

On 15th July 2021 Bishop Sharma gave a paper on the work of Ida Scudder at the programme on Hindu Christian Dialogue organised by the Ecumenical Christian Centre at Bangalore. The paper was printed in two parts in "The People' Reporter", a fortnightly Christian current affairs magazine printed in Mumbai. The whole paper can be read below; these are a series of "snips" from the original magazine.

A Good Samaritan of our Times



Dr. Ida Scudder

The current context of the pandemic offers an appropriate background for us to reflect on the pioneering work of the famous medical missionary Dr. Ida Scudder, whose contributions for facilitating a paradigm shift in healthcare in India are legendary to say the least. As the Bishop of the Diocese of Vellore, which has been the first and foremost recipient of the blessings of Dr. Ida Scudder's work, whose family served the Diocese across generations, I am truly humbled to present a paper on her contributions.

The Framework of the Good Samaritan:

I would like to reflect upon the life and work of Dr. Ida Scudder using the framework of a very familiar Christian parable – ***the parable of the good Samaritan.***

1. Her Journey:

Her Jericho Path:

If we look at the good Samaritan parable, we see that the Jericho path was a dangerous one. On this path, the vulnerable people were the victims, who would be left unattended. In many ways, Dr. Ida Scudder's journey of the mission was also through a dangerous road. Her 'conversion experience' was when she encountered a situation when three men approached her in the night to attend to the delivery of their young wives. When she asked them to approach her father, they refused as they wanted only a lady doctor to

attend to their wives. The tragic consequence of this was that all the three young women died the next day, because a woman could not attend them. She was on a road that took vulnerable women's lives because of superstition and lack of quality access to health care.

This was not the first time that she had experienced the dangerous road of her Indian mission journey. If we follow the life story of Dr Ida Scudder, as a child, she had experienced the deadly famine in India in 1875 and 1876 when the monsoons failed and were followed by crop failure. One biographer writes: "Millions died from starvation and cholera and Ida's memories of walking skeletons and the dead lying in the gutters remained with her for the rest of her life. She had painful experiences of what she saw in India, which haunted her for long. However, instead of avoiding the path she chose to walk it and transform the path to a safe one.

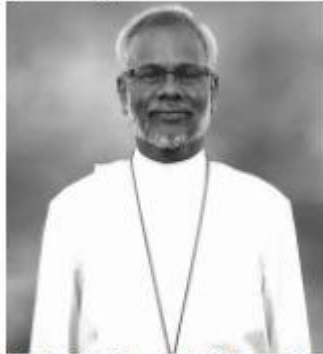
I have heard many liberation theologians who, while interpreting the good Samaritan parable, have pointed out that true liberation and healing in this situation is to transform the Jericho road and make it a safe one so that no one would be wounded on it. Well, if we think about it Dr. Ida Scudder did just that. **She transformed the dangerous path of maternity-health for women into a safe one.**

2. Her Mission:

Marked by Compassion:

Dr. Ida Scudder's mission was marked by compassion. This quality epitomised her work as a doctor. Compassion is an important Christian value and Dr. Ida Scudder embodied it in a very pristine and powerful manner. Going back to the good Samaritan parable, we read that the Samaritan was moved with pity when he saw the wounded man. This is a word that is often used about Jesus' own actions. Jesus sees the crowds who follow him. He is moved with compassion. Early Christianity defined itself in terms of mercy and compassion. Rodney Stark in his book *The Rise of Christianity*, makes a point that Christianity was a movement that

arose in the urban context of social chaos and chronic urban misery. Such a context demanded a neighbor-centred generosity, and in such a context,



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'Christianity taught that mercy is one of the primary virtues that a merciful God requires humans to be merciful.

Moreover, the corollary that *because* God loves humanity, Christians may not please God unless they love one another, was entirely new. This was something revolutionary in nature and was the cultural basis for the revitalization of a Roman world groaning under a host of miseries. Perhaps even more revolutionary was the principle that Christian love and charity must extend beyond the boundaries of family and tribe, that it must extend to 'all those who in every place call on the name of our Lord Jesus Christ' (1 Cor 1:2).

However, if we look at the example of Jesus' compassionate life, we see another feature that accompanies his compassion and humility. We know this combination of compassion and humility in the birth of Jesus – Jesus' incarnation in human form. My attention was recently drawn to a poem by Eddie Askew, who served for several years in the Leprosy Mission in Karigiri, near Vellore. This poem illustrates the humility of Jesus vividly. It reads:

Blessed art thou, O
Christmas Christ,

That thy cradle was so low
that shepherds,

Poorest and simplest of all
earthly flock,

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Could yet kneel beside it and look level-eyed into the face of God.

That is what God's humility is like. It gives us the chance to look level-eyed into the face of God. Without compassion and humility, any good work will only be an exercise in pride and become patronizing and will be more self-centered and focused on massaging our egos than a service to God. As the prophet Micah puts it, we are called to 'do justly, love mercy and walk humbly with our God. Compassion and humility go together.

Dr. Ida Scudder demonstrated that mercy and compassion are great levelers, through her life and work of compassion, reaching out to people other than her own. She proved that a real neighbour would do the loving thing whenever or wherever the occasion would arise, regardless of differences. Her life demonstrated that the neighbours we are called to love and serve are more than the people who look like us. Are we constructing boundaries through our work or breaking boundaries? Breaking

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boundaries is the work of every person of faith. That is what our engagement with one another should look like. We share love not as a sign of favoritism or in an attempt to form exclusive groups but we share our love across differences. Dr. Ida's life proves that the work of being a good Samaritan is building bridges and helping transcending boundaries.

3) Her strategy:
Listening to the deep cries:

Dr. Ida Scudder listened to the deep cries for help around her. She turned towards the wounded man, while others avoided him. The highlight of Dr. Ida Scudder's life story is that she demonstrates that any act of transformation extends beyond mere observation of the situation. Compassion comes from deep listening where one hears the cries of the other.

In the parable of the good Samaritan the Levite and the Priest show us that Love is not just mere observation. One common thing between the Priest and the Levite is that they

both see a deep need, but do not respond. The passage clarifies what the priest sees, the Levite sees but they do nothing more than moving on to the other side. They avoid the situation. They literally turn a blind eye. We cannot be people who see needs which demand a response, and continue to pass by. The response of the Samaritan resonates so much with the story of the founder Dr. Ida Scudder. She saw deep needs and did not turn the other side. We can say metaphorically that she developed 'sore-eyes' which were pained at what she saw and prompted a response within her. I want us to reflect upon those things that we see today in our changing context, from which we are most likely to turn away because the response required is going to be difficult?

Living in a context which prides itself in reducing people and needs to mere statistics, and where people's concern for others is often nothing more than looking from the safety of our television into the lives of other

people and accessing their situation, from the comfort of our own lives, the story of the good Samaritan and the life-story of Dr. Ida Scudder help us to realise that working for transformation is an active response to the suffering in the world.

Dr. Ida Scudder also let the pain of others to touch her heart. She was able to correct her course as she let the women's suffering impact on her course of life. Just before the incident, often known as 'Three knocks on her door,' she wrote a letter to her closest friend Annie. She had written, "I'm not a missionary and never will be!" underlining that very sentence. She had emphasised the that the missionary life was not meant for her and she did not want to do anything with India. But, after that incident when the three young women died, this is what she wrote:

"There was no sleep for me that night. As the dawn appeared, I heard the funeral drums and sent a servant into the village to find out what had happened to the girls. "I am sorry, Madam," he

said. "They are all dead." My mind whirled. My father had told me to forget. But how could I? I thought of my dreams of college dances and a happy home with a husband and children. Could I give it all up to get the medical training I would need to save the lives of women dying from a lack of female doctors in this foreign country? I knew the answer. I could never live with the thought of those three girls on my conscience, dying, and doing nothing about it. I simply could not and would not forget them. I glanced at the letter to Annie sitting unfinished on my desk. I realized in an instant that my vows to never serve as a missionary seemed shallow and selfish in the light of the three knocks at my door in the dark of night. Shaking the weariness from my body, I squared my shoulders and walked into my parents' bedroom study. "Last night," I announced, "God sent me a message. I'm going to America to study to be a doctor. So I can come back here and help the women of India!" (Susan Swanson, *The Angled Road*, 2016)

This was her moment of transformation.

To be continued

One of the important things we see in the story of the good Samaritan is that people freely use the resources at their disposal to carry out the work of healing. The Good Samaritan used the resources of wine, oil and his own animal to transport the wounded man. Further, he paid the innkeeper, promised to go the extra mile, and clear any outstanding debts.

In many ways Dr. Ida Scudder also freely used her gifts – her training, her time and her commitment for the betterment of society. Her commitment to the poor and the downtrodden was extraordinary. 'Commitment' effectively captures the very ethos of the great institution Christian Medical College (CMC) and this commitment is also reflected in its motto: 'Not to be served but to serve'. Dr. Ida Scudder is an example of how we are called to serve without calculating the cost. To live according to this motto requires uttermost commitment.

Commitment becomes most important in the consumeristic society that we live in. We live in a society where health care has become the prey of global capitalism. India is a prime centre for 'Medical Tourism' in the 21st century. In such a situation the very concept of 'service' loses its meaning or takes on a different meaning – which

means 'service' for those who have the money to pay.

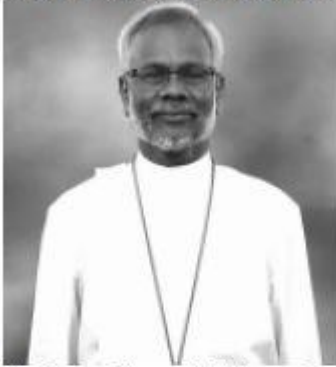
We have seen it in naked display during the current COVID crisis, where people's access to health-care and vaccinations has been severely compromised by economic limitations. In such a context of commercialisation there is a gross marginalisation. People in India who are poor, and who cannot afford the exorbitant costs of treatment, do not receive the best care because it is not in the interest of the capitalist markets. Commitment to enhance the quality of health of the poor does not find a place in the agendas of several health-care institutions. In such a context, the ethos of someone like Dr. Ida Scudder can stand as a beacon of hope. This distinctive ethos derived from the example of Christ, the supreme healer and servant, can offer a prophetic challenge to the health-care industry by redefining 'service' using the categories of selfless care and social accountability.

Selflessness is another biblical category which is a hall mark of commitment. In the increasing capitalistic worldview of the health-care industry the question which dominates is – How do I gain? This is probably the reason why patients are often treated as a means to our own goals. They are often treated as a drain on our resources. In India, several factors divide the privileged and the under privileged – social structure, economic status, psychological conditions, etc. We do not want a noble service like health-care to become another factor of division and discrimination. We do not want Ida Scudder's dream of serving the underprivileged to be a distant dream in this context of consumerism. It is our responsibility to continue the legacy of Dr. Ida Scudder in new and creative ways so that the fruits of her efforts can be enjoyed by a much wider constituency.

5) Her Institutional focus: Dr. Ida, the Institution Builder:

One of the great things about Dr Ida was that once she received training and came back to India

she did not stop but decided to equip other women to study medicine and become doctors. She always aimed at long-term vision. So, when she returned to India at the age of thirty she



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started medical care. According to her biography, "*She began her medical work out of her father's missionary bungalow which was soon overflowing with patients. She opened her first hospital in 1902 and began training Indian women as assistants. Soon she became determined to follow her dream and began to train women doctors, doctors who could save the women of India who were not allowed to be treated by male doctors. She taught every class herself to the first batch of girls and when they went to Madras to take their final exams the head doctor told her not to be too disappointed if her girls didn't pass. Not only did every one of her students pass, they took top*

honors. Dr. Ida was on her way."

Many of her friends including her close school friend from Northfield, Annie Hancock, joined Ida in India as a missionary. She also committed to rigorous fundraising for her women's medical college and hospital. Her pioneering work earned her the Order of the British Empire. Due to her steadfast commitment and tireless efforts, the small hospital and school she started grew to become the Christian Medical College and Hospital in Vellore, which now trains both men and women to the ministry. It is one of the premier medical centres in India and in Asia.

As I sum up, I would like to

>>> *Contd. from Page 2 Col. 4* mention two qualities that we can learn from Dr Ida Scudder's vision and mission. They are 'response-ability' and 'responsibility' respectively.

First, we are called to be communities that are **response-able**. In other words, we are called to discern the signs of the times and make appropriate responses to the present global changes which determine the future. We need to recognize that the welfare of a nation can "scarcely be inferred from a measure of national income". There are many measures, such as infant mortality, life expectancy and teenage pregnancy, which are critical indications of a country's wellbeing, yet are not necessarily measurable economically. In such a context developing response-ability involves resisting the temptation of the capitalistic logic of economic calculation which places profits over people. Being a response-able community means becoming that community which

The life of Dr. Ida Scudder affirms that we are called to have a life in all its fullness. This cannot be achieved unless the entire 'human neighbourhood' enjoys the fullness of life. We are called to establish such a neighbourhood. Today modern theologians talk of both the 'Kingdom of God' and the 'kin-dom' which means a global family where everyone is a brother and sister to the other. In this 'kin-dom' we have responsibility for the well being of the other. Our task for the future is to work towards such a kin-dom. In order to do this we all have an important task ahead of us for the future. That task is to become communities, which are both responsible and response-able.

can make a decisive choice between humane social and economic policies and a growing economy. It is being that prophetic voice in the society which will emphasise how health-care needs to be people-centred rather than profit-centred.

Secondly, we are called to become a **responsible community**. Responsibility in the Bible is always other-centred. Such responsibility is what the Christian gospel calls agape – which is loosely translated as love. When enacted in a community this love makes God known to the world. John puts it this way in his letter 'No one has ever seen God. But if we love one another, God dwells among us, and his love is perfected among

us' (1 John 4:12) Through our acts of love, the invisible God is made visible and palpable among us.

We live in a context which can be called post-modern. In spite of all ambiguity one of the contributions of post-modernity is the emphasis on the interdependence and inter-relatedness of all humans. From a Biblical perspective also we learn that life is interrelated and we are all God's creation. I am reminded of the words of Dr. Martin Luther King who forcefully declared, "As long as there is poverty in the world, I can never be rich ...As long as diseases are rampant, I can never be healthy.... I can never be what I ought to be until you

are what you ought to be." Dr. Ida Scudder loved Church Of South India and the Diocese of the Vellore. She associated herself with Reformed Church of India and American Arcot Mission activities very profoundly. Despite her active medical mission, she was determined to be a part of the financial administration of the church. She served as a treasurer of CSI Central Church, Filterbed Road Vellore, from 1930 for more than 15 years.

Always she carried significant burdens: responsibilities to her medical mission, church activities and difficult leadership decisions. She relied ultimately on her God, who, in the words of her favourite hymn, was her

Vision, Shield and Delight.

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Only if we develop these qualities can we plan a future which is not only right in God's sight but also is in accordance with God's will of justice and peace.

