



# Phillips' Forum



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## Request for Input: Ministry Emphasis Change

In the last Phillips Forum we shared about the financial challenges facing the Lord's ministry at the Amazon Baptist Hospital. The missionaries associated with the hospital have met over the last weeks to pray and consider this situation. We have come to the conclusion that the Lord is not providing the funds necessary for the hospital to function 24 hours per day, 7 days a week. Although this has been a difficult realization emotionally, we see that it corresponds with other non-financial changes occurring across Brazil and especially in this region of the Amazon. In this edition of the Phillips Forum we would like to present these changes to you, the questions they raise and our preliminary appraisal. Your input is important to us. We are your ambassadors for Christ in this area of the world. Please send us any thoughts or opinions you may have to the Field Address or Email Address below. Together we wish to make the best use of the Lord's resources, both financial and human.

## Recent Changes

Since our arrival to Brazil nearly 10 years ago we have witnessed major changes in how the Gospel is received. In the past there was frank antagonism. The hospital was greatly used to "open" this area to the Gospel. This need no longer exists. The greatest challenges today are in the areas of discipleship and leadership development. This is especially true in the Amazon region. Those who leave for education rarely return to the "interior." There is also a certain contentedness in the culture that borders on laziness.

Another change is in the area of healthcare. The Brazilian government is developing its healthcare in the Amazon region. This has resulted in the

construction of three new hospitals in our area, two of which are to be inaugurated in the near future. Although there would still be plenty of patients for us to treat, our effective outreach distance has greatly diminished. At one time our hospital drew patients from 4-5 counties. Now we mostly treat those from our own county.

As we mentioned in our July letter, financially the hospital has become more expensive to operate, and as good stewards we must live within the resources the Lord provides.

Thus we find ourselves in need of rethinking if a medical ministry is still needed, and if so, how it should be carried out.

## Praise

- Our local church continues to grow and have a more mature leadership base.
- Some neighborhood youth have shown a sincere desire to walk with the Lord.
- Our children continue to be healthy and show a sensitivity to spiritual issues.

## Prayer

- Wisdom for the medical missionary team as we consider future options for the medical ministry.
- We recently had to dismiss half of our hospital staff. Pray that they will be able to find other jobs.
- Outreach through parenting classes.
- Chip continues to teach a new believer's Sunday School Class.

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### Sending Churches:

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New Life Baptist Church  
of Darby, PA

# Future Ministry Possibilities

The decisions we currently face are like the advice I once heard about financial investing--past performance shouldn't impact today's decisions because the economic world is constantly changing. As a group we looked at what the current needs are for ministry in the Amazon and then sought to see how medicine can help meet these. We are also in the midst of a series of meetings with Brazilian coworkers to include a national perspective. Lord willing we will have a firm game plan by the end of September.

At present we see the following needs: 1) a practical means to interact with people and make contacts for presenting the Gospel, 2) an effective way to help Amazonians grow in their faith and become mature Christian leaders for outreach ministries, 3) a coordinated strategy for helping fledgling churches grow to stand on their own two feet, and 4) the availability of adequate surgical facilities in case of an emergency.

A full hospital can help meet these needs, but all could be met with less costly facilities. Here are some possibilities of what could be done within the context of our current donations:

1. Day surgical unit: Limit surgeries to those not needing an overnight stay.
2. Educational programs: Amazonians love to study. Medical and non-medical (English?) classes would draw many people.
3. Counseling: Interpersonal difficulties are very common and this would touch many lives.
4. Use the hospital as a base to train leaders.

# Should Our Family Stay In The Amazon?

We have been asked by some friends to consider the question of whether the Lord would have us move to another field. Since a fully trained surgeon may not be needed here, should we consider a transfer to a field in desperate need of a trained surgeon? ABWE hospital-based ministries in Togo (West Africa) and Bangladesh are short-staffed and located in areas where a hospital based ministry is either very effective or is crucial for a Gospel presentation.

Our appraisal of the issues to be considered are as follows:

Reasons to transfer:

1. Fully trained surgeon possibly not needed at the Amazon Baptist Hospital.
2. Great need for surgeons at other ABWE hospitals, most notably in Togo, West Africa and Bangladesh.

Reasons to remain:

1. Years of language and cultural adaptation should not be discarded lightly.
2. We have skills other than just medicine to offer in service.
3. Our children are at an age when cultural adaptation to a new area would potentially be more difficult.
4. We love the Brazilian people and culture.

We would greatly appreciate your input and prayers as we seek the Lord's direction in this matter. Our desire is to use our lives as good stewards and to please Him, whether it be in Brazil or in another country.

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