



## **Commitment, Conscience or Compromise: The Changing Financial Basis and Evolving Role of Christian Health Services in Developing Countries. Peter Rookes and Jean Rookes. Saarbrücken, Germany: Lambert Academic Publishing; 2012**

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The book *Commitment, conscience or compromise: the changing financial basis and evolving role of Christian health services in developing countries* is an excellent research document converted into a book by the researchers Peter and Jean Rookes. The authors had years of experience, working in a developing world Christian health care services context and prior to this in academics and health service management. This varied and long experience brings a wealth of perspectives and wisdom into this well researched document.

Being a Ph.D. thesis, the book is in the form of a research report rather than a narrative style, but the report is interposed with various quotations and stories from the interviews. This brings life and emotion into what could otherwise have been a colourless academic paper.

The research hypothesis, “*The necessity of seeking alternative funding sources has resulted in changes in the types of provision of Christian Health Services in contemporary developing countries, their users, and their relationship with governments*” came out of the experience of the authors in the Anglican Health Service and other programs in Papua New Guinea (PNG). Though the broader areas of Christian health care services have been researched by many, this research seems to be the first of its kind where the issue of relationship between changing financial contexts, government relationships, and services provided are being studied. In doing this, the authors have done excellent work in knitting together a study and a book on Christian Mission History, Health service Management, and Non State Providers and their roles in a comprehensive health care system.

The initial chapters cover much history and back ground information on Missions at large,

Medical missions, Public Health, Primary Health Care, and Christian developmental work, at the same time bringing researched information on varying perspectives, theological conflicts, complexities, and challenges Christian Missions have gone through in the past few decades. These sections are an excellent resource, to understand where we have come from and the challenges our predecessors have gone through. The challenges of the “post-colonial era,” finances in health care and missions, the global changes in health care directions, and policies affecting missions and health care have been very well researched and documented.

Limiting the study to UK-based Mission organizations, and their counter parts in countries which were colonized by the UK and doing in depth study on two countries, namely, Malawi and India, gives a focus for the research and book. The challenge of this is that in the broader contribution to Medical Missions, many non UK based organizations and institutions have played major roles, and these have not been captured. At the same time, the choice of 2 countries for in-depth study and comparison is good, since India is a large multicultural and complex nation with a small Christian community, whereas Malawi is small and less complex with a large Christian presence. The challenge of India is that no statement on India can ever be generalized for the whole country, since it is large and varied in culture, language, and geography.

The book has entered the market at a time of rapid changes in the health care field globally and, thus, is an excellent resource for Christian Health Care Associations, Health Care institutions, and Professionals to reflect on how their own responses to changes can impact the country, their purpose

and mission, and their relationship with government and other stake holders. The challenge of any book on Health care is that changes happen rapidly; many of the observations and findings of a study done in 2006 — 2007 may become irrelevant, a reason to read the book sooner rather than later.

The conclusions of the authors are worth reflecting on as we go through a sea of change in missions and health care: how can finances and funding influence the core purpose for which Christian Health care institutions and Services were established, and, in a globalized context and with changing world equations, the relationship between mission agencies and missions need to be constantly reviewed and repositioned. The differences that exist in missions and health care between various countries require context-specific solutions if we are to be true to our call and purpose. There is value added for Christian Health Associations working with all resources and

mobilizing churches to participate in health promotion through community health workers. There is potential for Christian health care services to provide compassionate and quality care with an ethos preferred by many seeking care. At the same time, the values of justice and equity and cooperation valued by governments can be preserved. These institutions can be part of nation-building in addition to building the Kingdom of God. Broadened areas of involvement and working in partnership with each other can strengthen the purpose of caring for the poor. For all this, Christian health care services need constant review and repositioning, while, at the same time, holding on to the primary purposes for which each health care institution was established, as well as understanding history and current trends when initiating new programs into the future.

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