

# MISSION CONNECTION



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

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## MBF AND PC(USA) ON THE FRONTLINES CAN WE WIN THE WAR AGAINST DISEASES OF POVERTY?

**A**s the World Health Organization calls for a major war against the diseases that weaken developing countries, MBF asks Presbyterians to step up support of PC(USA) health partners in their fight against the "diseases of poverty," such as malaria, AIDS, and TB.

**MALARIA** claims more than 2 million lives every year, and is one of the three major killers of children in the world. In Africa alone, every day of this year nearly 2,000 children will die of the disease. Now, a program begun last year by International Health Ministries Office of the PC(USA) could bring malaria to its knees. "Networkers," a project enabling Christian women in Africa to sell affordable mosquito nets treated with insecticide to local families, has already proven successful. A gift of only \$10 will provide a mosquito net and health education for one child.

**AIDS**, according to a UN report, was the reason for 5,500 funerals each day in Africa in 1998. Since then, the problem

has grown. In South Africa, 45% of the military is HIV-positive. In developing countries around the world, hospitals, including PC(USA) partner hospitals, desperately need testing equipment, sterilizers, gloves, and syringes for safe care and adequate protection of care givers.

One of those hospitals, Patan Hospital in Kathmandu, Nepal, had seen AIDS only in a few Westerners until three years ago. But now, even in far-off Nepal, AIDS is taking its toll. Dr. Mark Zimmerman, Patan's Medical Director, tells about a typical patient: Naani, a Nepali country girl contracted AIDS when she was kidnapped into brothel life in India. A nurse discovered that her family planned to keep her in a small shed at the back of their farm, and brought her to Patan Hospital. Naani was one of an estimated 100,000 Nepali women working as prostitutes in Bombay and at high risk for the virus.

In Missouri, India, the community health program run by Landour Community Hospital offers much-needed HIV/AIDS

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## MBF ON PBS

### PC(USA)'S BEST-KEPT SECRET WILL BE OUT

**T**his coming May, PBS stations across the country will air a special episode of "The Visionaries," featuring the Medical Benevolence Foundation. The series, hosted by actor Sam Waterston, tells the story of people involved in nonprofit organizations

around the world.

MBF will be the feature of one of the thirteen shows of the 2001-2002 season. "We were especially impressed with MBF's sustainability," says producer Barbara Seidl. "They don't just send whatever is avail-

**"The Visionaries" camera crew visited Embangweni Hospital in Malawi recently to film a segment of their program featuring MBF.**

able, but what is needed. It's not a quick fix, but specific, directed, interactive [medical help] with follow-up."

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## WHO (World Health Organization) Calls For a Massive Effort Against Diseases of Poverty

The world needs to unite for a massive effort against the diseases of poverty," Dr. Gro Harlem Brundtland, Director General of WHO, said recently at a meeting of organizations active worldwide in the fight against these diseases.

She went on to explain that a few main diseases, such as malaria, HIV/AIDS, and tuberculosis are directly biting into the economic growth of poor countries. There is increasing recognition of the sheer difficulty faced by developing nations as they seek to counter these health threats.



Analysis of data from thirty-one African countries during the period 1980 to 1995 showed that the annual loss of economic growth due to malaria has been as high as 1.3% per year, and if this loss had been compounded for 15 years, the GNP level would have been reduced by nearly 20% during that time.

Infectious diseases are the leading killer of children and young people in developing countries. Your support of the international health work of the Presbyterian Church (USA), via MBF, links you in the fight against the Diseases of Poverty. *Daniel L. Force*

### Diseases of Poverty *continued from first page*

education to its community of more than 20,000 people. But funds are running low and needs continue to grow.

In Malawi, a sign inside one of the PC(USA) partner hospitals reads, "FIGHT AIDS. DEATH OF YOUNG MEN AND WOMEN IS ALSO THE DEATH OF THE FUTURE MALAWI NATION." The Church of Central Africa Presbyterian operates a Child Survival Program serving children orphaned by AIDS. Largely because of the virus, life expectancy in Malawi is now 36 years, and 14% of the population is HIV-positive.

**TUBERCULOSIS**, another disease of poverty will not go away. In spite of progress in the cure and prevention of TB, it is still a major killer. In Vengurla, India, TB is one of the most commonly treated medical problems presented at St. Luke's Hospital. MBF seeks contributions for St. Luke's Community Health Program. In North Korea, tuberculosis spread quickly when floods and drought hit the area in the late 1990's. Because of caring Presbyterians, medicine, food supplements, and supplies are finding their way to 73 North Korean TB centers.

Please consider using the enclosed envelope for a year-end gift to show your support of medical ministry.

### MBF on PBS *continued from first page*

Earlier this year, MBF Executive Director Dan Force and MBF President Dr. Teryl Brooks met the "The Visionaries" producer/director in Malawi where the first footage of the episode was shot at Embangweni Hospital. To tie in the relationship and impact of Presbyterian churches and individuals here in the U.S. on MBF's work around the world, the filming crew visited First Presbyterian Church, Topeka, Kansas. Under the lead-

ership of the Rev. Dr. Neil Weatherhogg, First Presbyterian's pastor, and with information supplied by MBF Regional Director Lynn Swinke-Workman, the church had made a decision to support Embangweni Hospital in their most recent capital campaign. The congregation also hosted the Embangweni Choir during its tour of PC(USA) churches.

The MBF episode of "The Visionaries"



Lynn Swinke-Workman, speaking at First Presbyterian Church, Topeka, Kansas.

will feature First Presbyterian Church, along with Dr. Weatherhogg and MBF's Swinke-Workman, who spoke briefly at the Sunday morning service the day of the filming. The production crew also interviewed

members of the congregation.

What will be the impact of "The Visionaries" broadcast? "Immeasurable," says Lynn Swinke Workman. "It is my hope that after viewing the PBS program, people will see and understand the full embodiment of the medical mission program of the Presbyterian Church ... that those individuals and congregations with any amount of resources will identify themselves, and make a major impact by becoming a supporter of our denomination's mission program through MBF. The secret will be out!"

### A Vision Realized

Back in the early 90's, "The Visionaries" executive director, Bill Mosher, set out to produce "positive, uplifting, inspiring shows about individuals working for nonprofit to make the world a better place." Mosher knew that, even though the nonprofit sector is one of the most active segments of the work force today, the media, tending to focus on negative images, has largely ignored it. Mosher pushed on with his dream, even though he had no corporate sponsor or start-up funds, and not even a promise from any public television station to air the show.

Eventually Mosher's dream became reality, and the first 13-part series was broadcast over public television in the fall of 1995. Since then, "The Visionaries" has produced a total of 65 half-hour shows that have aired over 180 public television stations across the United States.

# AN INTERVIEW WITH LARRY STRESHLEY

“... because Presbyterians are leaders in health care around the world, other organizations are willing to help fund us to expand the work. So when churches and individuals here give to Presbyterian medical work, their dollars are multiplied.”

**L**arry Streshley is the PC(USA)'s Regional Health Care Consultant for West and Central Africa. Since 1987, he has worked with the medical department of the Presbyterian Church of Kinshasa, part of the Church of Christ in the Congo (ECC), the umbrella organization of all Protestant Congo churches.

Larry's role includes developing programs for a network of health centers and building the capacity of local staff to respond to crisis like the refugees in Goma, the ethnic cleansing in Shaba, the polio epidemic in Kasai, and the Ebola epidemic in Kikwit. Much of his work involves analyzing existing health systems and modifying them to better respond to new economic or epidemiological situations. He and his wife, Inge, and their two children are based in Cameroon. Larry talked with us from New Orleans, LA where he is finishing his doctorate at Tulane.

**MBF:** Since June, when you returned to the States, what impressions of Congo remain in your mind?

**LS:** There's always "the crisis of the day" ... fuel shortages, people being arrested for changing money, sometimes anti American sentiment (missionaries have been turned back at the border). You always go there wondering what crisis it will be this time, and how well you'll be able to work around it. Of course, with the war and results of the war, Congo is in a crisis state, divided into four different regions and a different government in control of each region. But even with so many problems, Africans bring a great concern for their country. They are a serious, committed people. I know when I work with them that they will follow through on what we've worked on.

**What are the biggest problems facing Congo today?**

The impact of the war and what it's done. 1,700,000 have died as a result of the war: 200,000 directly from fighting, the others mainly because they haven't been able to get health care. In certain areas of Congo, infant mortality is up to 460 per thousand—the highest in the world . . . this means a child has no better than a 50/50 chance of survival.

**It sounds like chaos.**

It is, and there's no clear solution.

**What about AIDS in Congo?**

AIDS is a major problem throughout Africa, and will be until there is a vaccine available. But in Congo there is some hope, because people have been receiving education about AIDS

since the 80's. In the cities AIDS has been held to 8-9% of the population. Other countries have gone into the 2 digits. They're doing that in Congo through the whole health care system. Having this network with health centers educating people can do a lot for the spread of AIDS.

**What other health problems affect this region of Africa?**

Malaria is the largest killer in Africa. It's something we've been losing the battle on as it becomes more resistant to drugs. Some of the early programs for spraying mosquitoes were not successful. Now with treated mosquito nets we can reduce malaria by 60%. The mosquitoes are attracted to the net and then are killed, so even when all members of a family are not covered by a net, it attracts mosquitoes away from the others and eliminates them. If effectively done, it can reduce malaria in a whole community.

To get the project going in Africa we went to churches there and said, "How would you make this project work?" Several groups came forward from the churches, we funded them, and they've been collaborating, working together in communities. It's a very good way to involve the community in health care.

It's exciting to see that we can finally do something about preventing malaria.

**How can Presbyterian churches and individuals help?**

The fact that MBF has been contributing to salary support of doctors has made it possible for hospitals to stay open in the back areas of the country. It's hard to get people to fund what we already have going; they want to fund something that's new and exciting. But MBF has kept us going, consistently sending equipment and drugs. Another positive thing I've seen with MBF over the years is that they see health care in a holistic sense—supporting not just the hospitals, but the health centers and their emphasis on preventive health care.

Also, maybe people don't realize that because Presbyterians are leaders in health care around the world, other organizations are willing to help fund us to expand the work. So when churches and individuals here give to Presbyterian medical work, their dollars are multiplied. For example, a project to combat malnutrition in Africa started with \$30,000 from Presbyterians here. Now, with other organizations jumping in to fund it, that \$30,000 has become a \$100,000-a-year project serving 2 million people and supported by international agencies!



Larry Streshley consults with medical personnel in Congo.

## The Diseases of Poverty



### KNOW YOUR REGIONAL DIRECTORS

## MEET MICHAEL HAGGIN

### WESTERN REGIONAL DIRECTOR

**P**C(USA) congregations in western United States will soon enjoy meeting Michael Haggin, MBF's newest regional director. Although he is a native of the west (San Diego), Michael spent several years in the Northeast after receiving his M.Div. from Yale Divinity School. He pastored PC(USA) churches in New Haven, CT and Buffalo, NY, and then spent three years as a campaign director for The Bicentennial Fund. In that experience, Michael says, he discovered his calling: to help people discover the good works for which God has readied their hearts and find fulfillment in doing them. Michael cites Ephesians 2:10, "For we are God's workmanship, created in Christ Jesus to do good works, which God prepared in advance for us to do."

Nine years ago, a position in fund-raising for higher education brought Michael Haggin and his family back to the west. He and his wife, Connie, and their children, Stewart (10) and Patience (8), now live in Irvine, California.



In 1997, retreating Mobutu soldiers stole 7 vehicles from Good Shepherd Hospital in Congo. In 1998 MacPherson Presbyterian Church in Fayetteville, NC began raising funds to purchase an ambulance for Good Shepherd Hospital. Under the direction of their pastor, Dr. James Welch, Jr., the church raised \$35,100. Here, Mrs. Betty Jo Harper hands the final check for the vehicle to Dr. David Jenkins, MBF Regional Director, as Dr. Welch looks on.



### Note the MBF Regional Director For Your State

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The mission of Medical Benevolence Foundation (MBF) is to proclaim and demonstrate the gospel of Jesus Christ through a healing ministry. In partnership with the Presbyterian Church (USA), MBF provides mission education in congregations, solicits financial support, medical supplies, and equipment, and recruits brief-term volunteers for overseas service in health care.

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