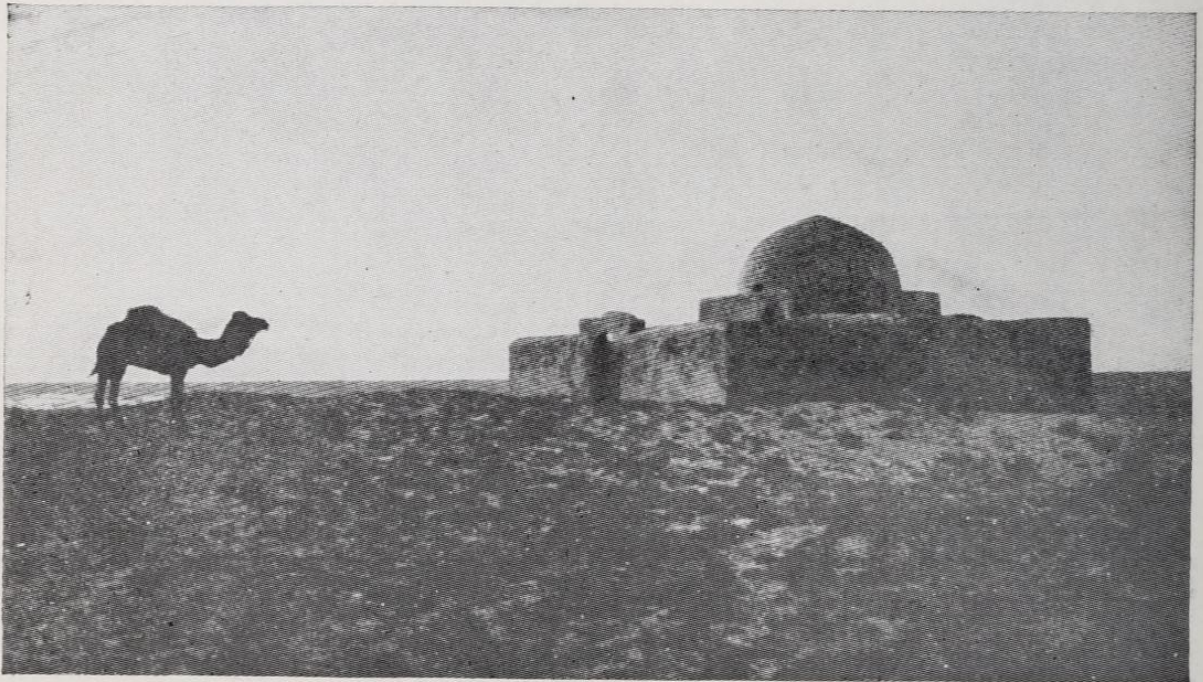


and all of Oman were shown to be open to the medical missionary. This naturally brought up the discussion as to how we might secure medical men and women in the near future. This need was quite heart-rending in view of the fact that the Lansing Memorial Hospital is still without a doctor, the Kuwait hospital soon to be in charge of native assistants, because the doctor in charge is on furlough, and that the Bahrein and Matrah fields are still crying for both men and women doctors. All the reports suggested a strong appeal for medical missionaries. After the reading of the reports every station was remembered in special prayer.

An annual meeting is much like a family reunion at home. Missionaries of the same station become attached to one another like members of one family. Just as such a reunion at home would be in the home of a relative, so do we enjoy it better and profit more if the meeting is held in one of our stations. We hope that it will therefore not be necessary to have an annual meeting in India or away from the field again. Most of us seem to think that the gains scarcely outweigh the loss.



# The Appeal of Oman

DR. P. W. HARRISON

**A**RABIA has become the land of opportunity. There are open doors in almost every direction. To the North, Mesopotamia could absorb the activities of the whole Arabian Mission. To the West, the citadel of the whole Moslem world seems at last to be opening its doors to the Gospel, but in many ways the most insistent and appealing call comes from the South, where Oman stretches out its hands to welcome the Missionary.

A recent medical trip into that country has brought a vivid realization of the opportunity there. The medical needs surpass description. The whole country is asking for a Doctor, and wherever we went we were besieged by crowds of the sick and afflicted. We did almost a hundred major operations and attended as well as we could to many hundreds of other patients. The waiting list never disappeared; indeed, we left with a longer one than when we started. A hospital in Debai, or indeed at any other point on the Oman coast, could rival any hospital in Basrah or Baghdad, in the amount of work done. Indeed nothing need limit it but the capacity of its staff. Its first year it could do more work than Basrah or Bahrein ever turned out in any year of their entire history. It is difficult to do medical work in those Oman towns because of the crowds. Everyone wants attention and he wants it right away. Much of the work must be done under the eyes of a wondering crowd of spectators. Nothing seems to cause more surprise than the ten minutes' scrub of the Operator's and the Assistant's hands previous to an operation. "Why do you wash your hands such an astonishing length of time," asked an Arab of Suroor, my assistant. Suroor is a very dark-skinned Beloochee and quite a humorist. "I am trying, if possible, to get them white," he explained.

Medical and especially surgical work has to be done under handicaps but good work can be done. In Ajman we housed our operative cases in a half-completed summer house. To my surprise everyone provided himself with a bedstead. It is very unusual to see Arabs so particular about a bedstead. Generally they prefer to sleep on the ground, but the ground here was infested by camel ticks, the most voracious insect that I have ever seen. They are a sort of fifty-horse-power bedbug, and there was abundant reason for wanting bedsteads. In Um el Gowein the patients slept in some unused rooms that were available, while some of them brought tents. In Hameerah they built us a date stick house for hospital purposes. With it all we managed to keep our surgical work pretty clean. We ran an even fifty hernia operations, with one insignificant stitch infection.

There are no Arabs like the Omanees. I doubt if such hospitality could be duplicated anywhere else in the world. Wherever we went

it was the same. In Ajman we had to flee from the redoubtable camel ticks and live upstairs, and in Um el Gowein we subsisted on water saltier than any human being ought to be condemned to drink, except as a punishment for crime, but the hospitality of the people never failed. We drank coffee and tea in the houses of the rich and in the homes of the poor, and the cordiality of their unaffected welcome affords a thrill of joy even in memory. One day a call came for an emergency visit to Ras el Kheima and we started off in a small boat. As frequently happens, the wind which was favorable at first, died down, and was replaced by one exactly in our faces. So we disembarked and stopped for entertainment in a near-by village. The man who was



A CORNER IN DEBAI BAZAAR

taking us to see the patient had a friend in that village, and we went to his house. No one but slaves was at home, and they set before us a meal of their own meager fare. An hour or two later the master of the house returned and with profuse apologies provided us with a second lunch. He expressed regret because he had no time to prepare anything adequate for the occasion, but what he set before us was quite enough. Along with some minor trimmings we had an enormous dish of the best mangoes that I have ever eaten. They were the size of fairly large pears and perfectly ripe. I believe that I ate nine. To the uninitiated this will seem like incipient insanity, but those who know anything about mangoes will recognize that it was the only possible thing to do.

The initiative and energy of these Arabs are surprising and in a rough sort of way they regulate their politics to stimulate trade. Debai is the largest city of the Oman coast, and there is no duty at all charged on either exports or imports. The result is that Debai's trade during the past ten years has grown enormously, only Bahrein and Kuweit surpassing it, of all the Gulf ports. Half or more of Debai's imports are said to be goods for Persian ports. Persia charges enormous import duties. In some cases they are said to run as high as 100 per cent. A clerk who had worked in the Persian customs told me that in the year and more that he was there, not a case of tea entered the harbor and paid customs, in that particular port, although the Persians are notorious tea-drinkers, and during that period the shops in the Bazaar were always full of tea. Like most other things it was brought to Debai where there is no tariff, and from there shipped in Arab or Persian sail boats to its Persian port and landed. If necessary, it is easy to placate subordinate customs officials. The methods of doing that have been well worked out.

There were times during the war when the Gulf had difficulty in getting rice enough from India to eat. There were no steamers to bring it in. In Debai when steamers failed them, they went to India in their sail boats and brought it up in such quantities that there were times when Debai was selling rice even to Bahrein.

But the great appeal of Oman is not its medical needs, nor its business ability, nor even its hospitality and friendship. Oman is the one province in Arabia where the people have an open mind for the Gospel. I know of no other section of Arabia where it is so easy to gain a respectful hearing for the Message. Indeed, I have been asked for religious services on Sunday, so that these open-minded Arabs might come and listen. One of the early and vivid memories of language study days is of Omanee Arabs coming by night to have parables read and explained to them. The Omanee is earnestly religious and perhaps nowhere do we see Arabs to whom their religion means more. It is easy to talk to them of Christ, for their minds turn easily to religious things and they are not intolerant as Arabs usually are. In Abu Dhabi one of the Arabs was so interested that he came repeatedly for instruction. He read the Gospel of John through in one night.

We have been invited to come down and establish permanent medical missionary work in Oman. Surely as we seek to enter the open doors around us we must not neglect this one. All that is needed is a Doctor to be sent there, and a little later a clergyman to work with him. Those are the human needs. To secure these and God's blessing and power and success in the work that they will set up, we need men and women who will pray for the Missionaries and more still for the simple-minded, open-hearted, hospitable Arabs of Oman who constitute perhaps the greatest opportunity the Arabian Mission faces today.

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## PERSONALIA

The Rev. and Mrs. James Cantine, Rev. and Mrs. E. E. Calverley, and their children, and Dr. and Mrs. Paul W. Harrison have booked their passage to sail from Bombay on S.S. "City of Sparta," April 15, 1922. This steamer comes directly to New York, and is expected to arrive the last of May.

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On Dr. and Mrs. Cantine's leaving Baghdad their places will be taken by Rev. and Mrs. H. A. Bilkert, whose station at Amara will be occupied by Rev. and Mrs. Dirk Dykstra, recently returned from furlough.

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Dr. Paul W. Harrison made a flying visit to Baghdad in February investigating the possibilities of a homeward journey overland from Baghdad to Mosul and thence to Damascus. It is not probable, however, that such a journey will prove feasible.

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Miss Jane A. Scardefield, who has been in the hospital at Madanapalle, India, for some time, has booked her passage by steamer sailing from Colombo direct to Boston, February 22. She expects to arrive in Boston on or about April 5th.

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Miss Grace O. Strang, recently appointed a member of the Arabian Mission, sailed from Port Said, February 22, 1922, expecting to reach Kuwait about the middle of March.

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Dr. Norman Leak, under short term appointment to the Arabian Mission for a year, substituting for Dr. Mylrea in his absence, arrived in Kuwait and took charge of the medical work at the end of January.

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Dr. and Mrs. C. S. G. Mylrea have secured passage for England on the S.S. "Haverford," sailing from Philadelphia on June 13th. They will spend several months with relatives in England before returning to the Field.

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