Medical Mission Work

—at—

Ferozepore, North India.

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AT FEROZEPORE, NORTH INDIA.

The friends in America, interested in Mission Work, may remember a leaflet, entitled "Medical Missions in Ferozepore," written during our visit there in 1891. Many times in the past six years have I resolved to write a second chapter to this leaflet, but many things have combined to prevent the resolution from being carried out. To do the work often seems easier than to report it. The Women's Hospital has been an accomplished fact for nearly three years, and stands in view of our own house a monument of God's faithfulness to answer prayer. There were many times of perplexity and anxiety before the work was begun, not about money, but as to how to use what was in hand to the very best advantage, and in the most economical way. It is necessary that a Missionary should be jack of all trades, and some of us feel that the latter part of the old proverb applies painfully to ourselves. However, if we may but be assured that we are accomplishing the purpose for which we are sent, we would not choose our own way, but desire to follow where we are led, giving to God the glory for whatever is done. It is hard to know where to begin to tell of what may be interesting to those whose money has helped to buy material, and whose prayers, I feel sure, have followed all the work of the past year in connection with our Women's Hospital. As I recall the past I am reminded of many interesting facts concerning mites and tenths, which, as they
accumulated, were sent to India, and put at interest until needed. Many were used to strengthen faith in God's willingness to answer prayer, and often the help came from most unexpected sources, and seldom from where I thought it might be looked for. One day, before leaving home for some weeks, I called to see a friend, who was in deep sorrow. As I was leaving she put into my hand the largest sum received at any one time, saying: It is A.'s gift for your hospital. The daughter had expressed the desire before her death, and her mother had not forgotten it. I felt like singing all the way home, and stopped at the house of another friend to get her to rejoice with me. A letter received from a Missionary friend told me he had carried the leaflet on medical missions in his pocket for several days, and when he read it he resolved to send a donation. At the breakfast table a gentleman told him he had read the leaflet and wished to send something to help to build the hospital, while his wife said she had made the same resolve. The wife of the Missionary added to all a $5 note sent by her daughter to India for some work there. Being U.S. currency note it had been laid by for years. Each independently of the other was led to offer his or her gift. The one who nursed and cared for me so faithfully during my illness in the Women's Hospital in Philadelphia was ministering to the sick in a Quaker family when the leaflet on medical work reached her. She read it to them, and they gave her a liberal donation for the Hospital. On one occasion I was much impressed by a prayer offered a lady quite unknown to me. It was no ordinary stereotyped prayer for missions and missionaries, and I was sure we and our work were frequently remembered in the closet. I enquired the name of the lady and wrote to her asking her to make our Hospital one of the objects of prayer. In reply she promised to do so, at the same time enclosed a note, saying she had gone
to the meeting with the purpose of giving it to some object, but what object had remained undetermined, and she had taken it home again; now she was sure it had been kept for this purpose. She has since been called away. My friend Robert, mentioned in my leaflet, did not lose his interest, and when I saw him, before leaving America, he gave me several dollars, which he had collected for the Hospital. At another time a gold piece was sent to me, and the giver had never felt before that she could part with this last gift of her mother’s. In one of the churches of Philadelphia a box of hospital requisites were collected. One morning I received a letter from a lady saying she had been told I wished to take an invalid chair to India. She wanted to give me one, and perhaps two in memory of a husband and friend. We had met but once, sorrow and sympathy had drawn us to each other. I never expected to see or hear from her again. An old friend, a British officer, retiring to England, “closed his account” in $5 India by ordering the Bank to send his balance to me for the medical work. A member of our congregation here in India gave the largest donation of any received for the building. The tenths of some legacies built a memorial ward to Rev. J. and Mrs. Newton. Donations of medicines were made by Messrs Wyeth and Co., Parke Davis and Co., H. C. Blair and Son. Hospital registers from another friend, a large box of most useful articles were sent to me by the Carlisle Presbytery, many of which are constant reminders of the givers. But time would fail me to tell of the tenths, sums large and small, from friends in India and America, refunds for a calf, geese, food for cattle, which we used, putting the equivalent into the Hospital fund.

Houses do not spring up in India like magic as they seem to sometimes at home, and there was much delay in beginning the building, which was promised in six months.
Alas! for promises and agreements on the part of a Hindu contractor. Instead of six months it was fifteen before everything was ready and we could open the Hospital. We had only the ground plan, as we had felt it necessary to change the design drawn in America. Every door and window had to be marked out as the building progressed. It required constant supervision and attention, and there were many hours of perplexity, anxiety and fear lest the money entrusted to my care should not be used to the very best advantage. The agreement with the contractor was signed and witnessed on stamped paper, all in good form, and I thought nothing was wanting except that the material should be collected, put in place under my direction, and when done the money would be paid for the completed building. Alas! I had still much to learn, for, in spite of my experience with this same contractor, I was again deceived, and before I knew it the money was more than used, and every effort had to be made to secure what was required to finish the rooms actually necessary to begin work. How often I questioned whether I had mistaken God’s leading none but He will ever know, His will had been so plainly made known, and it was only weakness of faith which prompted these doubts.

Early in the summer our first patient came to us, a woman, just like the one who came to Jesus as he sat at meat in the Pharisee’s house. She was a sinner and came as the result of her sins, but without any sorrow or repentance for them. Had I been asked beforehand whether we would admit such as she was into our Hospital I would most emphatically have said no. But here she was, and how could we refuse to do all we could to heal and save. We put her into the only available place, even that unfinished. The care of her kept our little nurse busy, and before many days she broke down. As the heat was very great, and we could not go back and forth in

the hospital.

The case was serious, and she was taken in cases of her kind. She had been sick a long time, and came to us in the last stage of her disease. She had left the hospital in the hands of the doctors to treat her. She was a woman of some property, and had a number of cases in her house. We had to have her removed, and the sum of 3,000 rupees was paid. The money was paid to her, and she went back to her home, and we had no more trouble with her.

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the afternoon, I cleared a room in our own house and brought
her here. Only those who have had experience with such a
case can have any idea what had to be borne. It was rumored
that we were forcibly detaining her. A number of her "friends"
came to release her, but our servants enlightened them, and they
left without giving any trouble. The enormous ulcer yielded to
treatment in a most marvelous way, and she was able to leave.
She was read to, prayed with continually, and it was hard
to have her leave us to go back to the old life of sin. We still
have occasional visits from her, and she says she is called a
*kirani*, a contemptuous name for a Christian; but, alas, we have
no reason to believe there has been any change of heart.

A little boy was brought to us whose leg had to be amputated.
They had waited too long and he was reduced to a mere skeleton.
He begged to be brought to the Miss Sahib's Hospital. He
seemed to know he could not live, and then begged to be taken
to his home to see his brother once more. One morning, when
I went to see him, he said : "Oh, Mem Sahib, I am very sad,
won't you pray for me." I knelt down in the verandah and he
tested quietly while I asked God to help him to bear the pain
and to save him; then tried to teach him a few words of prayer.
He reached home and saw his brother. Although so young he
could read well, and he read some of the books given him while
in the Hospital, taking others with him. Some time after his
father brought back all the books, saying there was no one in
their village who could read, and that the sight of them only
opened the wound in the mother's heart afresh. I thought how
like other mothers. My hope of seeing little Jetu, as one of the
redeemed, is strong.

After many delay things were in fairly good shape, and
the Hospital was formally opened, November 29th, 1896, with
six patients. The services were held in the verandah. Colonel
Campbell, the officer in command of the Fort and Ordnance
Department, and a good friend to our work, presided. Other English friends were present, as well as many of the native gentlemen from the city and also Native Christians. It was to us a very happy occasion. After a short suitable service the friends inspected the building. Tea and cakes were served at our house for European friends, and *mehai* or sweetmeats and tea at the hospital for the Indian Christians.

In March a Christian woman was sent to us from Lahore for treatment. She had been baptised three years before, and had literally left all for Christ. She had been visited and taught, for some time, and both she and her cousin, living in the same house, had been impressed and determined to become Christians. They were suspected, and the cousin being yet unmarried, arrangements were made for a speedy marriage. Seeing that something unusual was going on they asked what it was and were told it was the cousin’s wedding. She was thus forced to do what was against her wish, bound by chains, which it is next to impossible to break. Badshah Begam resolved to leave her home, her husband, her mother, all she held dear, for Christ’s sake. She did so and went to the Mission ladies for protection, and was soon baptized. Her little old mother was broken hearted, but she came to see her daughter, gradually making longer visits until she frequently spent a fortnight with her. When the daughter was brought to our Hospital the old mother followed her, and confessed she was glad Badshah Begam had become a Christian. Her friends suggested that the illness which had now fallen upon her was a judgment, but the old lady replied that ten other children had sickened and died in the Muhammadan faith; it had not saved them, and she would not believe this was a punishment because this daughter was a Christian. It was the constant desire and prayer of the daughter that her mother should give herself to Christ before they parted, but this she was not permitted to see.
to see. As Badshah Begam grew weaker we all gathered in her room one Sunday evening for the Lord’s supper. She seemed so happy, and we all felt it to be a privilege to be there. It was her last Communion, and in May she died. I look back with pleasure to the talks I had with her. Her spiritual life had deepened, and when we realize what a difference there was to the life from which she had come we can but feel that one such redeemed bathed in the blood of Jesus more than pays for all the labour and money expended on Missions.

"There is joy in heaven over one sinner that repenteth."

Come with me to the Hospital to-day. I have already been there for prayers in our little “bandagi-ka kamra,” the name given to it by those who knew for what it was to be used, meaning “the room for prayer,” named, too, by one, “the engine room,” where the steam is generated. It is a little private place where quiet can be secured. First, on making my second visit, I pass through the dispensary, where, seated on the floor, are from 20 to 30 women awaiting their turn to go into the consulting room. Prayers here, too, are over and the Doctor has retreated. By the door of her room are a number of women waiting, often very impatiently, for the bell to ring and the door to open. In doing this very likely one or two women will be squeezed between the door and the wall, so fearful are they that another will get ahead of them. I scatter those that are crowding up into the vacancy, but not without repeating the order two or three times, and looking very fierce, and then follows a little exhortation on patience and unselfishness. One has been sitting for hours, another has come from an immense distance, a third has a child at home, who will be crying for its mother, and so on; each will have a different reason why she should be attended to first. I ask why they do not listen to the little Bible woman who sits often looking the picture of despair, because all her efforts to turn their thoughts to other things are
unavailing. As I turn towards the window where the prescriptions are handed in, a similar scene meets me. Several have passed out from the Doctor, and are eager to get their medicine, and several hands are pushed in through the window at the same time, each hoping her's will be filled first. I remonstrate, and they look, wondering what will happen to them now, as it is whispered that this is the Mem Sahib. For the time order is restored, but in the dressing-room a child with sore ears or some dreadful abscess is screaming at the top of his voice, fighting with all his might, while the mother, in no soothing tone, calls the poor little beggar names which would scarcely bear mention. As those whose prescriptions have been filled pass out, they must put their heads into the Doctor's room again to ask how the powder is to be taken, though all has been carefully explained; must it be cold water or hot milk; may they eat ghī (clarified butter), or what else may they eat and drink. Many times I have left in despair, wondering how the Doctor Miss could bear it all. Such days are more especially Saturdays and Mondays, or after some festival, when the attendance has been small for a few days. We will pass on to the ward and almost at each step my eyes fall on something out of place, some piece of work left undone, some neglect of cleanliness, my nose being trained to detect many odours which should not exist, about even in a hospital. As I pass by a bed which has been wheeled out on the verandah I hear a whining voice saying, “Salam Mem Sahib,” and see a distorted face showing misery and pain. It is Basanti, who has been with us frequently for months at a time, yet when she came it did not seem as if she could last long. A poor shriveled body, full of running sores, but as I stop she puts her fingers together and points to her mouth, with only one thought, one desire: “Do send me some raddishes or something to eat from your table.” Not that she has not food supplied, but she is never satisfied, and we give her
whatever she asks for. She must have a bath, and the nurse is called to bring the hot water, at which Basanti rebels. She cares for neither cleanliness or godliness, and apparently no impression is made on her mind by anything that has ever been said or done. The water is ready, she is taken on the wheeled chair, howling, to the back courtyard and seated on a rope bed, while the nurse proceeds to perform the ablutions. She is a great grumbler; one moment she complains that the water is too hot, the next that some one is standing between her and the sun, keeping the warmth from her. The nurse rubs while I pour the water over her, trying to make her say she likes it. More are waiting for a bath, and to have their clothes changed preparatory to an operation for cataract. A little later three long women are stretched on the floor in the dispensary getting cocaine in their eyes, and afterwards they are one by one wheeled to the ward, with bandaged heads, to lie as still as they can for eight days. Precautions to keep them quiet and still, or strict injunctions to lie on their backs without moving, have almost been given up. The best is done that can be, and the larger number turn out successful.

Some time before the opening of the hospital an opportunity offered to get a Hindu widow, who had been baptized in one of our stations, to train as a nurse. Before the training could begin she manifested a strong determination to get married, and came to me with a request that I should “arrange” for her. Her heart was so set upon this that the only thing to do was to consent, as she had chosen the man, and “Barkus was willin,” so they were married. We then got a trained nurse from a hospital, but before the building was actually opened a Missionary from a distant part of the province brought a young man, who was in his employ, to look at her, as some one had recommended her to him for a wife. Within a week she was married and gone. Another was engaged, and with her we had our first sad
experience. She had learned an evil habit from her husband, and although she left him on this account, she used her opportunities to get rum, and had to be dismissed. She went off with a Muhammadan servant, and we felt it was a sad blow to the work.

No. 4 was another trained in the same hospital as No. 1, and she was with us for eighteen months, and then had to be suspended for certain follies. Before the time of suspension was up a young man, hailing from the same parts mentioned before, in search of a wife, took her away after a few days' acquaintance.

In the course of time a young woman came to us for protection, saying she wanted to be a Christian. Of what it was to be a Christian she had very little idea. Her father had been baptized 25 years before, but his example had not been such as to lead any of his children to have any desire in that direction. He had married them all to Hindus, but this girl rebelled and determined to escape. Her mother-in-law was very unkind, and constantly reproached her with having become polluted from contact with karánis. She bore this persecution for a time, then one night crept out under her tormenter's bed which was between her own and the door, and out of the house, where there were two Hindu friends, (who sympathized with her), and a camel waiting to take her to a railway station some distance away, and she came in to claim protection from us. The family soon followed and used all their powers of persuasion and threats to induce her to go back, but all to no purpose; she was firm in her decision to be a Christian. She says that for a whole year she had little knowledge of what that meant, but now she has very decided experience of it. One of the threats was to cut off her head and hang it at the hospital gate. We sent her away, and after instruction for a year she was baptized, and shortly afterwards came back to us here, where her chief work is that of cooking for the nurses and other helpers in the hospital.
One day a young girl was brought by a patient to the hospital. The woman who brought her was a Hindu, and said she had fed her, but her friends did not like the girl about, would the Miss Sahib take her? The Doctor Miss said no, she could not; but the disappointed look in the poor girl's eyes made her change her mind. The old hat she wore was taken away and a white chaddar, the drapery worn by native women, took its place. After feeding her for a few days I had a talk with her, telling her what we could do for her, feed and clothe her if she would work in the Hospital. After a day to think about it, she decided to accept the terms, and she has proved a real help—is bright, cheerful, energetic, and kind to the patients. We ransacked our wardrobes, and she was made to look quite transformed with some articles which we had considered beyond the point of respectability. She has learned to read both English and Roman Urdu. I had to fight off an old man who, having lost his wife, heard of this girl and wanted to marry her. I wrote and told him she had many things to learn before she was ready to marry; we could not spare her, and she did not wish to leave us.

The Doctor Miss Sahib went to Muktesar, a sub-station of Ferozepore, once in the cold season, to heal and teach for a fortnight. A few days before her return she sent me word to be prepared for the reception of a bahu. The daughter-in-law of a household is called by this name, so I wondered what she could mean. I was unprepared for the kind of bahu she brought. In a word she was an amazon, a large powerfully built woman, with one eye (a Cyclops!), not handsome, dressed like a man, wearing a red turban. What was she? I was horrified, and the greater my consternation, the more uncontrollable was the amusement of the new comers, and unquenchable the laughter of the young lady who brought her. I besought them, if she really was a woman, to make her look like one quickly
as, to have a person, to all appearance a man, (for she had also a most masculine voice), in our woman’s hospital, was against my principles. The necessary changes were made, but it was sometime before I could feel reconciled to what could not be altered—her voice. A little of her former history may be interesting. She was born a Muhammadan, married when a child according to the custom, but turned out by her husband, taken up by a Sikh mahantani, (wife of a Sikh priest), and was taught the Granth, the sacred book of the Sikhs. She had a character for honesty and strength above her co-religionists, and in physical strength she truly excels. Having been made a sádani, a fakir, dressed as a man she went freely all over the country, having access to and welcome in Húsás palaces and in the homes of well-to-do farmers all over the district. She had all the honor and distinction she could wish for, of a certain kind, and good living as well; she was, however, ruining herself with alcohol and opium. On one occasion, after a term of hard drinking, she woke up in a ditch; then she vowed to drink no more, and kept her word. She hates the bottle as she hates the Muhammadans. When my daughter met her at Muktsar, she had just come from one of her wanderings, and the Doctor Miss took a fancy to her because of her originality. The attraction was mutual, and she was invited to come to Ferozepore for a visit and readily consented. She had heard the Gospel at the house of the Catechist in Muktsar, in whose home she was a constant visitor, but after all knew but little. She was told she must give up the opium, and hard was the battle; but she conquered, and is an example to those who find it hard to give up what they know is wrong and hurtful, but from habit has become a necessity. What work does she do? It is decidedly miscellaneous. She could not be taught anything systematically, but is called upon for all sorts of work, and no one else could fill her place. We call her the "policeman." When the Doctor Miss Sahiba is called out at mid-
night or the small hours of the morning, M. is her escort, and woe be to the individual, man or woman, who would insult or injure her friend and mistress. She has the interests of the latter as well as the hospital at heart. She makes all the purchases for that, and the gram for the cattle, and nothing so delights her as to save a few pice by getting things a little cheaper than others could do. Many times loud voices have been heard, and interference has been necessary to check an angry dispute; for the lips, used from infancy to vile language, and to express, without restraint, an opinion on any and all subjects, do not become pure in a day; and it is not strange that the unruly member gives way to the use of words not strictly Christian. We often feel discouraged, but when we remember the time that is past, and see the wonderful change that has come over this wild creature, the thought comes—"Is there anything too hard for the Lord God?" And we answer: "Oh, Lord, God Thou hast made the heaven and the earth by Thy great power, and stretched out arm, and there is nothing too hard for Thee."

The young woman who is our Bible Reader in the hospital was taught in the Zenana in one of our Mission stations, was convinced of the truth of Christianity, and expressed a desire to come out from her people. After failing in one or two efforts she finally succeeded in reaching the Mission compound, was baptized and sent off immediately to a convert's home, where she was prepared to read and teach the Bible to others. She was a Muhammadan, gentle and winning in her manner and disposition. Her whole time is given to talking to women as they await their turn in the Dispensary, and in having prayers with in-patients in the ward.

Yet one more of our circle is a woman who was converted through the teaching of our Bible woman. She and her boy came to us one rainy day, having left their home with nothing but
a small bundle. After a few months' trial and teaching she was baptized, and was mother to our family of children until recently.

Of these children we have five. Shánti was brought as an infant ten months old to the city dispensary by her father with a request that the Miss Sahib should take her. Her mother had died, and he could not take care of the child. She was wrapped in a towel and brought home. Thus our orphanage began. Santú was brought to the hospital with his mother, who soon died there, leaving her boy with us, as he had no relatives. Dadu, which means a frog, got her name because she looked just like one. She was a wee mite brought to us in famine times by her father, who said he could not work because he had to take care of the baby, and he could not feed her without earning wages. I gave him a rupee and took the child. For many days we watched her, and thought she would die, but now she is as plump as a pudding, and we think her most interesting. Budhia is a little two-year old, whose mother died during the famine, leaving her in the care of a woman who could not afford to feed her and who fed her chiefly on opium, partly to keep her quiet and partly because she could not supply proper food. She was anything but attractive, stupid with the drug, and my heart sank within me, as my fourteen-year-old daughter asked the question, "Mamma, do you care if I take her?" Visions of wakeful nights and troubled days rose before me, but there could be only one answer. The fourteen-year-old cared most faithfully for the two-year-old, and feels repaid for her trouble, as Santokhin, (her baptismal name,) is as bright as a button and a great pet with all. Biptá, a blind boy, was sent to us by an English officer, who found him running wild, with no one to care for him, with a request that we should do what we could for him. The boy said he was going to stay here, but did not intend becoming a Kirání, a term of reproach for a Christian. No pressure was put upon him, but he was taught...
was

...mently. When he was an infant he was with
the others, and learned readily, and in a sweet voice
sang the native tunes. When he went to say good-bye to
some of his old acquaintances, and to an old blind grand-
mother, as he was being sent to a neighbouring Mission, to learn
basket work, he was taunted with having become a Kiránt.
His answer was short: Achchhá, qiyámat men dekhá jáegá,
_ i.e._ In the resurrection we shall see who is right. Many
are our trials and difficulties in teaching and training,
both large and small who come under our care. Often the
burden seems greater than one can bear, but it pays, dear
friends, and we cannot in any wise agree with the pessimists,
who say that Missions are a failure. The children get their
breakfast in our verandah, and as we look at them we picture
what they would be in the homes where they were born
and what they are now. Clean, happy, well fed, taught to be
truthful and obedient, we have for them the same hope as for
our own, that in due time their hearts will be given to Jesus
Christ, whose inheritance they are from among the heathen.

One evening I sat in the verandah where two of the little
ones, very much the same age, were playing church. They
cart sang for a few minutes, and then bowed their little heads for
prayer. The words of one were quite unintelligible, as she
changes her letters, so that great attention is necessary in order
to understand her. The other said: “Ai Khudá mujhe piyár
kar. Ai Khudá mujhe barkat de. Ai Dadú main thik nahin
kah sakti.” The meaning of it is: “0 Lord love me. Oh
Lord bless me,” then adding to her little companion: “Oh
Dadú I don’t know how to say it right.” If she is ever
ready to acknowledge this as she grows in years there is no
doubt she will be taught how to pray aright. One day sit-
ting at my table, the pankhávádá pulling outside, I heard Biptá,
the blind boy before referred to, singing a hymn or _bha\'jan_.
He had taken the rope, and as he pulled he sang, and between
the verses talked to the old man, who was himself blind. I could not hear his words, but knew he was explaining or referring to the bhajan, and I thought, Out of the mouths of babes and sucklings hast Thou ordained praise. We have so little idea how readily God can use the weak things to His glory. I watch with much satisfaction and joy, a number of beggars, seated on the ground under the trees every Friday morning, with a neatly dressed woman in their midst, seated on a stool, reading and talking to them of the way of Salvation. She is the one I have mentioned before, the village girl who left her home and friends. Her great anxiety now is to teach others, and we hope she may one day better able to go out and give to her own people the Bread of Life. It is impossible to describe the group she now teaches,—the blind, lame, deformed, wretched, miserable looking people. They have been coming, some of them, to me for years, and are able to repeat numbers of scripture verse—which must accomplish that for which God has sent them. The people do not know what sin is. During the last famine we had large numbers of people working, having had money sent us for relief works. I often gathered them together to talk to them awhile. One day I called for a stool and sat down, looking on the crowd; some were old men and women, others had one or two babies in a state of nature, the older children having a string around the waists, their bodies covered with mother earth, and no hair on their heads save a tuft on the crown. The mothers and sisters had garments of all colours and in all stages of decay. In some skirts it would have been difficult to say which was the original cloth, so numerous were the patches. A crowd with dirty faces, and unkempt hair; some old and some young were those who made up my audience, for I called to them to stop their work and gather round me to hear the Word. I read about the ten lepers who sat by the wayside as Jesus passed

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by on his way to Jerusalem. I began by saying that the Lord Jesus had come to this world to save sinners, and then asked, “Are there any sinners here?” One woman promptly replied, “Oh no, we do not sin, we are not sinners; when we rise in the morning we say Allah pak (God is holy); when we eat our food we say Allah pak; when we lie down we say Allah pak.” I went on to try to show them what sin was, saying that I was a sinner. At this there was an exclamation, “Oh no, you do not sin.” After I had enumerated a few of the common sins, they admitted that they were guilty of them all. Some may ask what results there are to show for all the time, money and effort spent during these years. The Lord himself prompted this work, sent the money for the building in answer to prayer, and there is no room for doubt but that it shall be for His glory. “The blind see, the lame walk, the deaf hear, to the poor the Gospel is preached,” and we have not the slightest doubt but many who receive the word are comforted and saved thereby. A young Muhammadan girl who had been taught to read in the Lahore Mission Schools, came as a patient, was once removed by her friends, but left her home again, and refused all their entreaties to return; in consequence of which ensued such a scene as I hope never again to witness. She was sent where she has been trained to teach, and is now instructing others in the way of life. Another young woman, who seemed to grasp every thing she heard, begged to be allowed to stay, but we persuaded her to go with her husband, and come frequently to see us and learn more. She comes when she can, but she is persecuted in her village, and can with difficulty get away. An old grey haired woman, who came with a patient, to care for her, seemed to drink in the Gospel, and mourned when the time came for her to go back to her village. We have now a young woman, who after weeks of visiting at the hospital, not for treatment but to hear, has left her
home and come to us for refuge. She knows but little of what it is to be a Christian, but the word fell into good ground, and she is learning daily. A little Parsee woman came for treatment, and listened attentively to the instruction given, then began to learn to read for herself and made good progress. Her husband had to go elsewhere to get employment, but not before his little wife had learned to read, and to love God's word, and although many months have now passed she writes regularly to the Doctor Miss, and when she has little to say she copies verses or hymns. Each Christmas brings some of her handiwork to show that for months she has been preparing for this. The last was a text wrought on velvet: "And God shall wipe away all tears from their eyes."

These are but a few, but we would give up our work if we could not believe that out of the thousands who come year after year, there are many of such as shall be saved. God would not be true if He were not hearing and answering the prayers offered in and for this hospital. He will fulfill His promises, and these we continually plead before Him in prayer and supplication. This is the easier part of our work, but to "be anxious for nothing" is another thing. The many puzzling questions which come up in the training of those who are associated with us; the wisdom, judgment, patience, forbearance needed; the discernment between truth and falsehood; the constant nervous strain on mind and heart, these are the burdens which every man and woman must bear in Mission work. There are many no doubt who at one time or another feel utterly discouraged and downcast. But there is a bright side to it all, and we know God's purpose is being carried out; that it is His work and He is responsible for it all. We are only the instruments needing to be sharpened and modelled according to His mind, fitted to do this work, filled with His spirit, and "the nations shall know that I am the Lord" before all.
that Lord saith the Lord God, when I shall be sanctified in you before their eyes.” Pray that this may be fulfilled in us.

This hospital has had small additions as funds came in, and now consists of the dispensary and waiting-room, dressing and eye-room, Doctor’s consulting and private room. These are joined by a verandah to the memorial ward, and three small private wards, one of which is fitted up for English patients. The nurses’ house is two-storied, divided into four sleeping rooms upstairs, three downstairs, with dining-room, store-room and kitchen. The unfinished end to both the main building and the nurses’ house stands appealing to all who visit the hospital, and we expect some day in God’s own time that some heart, perhaps unknown to us, will be touched and inspired with a desire to complete the work. We have had quite enough to begin with, and we trust the experience gained during these years may be of great benefit as the work enlarges and increases. Our staff has been small, and much of the help given voluntary, Miss Mayá Dás and Miss Xchim, daughters of prominent men in the Indian Church, gave their help in compounding and dispensing medicines. The former was married after a year, and the latter continued at work until last June, when she went to England, and is now in a London Hospital fitting herself more fully for the work. We hope to have her with us again. During the past year another lady, Mrs. Clark, has volunteered her services as Compounder, and we have thus been helped over hard places. Miss E. Newton has charge of all the teaching of the Christian women in connection with the hospital, and all the sewing for themselves and the patients and the five children, with many other duties, too numerous to mention. Her time and hands are very fully occupied, as I have been almost entirely laid aside from work for the past nine months.

We cannot close without acknowledging most gratefully
all the help we have received from all quarters. A shigram, long unused, belonging to one of our Mission stations, was voted to us to supply our need for carrying our hospital helpers to and from church. We entertained "angels unawares," and one of these supplied the needed sum for bullocks for the shigram, and it has been named the "Okeover team." Several cows have been given, condemned blankets supplied by the Commissariat, and monthly grants from the District and Municipal Boards. An officer, touched by the sight of a woman whom we had to keep outside the ward in the verandah because of her wounds and bruises and putrifying sores, sent me his katta, (a bonus given by Government for a special expedition,) to build an infectious ward. In writing to a friend on one occasion I mentioned the fact that the doctors had to send to the carpenter for his saw to do the work of an amputation. I added that we must beg, borrow or steal a case of instruments. She wrote that to prevent such a calamity she was sending one herself, and in due time, what the doctor calls a beauty, arrived, and has been used several times. The subscriptions and donations of native gentlemen and of English friends in India to our work, even after leaving the station, has been most cheering. Without their help we should have been much crippled, as there are no allowances from home for feeding and clothing patients and the working staff and for many other expenses incurred in the hospital work. The opening day, November 29th, we keep as a donation day each year, when many ladies send us cast off clothing, bottles, old linen, remnants for clothing and other useful articles. Many hospital requisites brought from home are becoming aged or have passed beyond the stage of usefulness, and it may be there are those who may wish to renew the supply, hence a small list of useful articles is appended, which if sent to the Board, carriage paid, would reach us and always be acceptable. Most
of all we crave your interest and prayers, as we have the assurance “my God shall supply all your needs according to his riches in glory by Christ.”

Ferozapore, FRANCES R. NEWTON.

January 1900.
List of useful articles always acceptable for our women's hospital:

- Pillow cases (cotton), size 30 x 18 inches.
- Sheets (cotton), 2 1/2 x 1 1/2 yards.
- Chaaldaars of art muslin or thin sheeting, 2 3/4 x 1 1/3 yards.
- Towels, Huckaback or cotton, 1 yard long.
- Nurses' grey or red flannel aprons.
- Print or flannelette for kurtas.
- Soap, Sapolio, Pearline.
- Hot water bags or tins.
- Fountain syringes.
- Rubber sheets.
- Granite ironware.
- Basins.
- Jugs.
- Funnels.
- Oblong vessels for instruments.
- Cups and saucers, plates.
- Soap dishes.
- Water buckets.
- Scrubbing brushes.
- Dust brushes, hand and wall.
- Brooms.
- Measure glasses.
- Scissors.

One suggestion more I would like to make to those who desire to help Sunday School Work in India. Some friends in Philadelphia have been sending me picture rolls for some years, and we consider them invaluable. After having used them in the Sunday School I separate the pictures, put them on cloth, and some, suitable for the purpose, are tacked on frames for hanging in the Hospital. Others are bound and used over and over in teaching, and are highly appreciated.
Epitome for 1897—99.

<table>
<thead>
<tr>
<th></th>
<th>1897</th>
<th>1898</th>
<th>1899</th>
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<tbody>
<tr>
<td><strong>Out-door patients</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New patients</td>
<td>3,667</td>
<td>4,771</td>
<td>4,900</td>
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<tr>
<td>Visits</td>
<td>6,602</td>
<td>8,194</td>
<td>8,170</td>
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<td>Major operations</td>
<td>29</td>
<td>31</td>
<td>59</td>
</tr>
<tr>
<td>Minor</td>
<td>51</td>
<td>96</td>
<td>257</td>
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<tr>
<td>Medical cases</td>
<td>6,522</td>
<td>8,071</td>
<td>7,854</td>
</tr>
<tr>
<td><strong>In-door patients</strong></td>
<td></td>
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<tr>
<td>Major operations</td>
<td>8</td>
<td>21</td>
<td>16</td>
</tr>
<tr>
<td>Minor</td>
<td>41</td>
<td>46</td>
<td>63</td>
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<tr>
<td>Cataracts</td>
<td>27</td>
<td>53</td>
<td>76</td>
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<tr>
<td>Medical cases</td>
<td>12</td>
<td>15</td>
<td>16</td>
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<tr>
<td>Amputations</td>
<td>1</td>
<td>...</td>
<td>2</td>
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<tr>
<td><strong>Deaths</strong></td>
<td>89</td>
<td>135</td>
<td>173</td>
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<tr>
<td><strong>Midwifery cases</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Normal</td>
<td>46</td>
<td>51</td>
<td>61</td>
</tr>
<tr>
<td>Instrumental</td>
<td>6</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total Patients visited</strong></td>
<td>52</td>
<td>53</td>
<td>65</td>
</tr>
<tr>
<td><strong>Patients visited at their homes</strong></td>
<td>96</td>
<td>217</td>
<td>303</td>
</tr>
</tbody>
</table>

The hospital as it stands has cost Rs. 10,000, of this $1,000 or about that was given in America, and as exchange was high we benefited thereby. The house for nurses cost something over Rs. 1,000. It is only half the original plan, and the foundation for the other half is laid awaiting the time when we can complete that also. The whole is very plain and substantial, nothing having been expended on ornamentation. It is with great regret the report has to be sent out without some pictures; but expense and other difficulties were in the way, and we must hope to illustrate at some future time.

ALBERT PRESS,—LAHORE.