

MISSION CONNECTION



Miracles through Medical Mission

Late Fall 2006 Volume 13, Issue 5

ASHA GRANT PROJECTS NEED SUPPORT

Projects in three developing countries wait for funds to complete facilities that will further the work of healing in Christ's name. American Schools and Hospitals Abroad (ASHA) grants have been awarded MBF for projects in Haiti, Democratic Republic of Congo, and India. However, according to the ASHA agreement, MBF must raise additional "shared" funds.

Haiti

Part of the long-range plan for the nursing school at Hopital Ste Croix was realized with much



A male nursing student at Hopital Ste Croix in Haiti doing clinical studies.

rejoicing when the school building was completed in time for classes to begin in January 2005. This fall, the third class of 35 students is being admitted, bringing the total student body to 75. The school offers the only four-year baccalaureate nursing program in Haiti and, unlike other schools there, admits both male and female students.

Other modules in the plan: a security wall, a residence for the Dean of Nursing School, and a dormitory addition are critically needed. The school presently rents a house in town to accommodate

continued on page 2

GOD'S PEOPLE PRAY

When we hear the exciting stories of what medical mission workers are doing in faraway places, many of us wish we could be there, doing important work for the cause of Christ. But, we carry responsibility for work that is equally significant: supporting the ministry of medical mission in prayer.

There's a lot to pray for. MBF's ministry provides support to PC(USA) partners in more than 100 mission hospitals and clinics in over 30 countries. Activities include remote medical mission sites, community health clinics, nutrition centers, AIDS/HIV treatment and education, nursing schools, training for all levels of health personnel, rehabilitation wards, and outreach programs, plus salary support for mission coworkers overseas. Here are some requests:

1. Pray for the leadership of MBF. Pray for wisdom for the

45 trustees as they make decisions concerning supporting partners, for MBF's Executive Director Rev. George Pope, and for the staff of MBF.

2. Pray for the resources needed for MBF to maintain the level of support needed for all PC(USA) partners overseas.

3. Pray for the missionaries and their families, hospitals, clinics, nutrition centers, schools and health programs that receive financial support from MBF.

4. As you read through this issue of Mission Connection you'll find other more specific items that need prayer. Underline them or make a note of them and include them in this very important work that you do: prayer. Thank you.

**"WE PRAY . . .
THAT THE NAME
OF OUR LORD JESUS
MAY BE GLORIFIED IN
YOU, AND YOU IN HIM,
ACCORDING TO
THE GRACE
OF OUR GOD AND THE
LORD JESUS CHRIST."
2 THESS. 1:12**

ASHA Grant Projects

continued from page 1

the student overflow. The ASHA grant awarded needs shared funding to complete these modules as soon as possible.

India

The Neuroscience Unit at Wanless Hospital in Miraj is already under construction. Funds generated through the ASHA grant are not sufficient to complete the building and also provide the special equipment needed for the diagnosis and treatment of neurological

disorders.

Democratic Republic of Congo

In 1954, IMCK (Good Shepherd Hospital) began a nursing program with 12 students. Today, they've graduated hundreds of nurses and their goal is to become an A-1 nursing school, training registered nurses. To do that, they need to expand and add more classrooms, a library, conference hall, and administration modules. They also plan renovations that will make maximum use of existing buildings.

YOU AND SHARED FUNDING

When you and your congregation share your resources to help complete these projects, you also share in the joy of seeing young people trained as crucially needed health workers. You share in the satisfaction of offering, for the first time in mid eastern India—even to those who cannot afford it—modern emergency and long-term neurosurgical and neurological care. Contact the MBF office for more information at 800-547-7627.

[A REPORT FROM THE FIELD]

COVENANT HOSPITAL UP AND RUNNING

Former MBF trustee Dr. Sylvia Campbell recently returned from a visit to Covenant Hospital in Mombin Crochu, Haiti. "Having seen the hospital grow from a barely functioning clinic on our first trip in 1996 to an organized, functioning hospital on this visit in 2006, demonstrates a great accomplishment," she says. Dr. Campbell and a team from her church, Palma Ceia Presbyterian in Tampa, FL, last visited Covenant Hospital in September of 2004, but because of political unrest in Haiti they were not able to return until September this year. They were encouraged by what they found.

"First, the hospital is now being run by Haitians, for Haitians," she says. "We were just there to help. We found it clean and well run by a competent staff. Drs. Ken and Joanne St. Louis have great plans for the future of the hospital.

"Also, it was encouraging to see how the Haitian government is now taking responsibility for their people and at least setting up the infrastructure for getting health services to the underserved areas, doing what they can with



Rev. John DeBevoise, pastor of Palma Ceia Presbyterian Church, entertains a young burn victim. Palma Ceia helps support the Covenant Hospital project.



little money."

The Episcopal Diocese of Haiti and Haitian Public Health are responsible for funding Covenant Hospital. "Unfortunately," says Dr. Campbell, "that funding is insufficient and the hospital is continually in need of additional money for operations, as well as supplies and equipment."

This could be discouraging for the hospital staff. But, Dr. Campbell reports, the Haitians have incredible faith. "It's not that we were going down there and taking our faith to them. They gave to us. Their faith is what keeps them going even in the midst of deep poverty. I believe in my heart that Covenant Hospital is God's hospital and that He will see that it continues."

MBF is committed to seeking additional funding for this struggling, but effective hospital.

During a trip to Haiti in 2003, Dr. Campbell performed an emergency C-section to deliver this healthy three-year-old who was not expected to survive.

PRAYER AND PRAISE FORM MALAWI

AN INTERVIEW WITH NANCY AND FRANK DIMMOCK

Franks and Nancy Dimmock are in the States now after 14 years in Malawi where Frank has served as southern regional health consultant for eastern and southern Africa for the PC(USA) and where Nancy has founded and run a crisis nursery for abandoned infants, many of them victims of the AIDS crisis. They'll return to Africa in June next year, this time to Lesotho in the south of Africa where the epicenter of the AIDS epidemic has shifted.

MBF: Nancy, who is in charge of the Crisis Nursery now that you've left Malawi? And how many babies are being cared for?

Nancy Dimmock: Two Malawi women are now in complete charge: Director/Social Worker Elsie Kumwenda and Clinical Office/Matron Mwawi Nyirongo. They send me regular reports by email—not because they are required, but they know I am interested and praying for them.

The nursery now has 28 babies. That brings the total number cared for to more than 150 since we opened in 2002.

Does the crisis nursery have the support it needs now?

Nancy: The Nursery operates by faith. We anticipate that we will have what we need when we need it, because we serve Jehovah Jireh, our faithful Provider! We share the needs of the Nursery as an opportunity for people to be a part of this ministry to needy infants.

Frank, what has been the focus of your work in Africa?

Frank: I've had several jobs. One was to help coordinate the efforts of the Central African Church Presbyterian, our partner in Malawi, which has five hospitals. I've consulted with hospitals in Ethiopia, Kenya, Zambia, LeSotho, and Malawi on administrative things like recruitment of staff, fund raising, proposal writing, I sit in on all their board meetings. As a former hospital administrator, this is something I'm used to doing.



The Dimmock family at the graduation of Jesse from Riff Valley Academy. Top row L to R: Nathan (20), Frank, Nancy, Moses (20). Second row: Andrew (9), Jessie (17), Katie (16). Front row: Jackson (1 1/2), Alifa (8), and Isaac (3).

Will this change with your move to the south?

Frank: I'll be working with the Christian Health Association of Lesotho, an umbrella organization for Christian health work there and will continue to work as a health consultant to our partners, this time throughout Africa. Also, I'll be working with orphans and vulnerable children, not on the micro level as Nancy does, but more in networking on these issues for the PC(USA). This work with the children has become a priority with PC(USA).

What do you see as MBF's most important involvement in health ministry in that part of Africa?

Frank: MBF continues to generate support for the work there and encourages sending short term medical help. This has become more important as medical personnel in each country begin to take over what the missionaries used to do. For that reason, the training and mentoring of Africans by short-term medical professionals is a critical need.

[I HAVE A QUESTION]

MBF is known for supporting hospitals, clinics, and medical workers, particularly in developing countries.

How is the good news of Jesus Christ shared with people served by those programs?

All ministries funded by MBF have a chaplain and/or Christian outreach programs modeled after the compassion and healing of Jesus Christ.

How many individuals are served by MBF programs annually?

Approximately three million persons are served worldwide.

Does the Medical Benevolence Foundation encourage

capacity building among its program recipients?

Yes. MBF provides funds for:

1. Building nursing schools and staff housing in places like Haiti, Malawi, and the DR Congo;
2. Medical training programs for birth attendants, midwives, health assistants, and Community-Based Health and Development Programs in places such as Brazil and Mexico;
3. Programs that focus on nutritional assistance and income-generating development to promote financial independence;
4. Providing rural clinics in Third World countries.

Medical Benevolence Foundation
P.O. Box 770636
Houston, TX 77215-0636

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Prayer and Praise for Medical Mission



MEET SAM URICK

MBF'S NEW NETWORK DATA ADMINISTRATOR

Sam Urick is calling on his more than fifteen years in the field of Information Technology to streamline and automate some of the informational activities of the office, thus saving MBF both time and money. He comes to MBF from the University of Texas Medical Branch in Galveston where he managed IT for their Biomedical Systems.

Sam and his wife, Denise, (his favorite person in the whole world and his Karate partner) enjoy a variety of activities, as long as they happen outdoors.



Help Us Update our Files

Please either e-mail or "snail" mail your current address to our Houston office so we can update our files.

And tell us if you'd like to see e-mail news from MBF.

E-mail: info@MBFoundation.org.

Snail mail: P. O. Box 770636,
Houston, TX 77215-0636.

IS YOUR CHURCH PLANNING AHEAD FOR AN ALTERNATIVE CHRISTMAS?

If not, there's still time. Check with the MBF office today for information that could make this one of the most significant Christmas seasons your church has experienced.

WATCH FOR . . .

. . . an article about MBF Board of Trustees President Jimmy Hite and his work on behalf of MBF in the November issue of Presbyterians Today.

Medical Benevolence Foundation
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Houston, TX 77215-0636
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e-mail: info@MBFoundation.org
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