

HeRD #110 - Medical Achievements

Dr. James McKean, reviewing the progress of Laos Mission medical work in the 40 years between 1867 and 1907, summed matters up with the following comments: When McGilvary first introduced quinine to the North, people were afraid to try the strange medicine. "Today," McKean wrote, "quinine is widely sold and used throughout the country. It may be found in most of the small shops and country stores. There is no doubt that the use of quinine alone has not only greatly reduced the death rate but has prevented a vast amount of suffering." McGilvary also introduced small pox vaccination. McKean observed, "Today every one believes in vaccination and the numbers vaccinated are growing year by year, recently reaching ten thousand persons in a single vaccinating season of six months." McKean concluded, "The work of our medical missionaries in hospitals and dispensaries and in the homes of the people has appealed strongly not only to the common people but to the princes and rulers as well and has done much to soften prejudice and secure a hearing for the Gospel." [from LAOS NEWS, October 1907, pp. 115-16]

HeRD #151 - Indigenous Missionary Medicine

Ach. Prasit Pongudom, a colleague at the Office of History, is working on a paper on the relationship of missionary medicine to "traditional" medical ways. About a month ago he interviewed Dr. Boonchom Ariwong, an 86 year-old Christian doctor who started practicing medicine in Chiang Mai in 1937. Dr. Boonchom provided Ach. Prasit a new, more complex picture of the development of Western medicine, long dominated by missionary medicine, in relationship to northern Thai culture.

Dr. Boonchom claims that as a young physician he learned how to "do" medicine in the North from Dr. Edwin C. Cort, the director of McCormick Hospital in Chiang Mai. Dr. Cort's style emphasized hard-work and a sacrificial approach that, among other things, required the McCormick doctors to travel far out into the country-side when calls came in for help. In those days, most of their patients were the desperately ill. The village doctors with their traditional methods had given up and the choice was between calling in the missionary doctor or dying. Dr. Boonchom emphasized that Dr. Cort's method was a person-centered, deeply caring approach. As practiced in Chiang Mai today, "modern" medical techniques are generally disease-centered rather than person-centered. Doctors treat diseases not people. Ach. Prasit had been viewing the introduction of Western medicine by the missionaries as the initiation of the process that has introduced disease-centered medicine to the North. Dr. Boonchom provided him with a different picture--one in which the Western doctor's philosophy of medical care actually fit very well with northern Thai values of generosity and compassion. There is no question but that the well-spring of Dr. Cort's approach was his Christian faith, so that what we have here is an example in the indigenization of Christian faith and theology. It appears that missionary medicine was philosophically closer to "traditional" northern Thai medicine than it is to current medical attitudes.

HeRD #179 - Medicine & Evangelism

In 1911 a severe, protracted epidemic of malaria swept large parts of northern Thailand. A great amount of human suffering resulted, and the Laos Mission did what it could with its limited resources to relieve that suffering. Its medical arm became one of the few resources available in northern Thailand to combat the epidemic directly. One consequence of the epidemic was the largest concentrated "in-pouring" of converts in the history of the mission. The mission's Annual Report for 1912-1913 surveyed the situation and found that there had been large numbers of converts in the Chiang Mai and Phrae stations due to medical work. It continued by observing, "In Lakawn [Lampang] as well, the medical work has been the right arm of evangelism. The large increase in the sale of medicine in Chiang Rai tells of increasing influence and usefulness there. The small pox epidemic in Nan has made it possible to dissipate in some measure the suspicion and ignorance, that have attended our work in that province." The report

concluded, "Surely throughout the Laos field, the work of the Christian physician seems the key to the hearts of the people. Nothing else so readily breaks the bonds of spirit superstition, the master hold of Satan in their land."

The concept of "benevolence" that we looked at in HeRDs #127, #128, and #129 is a powerful analytical tool for understanding missionary work. While genuinely concerned about the physical and social well-being of the general population, their ultimate concern was for the immortal souls of those same people. Animism, thus, was as great an evil as malaria--both being the work of our old friend, Satan. And since the war on animism and on disease were but two fronts of a common conflict, the defeat of Satan medically "naturally" had important consequences for the battle against animism.

HeRD #182 - The Drug Trade Missionary Style

Here's a new wrinkle on the missionary role in northern Thailand medical modernization: There was a wide-spread malaria epidemic in 1913; and, according to the Laos Mission Annual Report for 1913, the mission's Chiang Mai dispensary was the only place in a large region where the public could buy Western medicines. A number of individuals bought supplies of drugs for resale out in the country-side. The report states, "We welcome this movement, as it secures a wide distribution of reliable medicine." The report also acknowledges that the dispensary didn't keep a record of how many people were involved, but we are left with a general and vague impression that the number was not inconsequential. That impression, in turn, leads us to a general "feeling" that the Laos Mission's role in promoting medical Westernization was greater than any statistical measure available to us reveals. That is, it can't simply be measured by the number of in-patients and out-patients served in a given year. This impression is reinforced by statements like the following, contained in the same report, "The [Chiang Mai] Hospital has upon its register 186 in-patients, but usually one to three friends attend each of them, and also require treatment."

And all of this reinforces the impression that the Laos Mission played a substantial, humanitarian role in the social history of the North. There are solid grounds, I think, for viewing missionary activity in the North critically. At the same time, we should not forget or downplay the very important place they have in improving (and saving!) the lives of people.