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# HERBERT CODDINGTON'S SPIRITUALITY AND MEDICAL WORK

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## Abstract

Korea was liberated from Japan in 1945, but the war continued when North Korea invaded South Korea in 1950. After the war until the early 1970s, many people in South Korea suffered from hunger because there was not enough food; in particular, many sick people wandered around the streets and lived as beggars and social outcasts. At that time, Dr. Herbert Codington, a medical missionary sent from the Southern Presbyterian denomination in the United States, contributed greatly to the fight against tuberculosis and other diseases in South Korea. At the heart of his Christian spirituality was a strong affirmation of Jesus' message that a person needs to be both spiritually and physically healthy in order to lead a whole, meaningful life. To this end, he preached the Gospel, while at the same time receiving minimal medical treatment himself and offering free treatment to poor Korean patients. His ideas about medical treatment at the time shocked Korean society, yet today, the South Korean government is still following his medical practices in many ways. This study will show that his medical ideas are very efficient in helping to deal with huge epidemics, such as Covid-19.

*Keywords:* visionary, unconditional, hospital management, health, social welfare

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## 1. Introduction

Among the American Southern Presbyterian missionaries in the medical service of the southern part of South Korea there were two outstanding medical missionaries who had an indelible influence on the history of modern Korea: Dr. Wiley H. Forsythe (1873-1918) and Dr. Herbert Codington (1920-2003). Missionary Forsythe under Japanese imperial rule (1910-1945) saw that Korean Hansen patients were forced to accept life as social outcasts; neither the colonial government nor Korean society at large were interested in them [1]. One day in 1909, Forsythe met a female Hansen patient who was abandoned in the street near Gwangju. In spite of the abhorrent nature of her disease, he brought her to Jejung hospital and cared for her with all his heart. Missionaries and Koreans at Gwangju Presbyterian Mission Station were so surprised at what Forsythe did. A

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missionary named Mrs. Owen exclaimed: “Forsythe is a Good Samaritan” [2, p. 408-409]. Some of them articulated: “It was like seeing the Lord” [2, p. 408]. Forsythe’s good influence eventually contributed to the formation of a village and a hospital exclusively for the Hansen patients in Korea. The other missionary was Dr. Codington, the main character in this study.

Missionary Herbert Codington was sent to Korea as a medical missionary just before the Korean War (1950-1953). He made a remarkable contribution to medical services in South Korea, especially in the fight against tuberculosis. At that time, tuberculosis was regarded as an incurable disease, as was Hansen’s disease (leprosy), and people with these diseases were forced to live a fatalistic life with no other way but death. Economically poor patients did not receive proper treatment, and they suffered severe pain. In this environment, Dr. Codington took care of as many patients as possible for free, or at the minimum cost of treatment. He shared the Gospel with them, encouraging them to heal their sick bodies and minds simultaneously as a whole. Throughout his life, Dr. Codington identified himself as a shepherd of patients. Applying the Christian message that the shepherd of the Gospel lays down his life for his sheep, Codington established his medical theology: with the help of the Christian God, who is gracious and merciful, he committed his life to his patients without reservations.

Dr. Codington has been the subject of recent research. A story of his life for lay people was published in easy Korean language [3]. Codington’s medical works were examined by doctors at Gwangju Christian Hospital [4, 5]. A short paper on Codington’s spirituality was also published by Cha [6]. However, Codington’s faith and its theological implications have not yet been fully investigated; this study aims to narrow this gap. In this study, we will briefly look at his biographical background and then deal with his spirituality in relation to his family and social activities. Then we will describe his medical theology and its specific social implications. Finally, we will discuss how his dreams and visions are emerging in Korean society today. Codington served for 25 years in South Korea and another 25 years in Bangladesh. This study is intended to cover only his missionary work in Korea, given the limitations of the scope of this paper.

In general, the word ‘spirituality’ is a broad and even abstract concept. It may indicate something bigger than us and it has a high dimension in searching for meaning of life. All high religions attempt to manifest spiritual world as sacred or transcendent in diverse religious activities such as prayers, asceticism, scripture reading, mysticism and the like [7]. However, the concept of ‘spirituality’ used in this study does not refer to any mysterious experience or miracle, but to the crystallization of a loving God who closely connects with loving humans (Mark 12.30-31, New International Version, 2011). When we love the transcendent God, we also have the power to love weak humans. We regard this beautiful power as Christian spirituality. This spirituality does imply “the growth and dynamism of the life of Christ in the believer” [7, p. 1047].

## **2. Biographical information**

Herbert Augustus Coddington Jr. was born in Wilmington, North Carolina, USA, on October 7, 1920, to Herbert Augustus Coddington Sr. and Jesse Peck. His father was respected and loved by the people around him as a surgeon and Presbyterian Church elder in Wilmington. Coddington's younger brother, John, and younger sister, Helen, all became medical doctors like him. At the time of his birth and as he was growing up, the US faced difficult circumstances with the Depression and World War II. In this environment, his father hoped that his eldest son would take over his hospital and live in the United States.

Coddington was recognized as a most sincere and pure young man in his Church and school, and he would have deserved the nickname "truth" [3, p. 24]. When there was a heated debate at the Church's Sunday School, he usually did not assert himself. However, when he was given the opportunity to speak, he gave decisive answers to which everyone would agree.

In 1944, Coddington graduated from Cornell University Medical School, a prestigious university in the eastern United States, and served in the US Army Medical Corps from July 1945 to the end of 1946. After completing his internship (1946-1947) at the Sumter Tourmi Hospital in South Carolina, he decided to go abroad as a missionary. He studied essential Theology courses in 1947-1948 at the Union Theological Seminary in Richmond, Virginia. On October 16, 1947, the American Southern Presbyterian Mission Department authorized his missionary work in Korea and encouraged him to master the Korean language. Coddington immediately registered at the Yale Institute of Far Eastern Language to study Korean (1948-1949). On April 8, 1949, he married Mary Littlepage Lancaster, who had a passionate desire to be a missionary. On July 22, 1949, Coddington was appointed to serve as a medical missionary in the Mokpo Presbyterian Station, his first mission field in South Korea. In September 1951, the Southern Presbyterian Mission Society in Korea appointed Coddington as the fifth director of Gwangju Jejung Hospital, to take charge of the Gwangju hospital ministry. After completing his 25 years of service in Korea, he applied to be a medical missionary in Bangladesh, where he served for another 25 years, making the second part of his life as a missionary no less valuable and beautiful.

In 1999, Dr. and Mrs. Coddington retired from the front-line missionary work and moved to Black Mountain, North Carolina, USA. His wife, Littlepage, died on March 12, 2003, and Coddington died on July 19, the same year, taking a rest at View Memorial Park in Black Mountain, North Carolina.

## **3. Coddington's Evangelical spirituality**

### ***3.1. Sharing the Gospel with Koreans in South Korea***

Coddington was deeply aware that his purpose was to share the Gospel with non-Christians in the mission field. On September 6, 1949, two months after his arrival in Korea, he wrote: "We have here not only an opportunity, but a

solemn responsibility to reach such as these [Koreans] now. How long we shall be able to have such freedom of opportunity here, we do not know” (H. Codington, personal communication, September 6, 1949). Codington had a strong sense of responsibility to preach the Gospel. Thus, he decided to spend all the time he could as an Evangelist. After a dawn prayer meeting at Yanglim Church in Gwangju, which he attended every day, he attempted to meet Koreans near the Gwangju Train Station or any streets where people might gather. When he met them, he gave them Evangelical tracts, which indicated the key messages of the Gospel. While on duty at the Jejung Hospital, where he was the director, Codington gave leaflets printed with Bible verses to his patients, encouraging them to read the verses at home. After work, he often visited uneducated, common people regardless of gender, age or occupation in poor slum areas to introduce the Gospel to them. He even regularly visited prisons in Gwangju to pursue his evangelism. Codington also found an opportunity to spread the Gospel to many intellectuals at Chunnam National University Medical School while teaching Medicine as a visiting professor.

Codington’s method of Evangelism was not aggressive; he never shouted or forced anyone to be a Christian. Instead, he respected the will and rationality of each individual so that they could decide to be a believer after reading and accepting the Evangelical tracts he distributed. Codington explained this approach when he wrote to his American friends: “The response to tracts that we may hand out is interesting. Some read them eagerly and curiously; some, after a brief glance, nod with recognition and approval, and some just hate to be bothered at all when they see what it is.” (H. Codington, personal communication, December, 1949)

Without using artificial manipulation to evangelize any person, Codington’s simple way of handing out tracts and leaflets was fruitful in many cases.

### ***3.2. Raising future spiritual leaders***

Codington chose faithful and honest young Korean men, regardless of family or academic background, sending them to theological seminaries supported by scholarships. He even selected those who were regarded as uneducated or under-educated as possible future Church leaders if their godliness was recognized. Six men became pastors with support from his patronage and prayer [6].

### ***3.3. Co-working with other Christian communities***

In 1959, the Presbyterian Church in Korea was divided into Hapdong and Tonghap denominations over an issue with the World Council of Churches (WCC) [8]. The Tonghap denomination supported the WCC, while the Hapdong denomination opposed the WCC because it accepted liberal theology. Almost all Presbyterian missionaries in the Honam region, including Dr. Codington,

belonged to Tonghap faction. Despite this division, Coddington insisted on Evangelical cooperation with any congregation faithful to the Gospel and he actively participated. For example, he not only gave Jeong-Joong Kim, an Evangelist who belonged to Hapdong denomination, a scholarship at his own expense, he also invited Kim and his new wife to live in his home [3, p. 168-169]. In addition, Coddington and Kim visited the prison in Gwangju and many islands in the southern part of South Korea to disseminate the Gospel, overcoming their denominational differences.

Coddington actively supported the University Bible Fellowship (UBF) when it expanded its mission not only to Gwangju but also to all Korean universities, including Seoul [J. Jun, *Interview by Jun-Ki Chung*, 12 April 2020, Handwritten paper, Oral History of Center for Reformed Theology Studies, Kwangshin University, South Korea]. The UBF movement, which began in 1961 with the support of the Southern Presbyterian Mission Station in Gwangju, could not minister beyond the Gwangju area [9]. Many missionaries from the Gwangju Station argued that UBF should work only in Gwangju because operating in other parts of Korea would violate the missionary policy of all Protestant denominations. This policy was aimed at preventing inappropriate competition between religious groups and Evangelicals. However, UBF ministers opposed the idea of limiting the area of college student Evangelism to Gwangju only. For them, it was strange and ridiculous because it meant that Koreans could not share the Gospel with other Koreans, namely their own people, except by way of foreign missionaries. In these circumstances, Coddington, an influential member of the Gwangju Mission Station, supported the UBF in becoming a nationwide student movement. For this reason, the UBF eventually turned itself into an independent student ministry, without support from the Gwangju Mission Station. In the early history of the UBF, the co-founders of UBF, missionary Sarah Barry and Evangelist Chang-Woo Lee, were greatly comforted and stimulated by Coddington's open mind and heart.

#### **4. Coddington's family spirituality**

When Coddington was old enough to get married, he thought seriously for a while about whether he should marry a sister with the same missionary passion as himself or live as a single missionary and further devote himself to God. He prayed for love and for his ministry to be undisturbed at the same time. In other words, the woman who would become his spouse would establish a family with him insofar as she would yield to him only one condition, that is, his decision to pursue missionary work. Littlepage readily accepted Coddington's only condition, allowing them to achieve beautiful work together in the mission field for 50 years. They had four sons and two daughters who shared their parents' spiritual characteristics.

#### ***4.1. Family worship***

Codington set a fixed time every day for family worship. At this time, he did not receive visitors unless there was a particularly important issue and did not answer the phone, so that he could concentrate on the service.

#### ***4.2. The home of openness and sharing***

Dr. and Mrs. Codington opened their family door wide to visitors who came to them. Korean friends of their children frequently visited this family without any hesitation and mingled with Codington's children. These children developed friendships as if they were real brothers and sisters. Knowing that a poor Korean evangelist could not afford a room after marriage, Codington allowed the couple to stay at his home for a considerable period. A Korean orphan named Jimmy was adopted by Codington and sent to the United States to study at Yale Law School to become a lawyer [6]. Furthermore, Codington freely distributed valuable goods at his home to meet the needs of the poor and the sick; he did this often, but his family fully understood Codington's character and did not complain. His wife set an example for a missionary family: "Littlepage always smiled while staying next to Dr. Codington with tuberculosis patients who had nowhere to go, prostitutes, women who were mentally ill, beggars, and orphans. She helped with hospital work, visited the families of employees, taught English at Speer Girl's School, and guided college students and employees to study the English Bible. The power that Dr. Codington was able to devote himself to the Lord's work came from the prayers and help of his wife, Littlepage." [3, p. 165].

#### ***4.3. Overcoming the spirit of family problems***

Codington's family was not always at peace and without challenges of its own. Like any other family, this family had problems big and small, especially as the children grew up. On August 9, 1967, their youngest son Philip drowned at Taichon Beach. His fellow missionaries and Korean friends were at a loss to find words of consolation. What Codington did at this time surprised everyone who knew him. He comforted those around him, saying, "Now Philip is with the Lord [and] God is at the center of this event" [3, p. 187]. The next day, Dr. Codington's family members and his friends gathered together at the missionary cemetery located at Yangnim Mountain in Gwangju to have a farewell ceremony for Philip. Codington surprised everyone again by comforting them and telling them not to be sorry or sad because his son would be in the best place, in Heaven with the Lord. Later, he wrote to his friends in the US: "We wish to share with you the wonderful assurance that we have received since God took Philip, age 6, from our midst at Taichon Beach when swimming August 9. Indeed, the certainty, comfort, and assurance is a peace that this world cannot give, so true and real to our faith." (H. Codington, personal communication, August 17, 1967)

After the funeral, he returned to the hospital and treated his patients. Everyone was amazed. It was not something ordinary people could do. He could have spent a day resting with his family and comforting his broken heart, and no one would blame him, but he believed in God's goodness and concentrated on hospital affairs rather than on venting pain and sadness. For Codrington, his son would rest in Heaven, but he had to do what he must.

On the night of December 22, 1980, Codrington's daughter, Julia, died in a car accident in Swannanoa, North Carolina. At this time, Dr. Codrington and his wife consoled their acquaintances who had come to comfort them by stating their belief in God's will. The loss for Dr. and Mrs. Codrington must have been as emotionally painful as for anyone else. However, they were able not only to overcome their own pain but also to comfort those around them by holding tightly to Romans 8.28, "We know that in all things God works for the good of those who love him, who have been called according to his purpose" (New International Version, 2011).

In short, Codrington's home was not a private space but a 'public' place. It was always a resting place for the sick, the poor, prostitutes, widows and orphans. His family worked together in this work without complaint, no matter how hard it was. For Codrington, this good ministry at home was the reason for the existence of the family.

## **5. Codrington's social spirituality**

Codrington was not politically active in Korean society. Almost all American Southern Presbyterian missionaries faithfully followed their home denomination's policy, which prohibited them from participating in any specific politics in the mission field. However, Codrington took part in various areas of Korean society as an individual and exercised his social influence.

### **5.1. A beggar leader**

Codrington's nickname in Korea was 'the Beggar General'. Korea's economic situation was at its worst during the Korean War and immediately afterward. The war left countless adults and orphans begging just to survive. The South Korean government was unable to solve the problem because they were too many beggars to handle. When Codrington travelled around Gwangju, he quite often met groups of beggars. The adult beggars ran to Codrington without a sense of shame, pleading with him constantly. Codrington saw that young beggars had difficulty reaching out to him, as they were pushed aside by stronger adult beggars. With great sympathy, Codrington himself approached the children first and extended a helping hand. One Sunday afternoon, for example, Codrington brought several young beggars into his hospital and asked the nurses to bathe them. These children had not bathed for years, and they had lice on their skin. The nurses had a hard time cleaning their bodies by scraping the lice off with knives [3, p. 64]. Codrington provided the children with free medical

treatment, clothing and food, and further provided them with jobs to do small tasks at the hospital so that they could live independently. A missionary testified to Codington's dedication to the poor: "Seeing that poor university students in Gwangju suffered from tuberculosis and other diseases, Dr. Codington invited them to his home to share lodging and treated them free of charge. He could not bear to see these young students, who would be the leadership candidates for the future of Korea, groaning with illness, so he provided his own house to serve them. (S. Barry, *Interview by Jun-Ki Chung*, 13 April 2020, handwritten paper, Oral History of Center for Reformed Theology Studies, Kwangshin University, South Korea)

## **5.2. Co-working ministry against tuberculosis**

Most of the patients at Jejung Hospital were tuberculosis patients. Their treatment time was limited to six months when they were hospitalized. In 1954, the population of Jeonnam was about 6 million, and around 3 million people were believed to have tuberculosis. To treat such a large number of tuberculosis patients fairly, inpatients had to leave the hospital early to allow other patients to be treated. However, these discharged patients were not completely cured, so they were quarantined elsewhere and had to continue receiving treatment. Pastor Heung-Jong Choi, who heard about the pitiful situation, made the tuberculosis problem a national issue. He formed an organization called White Cross, the Light of Hope Society, and sent letters of appeal to the major cities and towns in South Korea, stressing the urgent need for tuberculosis treatment. In addition, Choi's close friend, Hyun-Pil Lee, the director of Donggwangwon, a non-profit organization, supported Choi's cause. Donggwangwon held a rally in January 1954 with Young-Mo Yoo and Dong-Wan Hyun as lecturers, during which Hyun learned how serious the problems of tuberculosis patients in Gwangju were. Hyun returned to Seoul and met Ki-Bung Lee, the speaker of the National Assembly, who was at the height of his political power. Hyun talked about Korea's tuberculosis problem and received considerable funds from him. With these funds, Pastor Choi, Jun-Ho Kim and Doo-Ok Park established a non-profit tuberculosis care home called Song Deung-won in 1954. Codington served as a board member of Song Deung-won. In 1956, Mudeungwon, a home for female tuberculosis patients, was established, and Codington also supported this home in many ways. For example, some of the corn powder donated by the world's relief organizations to Jejung Hospital was given to the workers who built the care facilities. In addition, Codington raised funds to purchase lands in Arirang Pass and two other areas in Bongseon county in Gwangju, and built three sanitariums, allowing 30 male tuberculosis patients and 80 female tuberculosis patients to receive long-term care [6].



### **5.3. Co-working ministry with non-profit social organizations**

Despite the difficulties in Korean society at the time, Coddington actively engaged in joint work with non-profit organizations that sought to offer a new life and healing to the needy. He supported Seongnowon, which operated facilities for the elderly, and helped Pyeonghwawon, which opened the way for rehabilitation by rescuing prostitutes who were in dire circumstances. A mental hospital, which had been rejected by the medical community as an unwanted facility, was also supported by Coddington to give comfort and hope to patients [6].

## **6. Coddington's medical spirituality**

### **6.1. The medical situation at the time of Coddington**

Dr. Coddington served the Korean people from 1949 to 1974. During this time, South Korea was not a country with the same medical system as it has today. Korea had a painful history under Japanese colonial rule from 1910 to 1945, with economic exploitation and human rights abuses. After liberation, the Civil War from 1950 to 1953 reduced the territory to ruins, and the economy became one of the poorest countries in the world. As we have already seen, most Koreans at that time suffered from poverty, and it was said that they were lucky to be able to eat three meals a day. When the poor became ill, there was no easy way to get treatment; they could not afford to go to hospital. Even when they went to hospital, it was difficult to see professional doctors who could cure them, because medical standards were low and professional medical personnel were too few compared to the number of patients. Leprosy and tuberculosis were recognized as incurable diseases, and sufferers were ostracized by family, relatives and friends and forced to isolate themselves from society, waiting only for death. Fortunately, Aeyangwon was founded by people like Wiley Forsythe, Heung-Jong Choi, and Robert Wilson, providing a place to treat leprosy patients in South Jeolla Province [10]. However, treatment for tuberculosis patients in Gwangju and South Jeolla Province was still at a rudimentary level.

### **6.2. Coddington, a Good 'Shepherd' to his patients**

Coddington took office in September 1951 as the fifth director of Jejung Hospital amid the desperate medical conditions in Korea. The hospital started at the residence of missionary Eugene Bell (1868-1925) and gradually grew into one of the best medical services centres in Gwangju. However, the Korean War left the hospital in ruins. When Coddington began his medical work, almost all of the hospital's facilities had been destroyed. Coddington set up a temporary clinic and started rebuilding the hospital. He paid his special attention to taking care of tuberculosis patients, yet there were many patients with other diseases coming to Jejung Hospital. Most patients were poor. He wrote this situation in his letter:

“[they] lacked the bus fare of less than a dollar to come into Gwangju for treatment and return” (H. Codington, personal communication, November 17, 1960). Nevertheless, Codington tried to hospitalize as many of his patients as possible. Then a serious problem arose in hospital management. Payment of monthly wages to medical staff and administrative personnel became difficult. The board of directors said that the hospital had become a camp for beggars and demanded that Codington manage the hospital wisely and economically. Codington responded to them: “Can a pastor abandon a Church member just because the chapel is small? These patients are my patients, and I cannot abandon them.” [3, p. 168]. Here “my patients” are a reminder of the relationship between Jesus and His sheep in the Gospel of John (John 10.11, New International Version, 2011). In this narrative, Jesus is a shepherd and the person who comes to Him is a sheep. This story refers to the Church’s protection of sheep by the shepherd. No matter what circumstances the shepherd is in, he must devote himself and serve his sheep. Jesus firmly rebukes the Jewish clergy because they did not take care of their sheep. In particular, the Jews made the mistake of forcing people out of the community by isolating them from society. They looked at leprosy or insanity as signs of God’s condemnation and, worse, they regarded a patient’s illness as a force of evil. In this religious culture, most Jews, whether they are deeply religious, did not welcome seemingly incurable patients. Rather they demonized them, driving hatred. The human image of God (Genesis 1.26-27, New International Version, 2011) was played down and the devil’s image was brought to the fore. In defiance of these negative religious practices, Jesus welcomed patients and healed them. After healing them, Jesus wants them to return to the community (Matthew 8.4, Mark 1.44 and Luke 5.14, New International Version, 2011). Jesus believes that a priest is obliged not only to serve the sheep by helping them establish proper relationships with God, but also to heal and restore people so they can lead a normal life in the community. For one reason or another, Jesus vehemently accuses the clergy of theft or robbery and failing to heal people and help them to recover (John 10.1, New International Version, 2011). Just as He risks His life for the sheep as a good shepherd, all those in the position of a shepherd should commit their lives to serving the sheep (John 10.11-15, New International Version, 2011). For Codington, this meant that just as a pastor welcomes and protects the believers who come to his Church, whether the size of the church is large or small, he too is doing his job as a shepherd of his patients by welcoming them in, no matter what the circumstances.

The care of the patients, Codington thought, was a privilege and duty for a doctor or hospital. In addition to assuming the position of the shepherd of John’s Gospel, Codington tried to follow Christ’s method of healing. In the Gospel, Jesus welcomes those who come to Him unconditionally and He heals them (Mark 1.41, New International Version, 2011). Jesus does not reject poor patients. Sometimes Jesus applies mud with His own hands to the eyes of the blind man (John 9.6, New International Version, 2011). In treatment, a warm word touches the hearts of patients because it involves not only sympathy and

compassion but also expresses love and comfort. But touching the patients' bodies directly can be the best expression of caring. Deeply appreciating the life of Jesus, Codington tried to accept patients unconditionally whenever he met them. He treated the enemies of the South Korean Army who were captured. In his eyes, the patient, whether North Korean or South Korean, deserved treatment unconditionally. At the height of the Korean War, he said in his letter: "The US Army ... medical officer requested that we render treatment to about fifty badly wounded Communist soldiers in the local city hospital ... My work has consisted mainly of changing dressing for them and chemotherapy. To me they appear much like the average young Korean you see around here. Most of them were especially appreciative of what was done for them and several days later I noticed many of them reading Gospels of St. John that were given to them... I believe the excellent medical care and treatment given the wounded Communist prisoners ... will do untold good toward the future peace and understanding in this land." (H. Codington, personal communication, October 24, 1950)

The love of enemies, Codington reasoned, was a shortcut to reconciliation. A young refugee from the North suffered from tuberculosis and was hospitalized. Although he was seriously ill and would die within the year, Codington did not give up and started treatment. When a patient lost a lot of blood, Codington transfused his blood to save the patient [3, p. 47]. In almost every treatment, Codington met the patients in a tranquil manner, comforting their minds by touching their hands or slightly hugging their bodies, imitating Jesus' touching methods. Korean doctors working at the same hospital did not apply artificial respiration by putting their mouths on the mouth of a patient with tuberculosis, because they were afraid of infection. But Codington often did this without hesitation. Recalling Codington's life, John Linton, a professor at Yonsei University's medical school, said: "I saw Jesus' face from [Coddington]" [3, p. 1].

### ***6.3. Codington's hospital management philosophy***

Coddington's ideal hospital operation was that all patients should be welcomed; poor patients should be treated for free service or at minimal cost. At the time, the Korean government could not afford to provide financial assistance to private hospitals. Gwangju Jejung Hospital was managed by financial support from the US Presbyterian Church and personal fundraising campaigns by missionaries and Korean medical staff. Codington himself was active in various fundraising campaigns, but he always faced limits. To resolve the difficulties in hospital management, the board of directors gave the hospital directorship to another doctor while Codington was on sabbatical in the United States. In 1966, Codington found on his return from the sabbatical that he had been demoted. He was appointed to take care only of the section treating tuberculosis. Codington accepted this position with pleasure and responded: "Yes, it is an opportunity God gives me to see more patients. I like this position better." [3, p. 180] While serving as the section chief, he continued to support difficult patients at his own

expense or insisted on providing free treatment. Tuberculosis patients who heard about Codington's free treatment gathered from all over the country. They came in the belief that they could live if they met Codington.

For Codington, the true ideal model for free treatment was Jesus. So, he tried to follow the way of Jesus' treatment. He believed that a medical doctor should treat patients unconditionally. Yet this ideal had been one crucial limit. It was, in practice, impossible to accommodate all patients in private hospitals run by individual voluntary donations. The only way of resolving this problem was through a financial commitment by the state, not by individual fundraising. Today, the South Korean government shares Codington's medical ideal. Since July 2002, the government has operated a state-run National Health Insurance Service (NHIS) to help the entire population of South Korea. Because of this health service, no one in South Korea is denied access to hospitals or doctors. This system has become one of the best health care providers in the world. According to their income levels, South Koreans pay health insurance premiums to the government-run NHIS, so that the poor are not excluded from hospitals. Here we learn that history teaches us that, in the end, ideals and dreams are 'true' things that can yield visible fruit. Codington's ideal was hard to put into practice in his time, but now the South Korean government is going further than Codington's medical dream.

## **7. Conclusions**

How should we evaluate Codington's 25-year Korean ministry? He was not an outstanding hospital administrator. When he was the head of Gwangju Jejung Hospital, his hospital budget was always in the red. The doctors, nurses and administrative personnel who worked in the hospital worried about getting paid because Codington hospitalized so many patients and served poor patients free of charge. Many patients not only did not pay their hospital bills, but they also took a considerable amount of money by begging for their medicine from the hospital director's pocket. Codington did not blame these Koreans because he believed that at least one out of ten patients was a real poor patient. Codington condoned and embraced nine false patients because of his love for that one.

Codington realized that at times of political unrest and in a harsh economic environment, the weaknesses and falsehoods of humanity appear. But God is strong and true, and He will change everything for the good. Although many Koreans failed to solve difficulties with food, clothing and shelter after the Korean War and tended to tell lies, they could be changed to be honest and diligent people if they were disciplined by Christian messages. The story of Codington's faith began to emerge over the years when he served as a missionary in Bangladesh. The college students in Gwangju, who were once treated at Codington's home and recovered their health, began to show an interest in Codington's missionary work in Bangladesh. In the early 1970s, they heard of the suffering of the Bangladeshi people from floods and famine. These

Koreans campaigned to raise funds nationally and sent a substantial amount of money to Bangladesh for relief work. They also provided prayer support and mission offerings for Coddington's work in Bangladesh. Many doctors from seven Christian hospitals in South Korea created the Korean Overseas Medical Mission Society (KOMMS) to join Coddington's mission to Bangladesh as medical missionaries.

Ultimately, Coddington's dedication and service helped Koreans avoid being beggars in the long-term and produced many who could be considered a 'little Jesus' or 'little Coddington'. Coddington held onto a grand dream throughout his Korean ministry. He dreamed that the hospital door was always open, that patients who came to the hospital would not be rejected by medical staff for any reason. He never mentioned hospital management in connection with money. He welcomed patients and took care of them with all his heart. Upon learning of his sacrificial ministry, the governor of South Jeolla Province awarded him a letter of appreciation in 1959. In 1962, the central government of South Korea also gave him an award to recognize his contribution to improving the health and social welfare of Koreans. Again in 1974, the Korean government awarded him a presidential medal and a plaque of appreciation to commemorate his dedication. The spirit of Coddington - autonomous self-development and accountability with the heart of a shepherd - is now shining in Korea. Currently, South Korea is making an outstanding contribution to global Medicine. The entire nation has joined with the state-controlled NHIS to pay appropriate premiums and receive quality medical services according to their income. Since the end of 2019, the South Korean government, medical staff and the public have responded well to the coronavirus incident, presenting a model of excellent treatment to the world. The beggar spirit of many poor Koreans at the time of Coddington is nowhere to be seen in Korea. The ultimate victory dreamed of by medical visionaries like Coddington has become a reality. Therefore, Coddington tells us today, 'Do not be disappointed in doing good, believe in God's faithful goodness and do good without hesitation'. This is the most important spiritual legacy he has left us.

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