

MISSION CONNECTION



Inspiring News from PC(USA) Medical Missions Around the World

Spring 2004 Volume 11, Issue 1

PUTTING A FACE ON THE DISEASES OF POVERTY

by Pam Ator

The diseases of poverty: AIDS, malaria, and tuberculosis cause nearly half the deaths of people under 45. Worldwide, that's nearly 13 million deaths every year, a number too huge to comprehend. When I visited Africa last fall, those statistics became the faces of real people.

Along the road in Africa nearly everyone is affected by the diseases of poverty. I met a grandmother cradling a three-week-old baby already infected with malaria. I witnessed the aftermath of an AIDS patient's death in a TB ward. I met volunteers who day in and day out give of themselves to care for others. I met directors of programs who struggle to find funds to train and provide supplies, and I met Olipa and Rachael.

Last year a grant from the MBF's Diseases of Poverty Fund enabled the Synod of Livingstonia's AIDS Control Programme (LISAP) in Malawi to train and supply Home Based Care (HBC) volunteers. Olipa is one of those volunteers. Her uniform is a plastic badge and a printed tee shirt with the words "Love Thy Neighbor, with God Nothing is Impossible." She has an ongoing list of eleven patients she visits. As an HBC volunteer, Olipa visits patients and their families, offering food, prayers, and fellowship. She trains relatives and guardians how to care for patients, how to protect themselves from infection, and assists with a variety of domestic chores from preparing food to thatching a leaking roof. This is in addition to managing her own family and

Rachael with some of the orphans of AIDS.



Olipa, with one of her patients, wears her LISAP volunteer t-shirt.

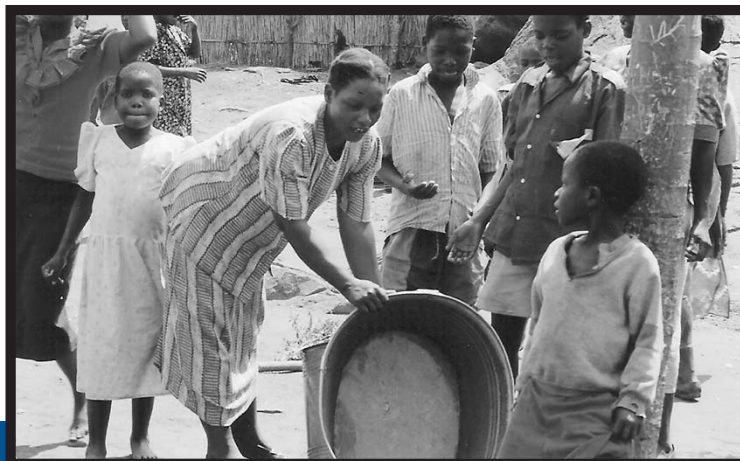
farm where she works in the fields early in the day.

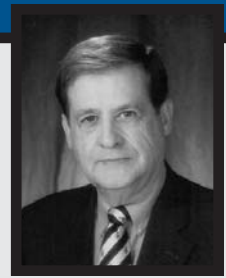
God has gifted Olipa with both compassion and courage. Four of Olipa's patients are infected with AIDS. Throughout much of Africa it is an immense act of courage to become involved with work relating to HIV/AIDS. Even with the many education programs, most people living in villages know little about the causes, treatment or prevention of this deadly virus. With this lack of knowledge comes an overriding fear and stigma attached to anyone associated with HIV/AIDS.

LISAP has trained more than 150 courageous volunteers who have, in turn, formed committees in their churches and communities, resulting in over 1500 volunteers who call on patients in northern Malawi. Home Based Care is only one of many LISAP programs. Programs for youth, women, and orphans provide education, care, training and fellowship in villages often filled with fear and misunderstanding.

MBF's Diseases of Poverty funds also ensure the continuation of programs like the Community Based Orphan Care (CBOC) program in Lilongwe, Malawi. Rachael, a young widow with six small children, works at the CBOC center in Matapila. Her husband was a pastor. Over 100 primary-age children come to the center when school is dismissed at 1 p.m. They are fed a substantial midday meal, and help distribute the food and clean up the

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Trustee Task Force Recommends Changes PART 2: TRANSITION TO NEW WAYS OF SERVING

In March 2004, you will only be one 800-number away from reaching MBF for all of your needs. MBF will be shifting to a single 800 number (800.547.7627) to better serve all Presbyterian congregations and individuals.

Our continuing goal is to create opportunities with all Presbyterian congregations and individuals through sharing stories and reports about the involvement of the Presbyterian Church (USA) in international health ministries. As I reported in the last issue of Mission Connection, as a result of the Trustee Task Force Recommendations and approval by the MBF Board of Trustees, some MBF staff will be working only with congregations while others will provide information to our individual supporters. Though we still have staff

located in various parts of the country, we are changing from our regional approach for a number of reasons, including the fact that we have fewer staff (like other nonprofits because of the downturn of the US economy).

Does your congregation need a mission speaker, or a workshop leader, reports from Presbyterian medical missionaries, information about alternative Christmas opportunities, or video and printed materials? You are only one free call away from getting what you need!

Call 800.547.7627, and call today.

Daniel L. Force

Diseases of Poverty *continued from first page*

dishes and eating area. One-on-one contact with the children is handled by adult and youth volunteers. Every day you will find Rachael at the CBOC center directing cooking, eating, cleanup, Bible teaching and playtime. With a smile on her face and surrounded by a sea of children, Rachael says she wants to be like Anna from the tribe of Asher

(Luke 2.36). Anna was also widowed at a young age, lived to the age of 84, and stayed in the temple to worship God and tell about the child Jesus.

Community Based Orphan Care is the response of our overseas church partners to the challenge of caring for the millions of children throughout sub-Saharan Africa who have lost parents in the wake of the HIV/AIDS epidemic. By 2010, the number of

orphaned children is expected to reach 25 million. This will be one-third of the children in Africa. Your gifts through MBF provide hope for these children and others who are victims, in one way or another, of the diseases of poverty.

Along the roads of Africa I was in awe of the Christ I saw in the volunteers there—the same Christ I see in you here, who care.

Disturbing Facts The Diseases of Poverty

HIV/AIDS

- 12,943,000 deaths annually— one every 11 seconds
- Over 36 million people are currently living with HIV
- By 2020 AIDS will have caused more deaths than any other disease epidemic in history

MALARIA

- 1,080,000 deaths annually— one every 29 seconds
- The majority of those who die from malaria are children under the age of 5
- Malaria is passed on to humans by the bite of an infected female mosquito

TB

- 1,660,000 deaths annually— one every 19 seconds
- Each year 8.8 million people develop active TB, most of these in their most economically productive years, 15 to 54
- The disability resulting from the disease can render productive and self-sufficient families destitute.

—MassiveEffort.org

A DREAM COME TRUE

HOLY CROSS NURSING SCHOOL COMPLETED

Since 1998, Hopital Sainte Croix (Holy Cross Hospital) in Haiti has waited patiently for its dream: a school for the training of nurses. The building to house the new School of Nursing is now completed by MBF and will be ready for the official opening of the school in the fall of this year.

The generosity of PC(USA) donors through MBF and a major grant from American Schools and Hospitals

Abroad (ASHA) made the campus possible. Haiti is the poorest country in the Western Hemisphere. The need for trained nurses there is critical, not only for hospitals, but especially for the community outreach program of Hopital Sainte Croix.

The building for the new School of Nursing at Holy Cross Hospital in Haiti is now ready for occupancy.

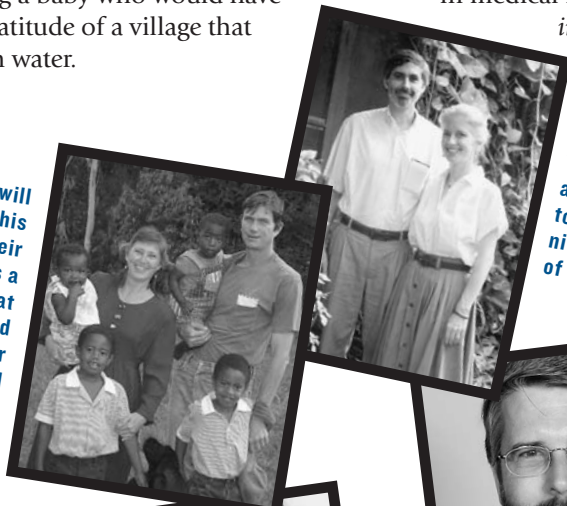


MISSIONARY HEALTH WORKERS DEPEND ON MBF SUPPORT

From Haiti to Africa's DR Congo, Presbyterian health workers bring their expertise to people in critical need of medical services. Often without up-to-date facilities and equipment, these dedicated professionals have chosen to minister where every day is a challenge and where the rewards are not monetary. Rather, their rewards come in the grateful smile of a mother holding a baby who would have died of diarrhea or the gratitude of a village that now has a well with clean water.

In 2004, the PC(USA) has asked MBF to raise funds for the medical missionaries you will meet on this page. Your congregation may want to join in supporting one of these health workers. If it does, your church may find, as others have who have "adopted" a missionary health worker, that this is an effective way to engage people in medical missions. For more information, e-mail info@MBFoundation.org or call 800.547.7627.

Jim and Jodi McGill will return to Malawi this summer to continue their work where Jodi is a nurse-practitioner at Ekwendeni Hospital and Jim is Protected Water Coordinator for the Synod of Livingstonia.



Drs. Leslie and Cynthia Morgan are staff physicians at Christian Mission hospital in Rajshahi, Bangladesh. They minister to Muslims, Hindus, and Christians and regularly travel to rural areas to assist the community health programs of the Church of Bangladesh.

Larry Sthresley, with his wife Inge, is assigned to the Presbyterian Community of DR Congo and SANRU, a program which Larry helped develop to provide a health care system for rural areas. Inge's expertise is in agriculture and development.



Dr. Magda Iskander has developed a training program for home health providers as Consultant and Community Health trainer for the Coptic Evangelical Organization of Social Services in Egypt. Magda's work helps build bridges between Christians and Muslims.



Frank and Nancy Dimmock serve in Malawi. Frank is the health coordinator for the Church of Central Africa Presbyterian and southern Africa regional health consultant for the PC(USA). Nancy manages the Infant Crisis Nursery for abandoned children in Lilongwe.



Dr. Salvador and Irma de la Torre are in Kenya where Salvador is the medical officer in charge of Kikuyu Hospital and Irma is the operating room nurse-in-charge.



Since May 2002, Caryl Weinberg has been working from Cameroon as the PC(USA) Regional AIDS Consultant to Central and West Africa, working with our partners there to better understand and respond to the AIDS pandemic.



Andy and Ellen Collins are in their third term with the United Mission to Nepal in Kathmandu. Ellen is a health education consultant for a rural health project and Andy creates training and promotional materials for the mission.

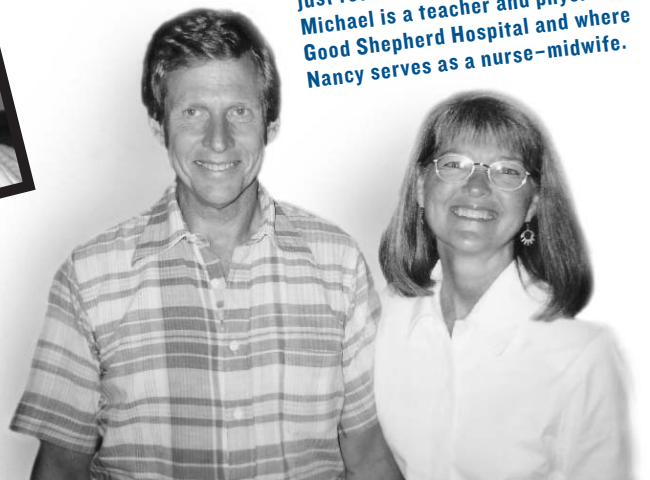


Marie Lusted lives in Addis Ababa and is the nurse in charge of the work at Pokwo and Gilo clinics in western Ethiopia.



Dr. Michael and Nancy Haninger have just returned to DR Congo where Michael is a teacher and physician at Good Shepherd Hospital and where Nancy serves as a nurse-midwife.

Dr. Martha Sommers is currently "on loan" to Ekwendeni Hospital in Malawi and under appointment with the Synod of Livingstonia. She specializes in family practice.



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Putting a Face On the Diseases of Poverty



SEE YOU AT THE BREAKFAST IN RICHMOND

If you plan to attend the PC(USA) General Assembly in Richmond, VA this year, please join us at the International Health Breakfast in the Marriott Hotel on Tuesday morning, June 29, between 6:45 and 8:15 a.m. Dan Force, Executive Director of the Medical Benevolence Foundation and Bob Ellis, Coordinator "Interim" of International Health Ministries, will speak on international health issues and the Presbyterian response. We look forward to meeting you there.

IN MEMORY OF:
Barbara Eggleston, retired PC(USA) missionary and MBF volunteer, passed away January 15, 2004. We extend our sympathy and prayers to her husband, Forrest, who, with Barbara, served for over 30 years as a missionary physician in India, and for over 10 years as an MBF "full-time" volunteer.

IF YOUR CONGREGATION NEEDS...

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Administrative Charge Continues

Restricted donations increasingly outstrip unrestricted donations coming to MBF. The Foundation is dependent on unrestricted gifts, not only to send overseas, but to continue the ministry of mission interpretation to Presbyterian congregations and to collect and ship medical supplies and equipment. Due to the shortage of unrestricted funds, the MBF Executive Committee continues to place a 5% administrative charge on restricted cash donations. In other words, out of every restricted dollar, five cents will be used for mission interpretation and administration.

MBF: Hope and Healing for Three Million People

Through the sacrificial giving of Presbyterians who act on Christ's call to love as he loves, MBF's ministry now touches more than three million people each year. In a recent *Cornerstone* magazine article, MBF Executive Director Dan Force talks about the importance of planned giving in making possible MBF's support for medical personnel and health care ministries around the world, as well as the gathering of critically needed medical equipment and supplies.

Planned giving to MBF can be arranged through the Presbyterian Foundation, says Dan Force, in the form of a charitable gift annuity plan, a charitable remainder trust, or a permanent fund.

The Medical Benevolence Foundation (MBF) with the Presbyterian Church (USA) proclaims and demonstrates the gospel of Jesus Christ by encouraging and supporting the healing ministries of our worldwide partners.

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