly invoking God but addressed to the recipient (1 Thess. 3:11-13)), and here the relationship is of an ancient household setup depicting a close communion with phrases like children, family, co-workers, friends. A letter of positive reinforcement and commendation we read.

Another word, we notice is 'prosper' meaning "to have a good journey".

It metaphorically means to succeed or prosper. It is like saying, "I hope things go well for you." John Stott observes that both verbs (for prosper and be in health) belonged to the everyday language of early letter writing. This phrase was so common that sometimes

it was condensed into only initials, and everyone knew what the writer meant just from the initials. The abbreviation used in Latin was SVBEEV, meaning Si vales, bene est; ego valeo- "If you are well, it is good; I am well."

Earlier in Matthew 10:5-15, 40-42, we read of Jesus sending his twelve disciples on a missionary journey. Here he instructed them to stay with those, whom they find worth; and as you enter the house greet them and as you leave the host, bless them and let the peace of God be with them. In that Christian tradition, Gaius was a faithful and worthy host who demonstrated 'Christian being'

virtue by being hospitable to Christian emissaries sent by apostle John the elder. Here we need to understand is Gaius being part of the Jesus movement as a disciple of Jesus Christ; followed and worshiped the master (Jesus) is one part of the Christian principal foundation; but to obey through a praxis lifestyle (being hospitable), to love your neighbor makes Christian discipleship complete. Gaius demonstrated Christian being by showering hospitality on minister(s), which was commended by John the elder. This benevolent act calls for attention and should be the very being of the present-day Church of Christ.

The virtuous life cycle of the early church does not end by being hospitable. John the Elder takes a step forward to recognize the noble act of Gaius and commends his Christian lifestyle of being hospitable; a role model for others to follow in his area. The very act of recognizing and acknowledging is a sign of well-being in the Christian community. This well-being act surely must have a big morale boost for Gaius (and others) to do even more. In a world of self-centeredness (selfie mode), which recognizes only I (ego). John's salutation to Gaius is a reminder for us to acknowledge and appreciate the work of others, what they have done (especially for the Kingdom of God). The notion of Positive reinforcement of recognizing, acknowledging, and appreciating promotes the well-being of the Church. Who does not want to be appreciated? The kingdom principle of 'considering others better than yourself' should be the 'well-being' motif of our present Indian Church.

Our Indian Christian community is itself a small minority assembly in India. Over the centuries, the church has gone through schisms, persecution, and many of the works unrecognized. Here also, 'people are used and things are loved.' There is an ever greater need to promote a Christian communitarian

lifestyle of acknowledging and appreciating for the well-being of the Church; only to make our fellow believer know that s/he is loved and cared for. Just as the tree is known by its fruits; likewise the degree of the well-being of a church is determined by its communitarian values of appreciating and acknowledging. Psychology has always attested that a person's good mental health is directly concerned with the well-being of the person.

Here, the core of spiritual being is mental well-being.

This aforesaid statement holds good even in the life of the Church. The Christian lifestyle of positive reinforcement produces that 'dopamine' which promotes positive mental health among believers and in the Church. Eventually, Positive Mental health advocates for an esteemed self-image about oneself and the Church.

The above understanding might be an ancient thought, but if we look at the present state of the Indian Church. It is marred and needs healing: healing of the mind, body, and soul. A need for a transition from a state of 'being to well-being. For a marred church which needs healing; as a living organism of his body (Church), as disciples of our master, Jesus Christ. We need to recognize, acknowledge and appreciate acts of virtue

done by people only to promote positive well-being in the Church. John reminds us through his Gospel (ch. 15), that 'apart from God, we cannot do anything (even appreciating fellow believers), but only if the organism (believer) is alive by abiding in Him.' So, let us abide in him always to have the spirit to encourage others. It is only then we promote and transit from 'being to well-being' in the Church.

M. Emmanuel Dutt,

B.A, M.S.W, B.D, M.Th. (New Testament)

Theological trained with a master's degree in New Testament. Currently serving as a Lecturer in Leonard Theological College (LTC), Jabalpur. Earlier worked in the Development sector and with the Church in pastoral ministry; also involved in Social Entrepreneurship as a Tent making ministry. Married to Mrs. Judy R. Joute, who has a Master's degree in Old Testament and also serves as a Lecturer in the LTC. They are blessed with two children, Ruel and Faith.



# WELLBEING IS A GOD'S HEALTH PROGRAM

**REV DAVID EBENEZER**

God has been carrying forward an unusual health program for the past twenty hundred years. Now He is about to engage in a healing work that will cure all humans that live in the everlasting new world. The coming health program will enable all men and women who follow the divine prescription to live evermore in perfect physical and mental well-being on earth free from all traces of disease and senility.

The wonders that will be

accomplished in recovering humankind to perfect health were foreshadowed in the astounding cures and healings that Jesus Christ and his apostles accomplished at the beginning of the health program which has been in progress. This program has aimed particularly at the faithful overcomers of this world, who are to be united with Jesus Christ in his heavenly kingdom. Therefore, the kingdom of God itself will be a healing agency.

Through it all the families of the earth will be blessed with perfect life and happiness.

## Biblical Health Program

Generally, we view that the health program of God has entered the earth resulting from the original violation of God's law. When we take note of a few incidents in the Old Testament, Isaac, the son of

Abraham, turned blind in his old age and was sightless for about 50 years, although he



was a type of Jesus Christ (Gen. 27:1, 21-23; 35:28, 29). Even in the life of Jacob, after God appeared to him and pronounced his name as henceforth "Israel", his beloved wife Rachel had hard labour in bringing her second son Benjamin to birth and died. Not as any sign of divine displeasure, we may be sure (Gen. 35:9-20).

At the age of 147 years, Jacob himself fell sick and died of his illness. But not because he was out of God's favour, for he continued as God's prophet until the last. Jacob was embalmed by the physicians of Egypt (Gen. 47:28 to 48:1; 49:33 to 50:3). We may recall how God turned back the time machine dial fifteen years for King Hezekiah, and the prophet Isaiah put a fig plaster on Hezekiah's malignant boil as a symbol of God's power to heal (Isa. 38:1-22) and in the same way Elisha, too, fell sick of a sickness from which he died, but he prophesied even on his deathbed as one of Jehovah's witnesses (2 Ki. 13:1-20).

In the New Testament also, at Lystra, in Asia Minor, when the pagans wanted to worship the miracle-working Paul and Barnabas as gods, they leapt out into the crowd and objected: "Friends, why are you doing this? We too are only human, like you." (Acts 14:8-15) And we can all agree

with the psalmist David when he said: "Surely I was sinful at birth, sinful from the time my mother conceived me." (Ps. 51:5)

So just because a person believes the good news of God's kingdom and devotes himself to following in Jesus' footsteps, God does not work a miracle and change his bodily organism any. He might be able to prolong his life by better living henceforth as a Christian, both morally and physically, because he learns more and more of the truth and gives his body decent treatment and does not abuse it as those in the world do with their bodies.

Unselfish activity in God's service does one good in both mind and body. The study of God's Word and applying it in word, thought and deed has a salubrious effect upon one in every way. To quote Solomon: "Do not be wise in your own eyes; fear the LORD and shun evil. This will bring health to your body and nourishment to your bones." (Prov. 3:7 & 8).

Sickness, diseases and accidents have their normal causes and these causes where the violation of God's law may not be blamed for it or not due to the direct touch of Satan.

Usual Course of Health Program

Various inherit tendencies

to certain bodily sickness, ailments, and these may appear after certain causes lead them to develop and break out. A worldling with a healthy constitution may go through it unaffected, whereas a faithful Christian may be laid low with it and die or have a hard time recovering. The reason for this may lie entirely in the weaker physical frame and in not knowing what precautions to take against becoming infected. So, these are natural and physical processes that may operate in all persons regardless of one's faith. It would be unreasonable to blame the devil directly.

When the body gets old and no longer has the youth power to repair itself or to build up new tissues, it can be expected to break down. Yet it may befall to worry us, weaken our faith in God, break down our zeal in God's service, make us lose God's spirit and quit.

From the wider perspective, we need to realize that sickness, malignant maladies, accidents, and old age is to be expected to take their usual course among humankind. This does not mean we are not to be grateful to God and to voice gratitude to him if we convalesce. Nor does this mean we may not take the matter to Him in prayer when we are sick, or our beloved fellow Christians are sick. Every circumstance and affair





in our lives is a matter which we can take to him in prayer.

#### Miraculous Health Program

The present health program was highlighted as it started with miraculous physical cures of Jesus Christ where blind eyes were opened, deaf ears unstopped, dumb mouths filled with articulate speech, the lame walked without a limp or a crutch, the bedridden got up instantaneously well, the unfortunates crippled with leprosy were cleansed and the dead rose from their funeral beds or memorial tomb. Luke, who himself was a physician, nicely wrote of this manifestation of divine therapy

to say: "And the power of the Lord was with Jesus to do the healing." (Luke 5:17 b).

God saved it from collapse by raising Jesus from the dead to take his seat at God's right hand in heaven and there exercise all authority for God in heaven and on earth. Ten days after ascending and returning to heaven, on the day of Pentecost, this glorified Jesus poured out holy spirit upon his faithful disciples on earth, and with it, he conferred upon many of them the gift of miraculous physical healing power. Thus the health program from heaven went on among humankind. The miraculous health program for the human

bodies continued by his chosen disciples in performing the physical cures till the last of the apostles. Through those miracles, the Christians had been established in their faith and had also identified Jesus as the true "Israel of God".

In the first century during the miraculous health program, the most faithful of the Christians were subject to physical illness and maladies common to all the rest of humankind and died of them. Not all died a martyr's violent death or lived to the extreme old age of the apostle John, who received the Revelation and who may have died from decay and collapse due to great age.

Christians who were gifted with the authority to heal were not authorized to use the power upon themselves or have their similarly gifted brothers and sisters use it upon them for the comfort, ease and convenience of the Christians. Nor did they pray for such miraculous healing of their physical organisms. They used reliable remedies or the services of practising physicians.

In due time, God gifted the Christian with the same gift of a health program to perform instantaneous cures on the human body which has no scriptural sources of divine healing in the recent case. So today, long after the passing of the spirit's gift of physical healing, faithful Christians get sick or fall victim to the major diseases of these times. They seek relief in sensible ways.

### Witnessing the Health Program

We can ask for our heavenly Father to help us to endure Christian fortitude during illness or physical impairment. We can ask him to help us to act as faithful witnesses in the health program through it all, not to lose faith in him, and to suffer no spiritual injury because of it. We can pray that we may be guided in the use of proper remedies which are available or the proper medical services. Even amid sickness, we can let our light shine. We

must "Preach the word; be prepared in season and out of season" (2 Tim. 4:2). There have been cases where the physically infirm have been improved bodily by proving their zeal for his Kingdom in getting out actively into the field service, although poor health appeared to dictate against it. Let us remember that, to quote the apostle, "If we live, we live for the Lord; and if we die, we die for the Lord. So, whether we live or die, we belong to the Lord. For this very reason, Christ died and returned to life so that he might be the Lord of both the dead and the living" (Rom. 14:8, 9). So the faithful Christian who fails to recover and dies still belongs to the Lord Jesus.

### Conclusion

While we are active in God's service of health program, we should try to take the best care of our health and physical vitality and guard against overindulgence, hazards and accidents as far as possible. The same as when we lock the doors, shut and bolt the windows, fasten the cellar door, and do other things, to safeguard our homes against entry by thieves. And then we may trust our heavenly Father and Caretaker for the rest. If, though, we come into danger because of faithfulness in his service, we must accept whatever he

lets come according to his will, and we may thank him for his deliverance of us from recognized dangers. "So, whether you eat or drink or whatever you do, do it all for the glory of God." (I Cor.10:31) "Whatever you do, work at it with all your heart, as working for the Lord, not for human master" (Col. 3:23).

**DR D W MATEGAONKAR**  
*Sward*  
**2023**

**NOMINATIONS ARE INVITED FOR  
DR D W MATEGAONKAR AWARDS 2023**

In 1990, CMAI instituted national awards to publicly recognise members who have made a significant contribution to the mission of the Church in India in the ministry of health, healing and wholeness.

The awards (up to 5 per year) shall be presented during the 47th Biennial Conference in November 2023. Members are requested to send suggestions/ nominations to the General Secretary, CMAI by 15th July 2023.

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**17TH**  
**DR JACOB CHANDY**  
*Oration*  
**2023**

**6TH**  
**MS ALEY KURUVILLA**  
*Oration*  
**2023**

**NOMINATIONS ARE INVITED FOR ORATIONS**

17th Dr. Jacob Chandy Oration and 6th Ms. Aley Kuruvilla Oration 2019

CMAI instituted the Dr. Jacob Chandy Oration in 1990 and Ms Aley Kuruvilla Oration in 2013 which shall be presented during the 47th Biennial Conference in November 2023 by outstanding Indian/Overseas Christian leaders to challenge issues and show directions for the healing ministry.

CMAI invites suggestions from members for speakers to deliver these orations. Your suggestions must reach the General Secretary, CMAI by 15th July 2023.



# TRAINED NON-MEDICAL WORKERS IN HOSPITALS

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**JANETTE H CRAWFORD**

A Christian hospital should be the best hospital to be found anywhere, in every phase of its activity, simply because it is Christian, I think no one would dispute the truth of that statement for we recognize the doctrine of perfection as a vital part of our faith. Yet how far we fall short of that ideal perfection in our medical institutions! We have been going forward rapidly the past few years in India in the education of doctors, nurses and technicians and in acquiring more up-to-

date scientific equipment. But I venture to suggest one field which has been sadly neglected, that of training- and using-non-medical people in operating hospitals.

It was my privilege while at home on recent furlough to spend four months studying in the Department of Hospital Administration of the School of Commerce at Northwestern University in Chicago. This course opened my eyes to many new facts and enabled me to clarify and organize some

ideas that have been growing through my years of work in a hospital. One is that if the maximum potential good is to be realized from our hospitals we must set up more effective operational machinery. To do this will not take more medical people, but a trained personnel of lay workers. It does not, for instance, require a medical education to file patients' charts, disease records, etc., so that they can be found when wanted; but it does require some special training for the job. One does not need



either a medical or a nursing education to learn to purchase hospital equipment, and keep purchasing records; to look after building and grounds; to deal with problems of personnel; to keep accurate accounts of income and expenses; nor to be the responsible head of all operational activities in a hospital. In fact, in my opinion, we are wasting valuable training when we allot such duties to medical people.

We are always pleading for more doctors and nurses, then when we get them we expect them to spend so much time and energy in operating hospitals that much professional work they might do has to go undone.

How can a doctor be at his best professionally in the midst of interruptions which have to do with leaking roofs, broken equipment, bills to pay, servants' quarrels, reports to fill out, and all the innumerable 'bats' that come up in any institution? I think many medical people must have a feeling of frustration due to the lack of time for the work, which only they can do. Take the matter of medical research. India is a fertile field for this and many are well qualified for, and interested in, this great field of service.

But from lack of time they can do nothing. Thus we hold back medical progress because we fill our doctors' time with administrative duties. How long is this vicious system to continue? How soon shall we

have an educational centre for the training of workers for administrative tasks in hospitals? We are all thinking and planning for a better way of living in the 'New India' of the future. Are we willing to lag behind other countries in the way we care for the sick?

Why does the request for trained hospital administrators never go home to our Mission Boards? I met one promising young man now studying for a Master's degree in Hospital Administration, who told me he had applied for foreign service to his Mission Board and was told that no request for such had come to them and they did not feel they could send him.

There are now ten colleges in America which offer degrees in Hospital Administration. Why do we not, as in other professions, send some young people from India to study these courses? When they return we could use them first in hospitals where they will gain experience in adapting their knowledge to conditions in India; later in teaching and training others for this work.

Perhaps you would like to know a little about the courses offered. At Northwestern University it includes such subjects as: Organization and Management of Hospitals; Personnel Management in Hospitals; Business Management in Hospitals; Professional and Public Educational Functions of the Hospital; Professional Services to the Hospital Patient;

Fundamentals of Medical Science. For graduation with a degree a number of courses in Accounting and Business Administration are required, as well as a seminar and other requirements including one year of internship in a hospital after the theoretical work is completed. North western University is one that accepts special students who have a background of experience in a hospital and do not wish to take the full course.

This is due to the definite policy of the director of the course, Dr. Malcolm T. McEachern, M.D., C.M., D.Sc., Canadian born and educated, he has lived for years in the States and has given a good many years of his life to improving and standardizing hospital service in Canada and the United States. He is Associate Director of the American College of Surgeons. He believes that great value is derived from permitting hospital people to take special courses.

I would like to recommend that a copy of his book, Hospital Organization and Management be in every hospital. It is comprehensive and complete, contains excellent standing orders, lists of supplies, etc., and would be very useful.

There are many demonstrations and field trips included in this course. The hospitals in Chicago have shown a very co-operative spirit; their doors are open to students and their staff work after hours to put on

demonstrations for classes. With class groups I have seen the 'inside workings' of many departments in most of the large hospitals of Chicago, and have been from top to bottom of some of the smaller ones.

Libraries are also open to students of Hospital Administration. The excellent research library of the American Hospital Association, known as the Bacon Library, welcomes students. The reference library and reading room of the School of Commerce is widely used by the Hospital Administration students. Hospital journals and books in the Medical School Library are also open for their use.

Lecturers for the course are drawn from the School of Commerce, the Medical School, Heads of Departments in various hospitals who are outstanding in their fields, and from business organizations. We had an excellent lecture from the Personnel Director of Swift & Co. in Chicago. The administrator of a hospital in Milwaukee gave us an interesting evening on the subject of Health Service to Hospital Employees. A pathologist from Muncie, Ind. and Chairman of the Board of Registry of Medical Technologists gave one very instructive evening.

I could not, of course, name all the good things that this course offers. I give this brief description for the information of any who would like to take advantage of a few months

study while on furlough. I believe that any one who has anything to do with administrative work in hospitals would find both pleasure and profit in this course. It is both inspirational and intensely practical.

I hope the day is rapidly passing when those in authority place a doctor- and perhaps a nurse- in a hospital and consider it staffed. And I also hope the day will pass soon when the public lift their eyebrows in wonder over what a person who is not a doctor or a nurse is doing in a hospital.

But if those things are to pass we who work in hospitals must start an educational campaign. We must educate ourselves and we must provide a centre for the education of potential lay workers. When they are trained and put to work the improved medical service rendered the sick will be the best possible education for the public.

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Archive Featured from The Journal of The Christian Medical Association of India, Burma and Ceylon

Vol.XXII November 1947 No.6



# FACE TO FACE WITH SUFFERING

**DR BENJAMIN ISAAC**

Whether it be in the out-patients department or caring for those under our charge in the wards, suffering and pain are constant sights in our daily work.

It is either an excruciating pain like that from a perforated ulcer in the stomach, or a growing constant ache as of a diseased and rickety joint, but all the same, suffering of one form or another is present.

When we care for the sick under our charge, we are

very often carried away by the physical ailments for which the patient seeks help, seldom realising the mental sufferings through which they go. For the bread-earner, it may be the fear of losing his job, or for the house-wife, the dislocation of the home.

We do come across a great many kinds of suffering in our work.

How can we face all this? It presents a problem which meets us day by day in our

tasks. It confronts us constantly, because we live with it. There must be something in our faith which can help us to face this with equanimity.

Paul had the secret of bearing pain and suffering. That secret is also available to every person. The text from the letters to the church in Corinth clearly demonstrates how he met this problem. Paul not only experienced the thorn in his flesh but recorded a whole series of afflictions 'of the Jews five time received I forty stripes



save one. Thrice was I beaten with rods, once was I stoned, thrice I suffered shipwreck, a night and a day I have been in the deep, in journeying often, in perils of water, in perils of robbers, in perils by mine countrymen, in perils by the heathen, in perils in the city, in perils in wilderness, in perils in the sea, in perils among false brethren, in weakness and painfulness, in watchings often, in cold and nakedness.

Besides those things that are without, there is that which cometh upon me daily, anxiety for all the churches' (2 Cor. 11:24-28).

If ever we become discouraged it would be well for us to go through this catalogue of afflictions. And Paul's solution seems to be very simple. He had implicit faith in the Lord and he was convinced of the truth of His word 'My grace is sufficient for you.'

It is sometimes impossible to comprehend the meaning of these words, but Paul was convinced that God's grace was sufficient to enable him to face the whole of life. It was sufficient, complete and satisfactory.

It is very difficult to describe fully this overflowing power of God in human life. It is just like a little sparrow who visits a huge granary and as it pecks at the individual grains, it feels overwhelmed by the abundance of the supply around it. It is sometimes likened to a drowning man, who

when he surfaces for a gulp of fresh air, finds the entire sky from horizon to horizon free for him to breathe.

God's grace is something like this-it is always more than adequate, more than satisfying and freely available.

As we come face to face with suffering in our work, how best do we help to let the grace of God act as an all-satisfying balm to our patients?

This is the story of one of my colleagues and seniors. He was brought into the ward with a total intestinal obstruction.

The X-ray had revealed a complete block at the duodenum. Surgery was the only answer, but surgery at his age was also hazardous. The date and time for surgery was fixed, and we did everything that was humanly possible to check and counter-check so that no chances were taken. Before he was wheeled into the theatre there were many loving hands folded and many lips offering prayers. Surgery was over and things did not go as well as anticipated in the post-operative period.

Many of his colleagues spent sleepless nights at his bedside, sponging his feverish forehead or soothing his restlessness with words of comfort.

As days went by his strength improved and he recovered. His remark after this was meaningful.

He said 'I recovered because of the loving care and affection

of all those around me, doctors, nurses and others!'

The grace of God acting through all of us can truly be sufficient both for us and for our patients as we face suffering.

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Archive Featured from The Journal of the Christian Medical Association of India

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### **MS REENA BOSE**

We at CMAI express our heartfelt condolences on the passing of Ms Reena Bose. She worked with CMAI, retiring in 2000 and had served as the Secretary of Nurses League while also helping with inspections of CMAI's Nursing Boards. She had visited almost all the CMAI Member Institutions across India. Her role as National Vice president of East Region of TNAI and involvement in various leadership capacities will always be remembered. Ms Reena was the first Indian to become president of the Commonwealth Nurse & Midwife's Federation (CNMF) and also a recipient of the National Florence Nightingale Award. She served as the President of INC from 1989 to 1992.

Ms Reena Bose lived for a fruitful 88 years and she will be remembered as a great example of a compassionate leader, who always gave individual attention to every person she met while always remembering their names. Her jovial attitude and firm decisions will be missed as she stood up for the Nursing community, sharing about their rights and upholding the Christian values of the Healing Ministry.

We pay homage and respect to Ms Reena Bose, a faithful servant of the Lord, whose kindness, generosity, passion for Nursing, and countless qualities is a strong legacy left behind. May our good Lord's peace and comfort be with her family at this time of loss.

We at CMAI praise and thank God for her life, witness, service and contribution to the work and serving spirit of the Mission Hospitals.



### **DR PAULINE BROWN**

We at CMAI express our heartfelt condolences on the passing of Dr. Pauline Brown. She served CMAI as the Secretary of Nurses League and a member of the management committee of MIBE GSN for several years. In 2019, she received the Dr D W Mategaonkar Award, in recognition of her outstanding service to the Healing Ministry.

Dr. Pauline, born in Canada served the Royal Canadian Navy from 1943 to 1946, followed by working at Ottawa Civic Hospital and graduating as a registered nurse and earning a diploma in Public Health and B.Sc. in Nursing and a Master of Health Care Practice from McMaster University, Ontario Canada.

Dr Pauline Brown passionate about her work as a missionary nurse, arrived in India in the year 1951, at Jobat Mission Hospital, in Alirajpur District, Madhya Pradesh until she retired in 2006. She served as the Director of Jobat Christian Hospital and as a teacher at the Graduate School for Nurses in Indore. She helped to set up Mobile Medical Units in the Vindhy- Satpura region. She was also the board member of CMC Ludhiana and Vellore and a life member of Trained Nurses Association of India (TNAI) and CMAI.

We the CMAI family and the Nursing fraternity express heartfelt condolences and prayers to the family and loved ones.

We praise God for her service and contribution to the work and serving spirit of the Mission Hospitals.

# e-CMJl on CMAI Website

Dear Members,

CMJl as a quarterly journal and an official publication for Christian Medical Association of India, with its online presence today, brings a much wider reach, diversity, and a global reach. The print run of CMJl, for recent editions, due to the pandemic was held up by the editorial team and the leadership. We regret the inconvenience and wish to inform that we are working to provide our members with the printed copies of the editions.

## Access to e-CMJl

In order to read and download e-CMJl on website, we have initiated a simple process. We require a Simple form to be filled up with Name and Email address, thereafter, you enter the Download Center.

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## Authorship

We accept primarily original articles authored by those who are closely involved with the theme of every edition. So, we also encourage you to come forward and contribute with an article for CMJl.

## Advertisements

We invite institutional members to advertise in CMJl and other publications. Please write to us at [cmaj@cmaj.org](mailto:cmaj@cmaj.org) and we will contact you within two working days.

## Past 3-Year Editions

We are excited as you view both new and old editions (2015-2020) of CMJl. In case you require older editions please send an email to [communication@cmaj.org](mailto:communication@cmaj.org)

We on behalf of CMAI editorial team, thank you for being our support and helping us in building a just and healthy society.

Regards

*Editor - CMJl*

*Head Communications - CMAI*



# Join Hands with us in the Healing Ministry

## CHRISTIAN MEDICAL ASSOCIATION OF INDIA

CMAI is a national network of health professionals and institutions promoting a just and healthy society for all irrespective of religion, caste, economic status, gender or language

- CMAI has over 10,000 Christian health care professionals and over 270 institutions representing various denominations.
- CMAI builds individuals to be technically sound, spiritually alive, and socially relevant, in fellowship and with a Christian perspective on health and development.
- CMAI is the health arm of the National Council of Churches in India (NCCI).

### WHAT DO WE DO?

- Build capacity to respond to the current and future health care needs
- Advocate for innovations, create evidence and promote policy change
- Work closely with the churches, civil society and the government
- Build alliances for health action on a national scale
- CMAI influences other networks and alliances on thinking change in health systems practices in India. We partner with national and international agencies to promote this objective.

### OUR PUBLICATIONS

- Christian Medical Journal of India (Perspective)
- Life for All (Newsletter)
- Footsteps (Development) English & Hindi (A Tearfund publication distributed by CMAI)

### COME JOIN US

The core of CMAI is its members- Individuals and institutions. Individual membership consists of five professional groups - Doctors, Nurses, Allied Health Professionals, Chaplains and Administrators. Each section comes together for conferences, workshops, a time of fellowship to learn from, to share with and to encourage each other spiritually and professionally.

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