

Because all people should have access to a healthy life.

Photo, Maasai mother and children, Tanzania

Global Health Ministries

Newsletter

Moms and Global Health



Mother and child, Manambaro, Madagascar

Moms have an outsized influence on their children - physically, spiritually, emotionally. In fact, research reveals the health of mothers is an indicator of global health as a whole. A healthy mother can take on educational responsibilities for her children and fully participate in the economic and social life of her family and her community. She is a vital partner in all aspects of health.

Mother's Day is an annual celebration, but maternal health is a focus all year round for Global Health Ministries (GHM). It's also a direct priority of the UN Sustainable Development Goals (SDGs): "By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births."

Tragically, the World Health Organization (WHO) reports that 300,000 mothers still die each year (one every

~ continued page 2

I am reminded of your sincere
faith, a faith that lived first
in your grandmother Lois
and your mother Eunice
and now, I am sure, lives in you ...
1 Timothy 1:5



Three generations, Curran Lutheran Hospital Maternity Ward, Liberia

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Community Health Worker Estha Benjamin, Nigeria





two minutes) from complications during pregnancy and child-birth. The vast majority of these women (99%) are in low- and middle-income countries, like all the countries where we partner together as GHM. Many of these deaths are preventable.

It's through partnership with local people, deeply connected and trusted by their communities, that we can make a difference. People like Estha Benjamin, a Community Health Worker in Nigeria, who shared that what gives her joy is knowing how she can make a difference in her own village. "Babies used to die often in my village. Today (after her work of health education) ZERO babies are dying in my village!" Or like Anna Lavaro, who works in a rural Maasai Clinic in Tanzania, and recently told me, "These are our relatives, they're our Maasai brothers and sisters. So, when we can point them toward wholeness, where their health is restored, that gives us joy."

In 2024, GHM hopes to increase the number of mothers being "pointed toward wholeness." Amazingly, a simple gift of a GHM Newborn Kit for a pregnant mother, shared by trusted people like Anna or Estha Benjamin, actually helps motivate women to approach a clinic early in their pregnancy to receive prenatal care and education, and to continue coming after their child is born to get vaccinations.

The GHM "2024 Newborn Kit Challenge" is to gather 10,000 newborn kits by December 31st. Can you help us meet this challenge? If you can pack the items together, wherever you are, you can help. As you assemble kits, whether at your home, church, or office, GHM is ready to partner with you to ship them to us and around the globe. Contact us for details at 763-586-9590 or NewbornKitChallenge@ghm.org.

Together, we can make powerful support possible for 10,000 mothers and their children in 2024!

Rev. Doug Cox, Executive Director

GHM Newborn Kits are comprised of basic supplies (new and gently used) to welcome a newborn baby into the world, supplies that many women don't have: a towel, washcloth, newborn t-shirt or onesie, diapers, receiving blanket, bar of soap, stocking hat. Visit our website (ghm.org/service-projects) to learn more and find patterns and links to help you source needed items.

A Great Gala!



In April, we celebrated the work of GHM at a great Gala - our biggest Gala ever. We welcomed 252 people (a jump up from 175 last year) and raised more than \$100,000 to help the hands that heal! Tribute tables acknowedged the legacy of special friends Len and Agnes Akland, Paul Buhr, Walter Gwenigale, Paul and Connie Larson, Baldy Lloyd, Jim Noss, Dorothy Plager, John Platt, Kathie Quanbeck, Curtis and Glennys Thormodsgaard, Clarice Wallan. Special thanks to our 11 sponsors (up from 2!), and all who participated. If you weren't able to join us but would still like to make a gift, visit us at ghm.org/donate.

Consulting Update

An important resource for our global partners, GHM Consulting is an integrated part of our portfolio, reflecting the holistic collaboration that marks our relationships. Partners in El Salvador, Cameroon, CAR, Liberia, Madagascar, Tanzania, are all actively engaged with GHM in capacity-building consultations. We're excited to welcome Dr. Magdeline Aagard into her new role leading this work!

Magdeline has been volunteering with GHM since 2006, served as a Board member from 2006 – 2014, and as Board President from 2012 – 2013. She has volunteered with GHM in Tanzania, India, Liberia, and South Sudan, applying her background in nursing and public health to help GHM partners improve access to health in a variety of settings. After obtaining her master's in business she went on to receive her doctorate in educational leadership. Dr. Aagard conducted her

dissertation research on the successful implementation of Western health-care programs in Tanzania in the Lutheran healthcare system.



Magdeline in Pare Diocese, TZ

As Magdeline begins her part-time role as GHM's Interim Director of Consulting, she will be recruiting consultants for a variety of projects. She will be looking for volunteers who have experience with medical records systems, supply chain and inventory management, hospital electricity and water, financial and governance systems, human resources, developing healthcare programs, and more!

The Wheels on the Bus



Victoria and Annie

Victoria and Annie are nurses at Phebe Hospital in central Liberia. Between them they have dedicated more than 16 years to serving Phebe's patients. Both say transportation is one of their biggest challenges. Each lives about 30 minutes from the hospital so a bus is their best option. Public bus fare is unafforadable and the schedule makes it hard to get to work on time. Money is tight

for everyone. Many patients arrive at Phebe unable to pay for services or the medicine they need, so these nurses and other staff often pitch in to cover those costs, despite their own financial struggles. "We use our own money most of the time, what else can we do? We rally around and care for them."

Phebe faces challenges on multiple fronts - daunting financial pressure, inconsistent access to water and power, security issues on their large, dark campus, a staff bus that needs replacing and more. As their partner, GHM "rallies around and cares for them" with support that takes multiple forms, starting with a new staff bus. A consultation to support leadership and address the financial deficit as well as an exciting electrical renovation project and the availability of charitable funds for patients who can't pay are all in the works to help encourage and equip Phebe for the future.

Thank You!



Excerpt from a recent letter from Dr. Minnie Sankawulo-Ricks, Phebe Medical Director/CEO:

"With a grateful heart I write ... extending warm thanks and heartfelt appreciation to you and the entire family at GHM for the remarkable gift of the new bus...Please accept our sincerest gratitude for your unwavering commitment to our mission. Your support empowers us to continue our vital work with renewed strength and determination. We are truly blessed to have you as a cherished partner in our journey to promote health and healing in our community and beyond."



GLOBAL HEALTH MINISTRIES

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Shipping News

Already this year, GHM has sent vital medical supplies to multiple partners. Here's what has recently left the building:



Madagascar: reaching 61 facilities and health programs



Tanzania: reaching 44 facilities and health programs



Zimbabwe: reaching 8 facilities & health programs

Next up? Cameroon, quickly followed by Tanzania!

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Healthy Moms

When students and staff at SEFAM, the Lutheran School of Nursing in Madagascar had the opportunity to attend a special workshop about diabetes earlier this year, one nursing student commented "I know how serious this is." The

student was told by a doctor of a patient who came to her clinic after giving birth by C-section, because the incision had become infected. It was determined that the woman was diabetic, making the wound slow to heal. The woman died of that infection. Those who tended her didn't know whether she was diabetic prior to her pregnancy - screening for diabetes is not common in Madagascar - or whether she developed gestational diabetes, reported to impact about 10% of pregnant women. Regardless, access to a trained healthworker during her pregnancy and earlier intervention may have made all the difference for that woman and her family. GHM helps our partners in multiple countries provide training and support for nurses, midwives and community health workers - the very people who can make that difference.