



# GLOBAL HEALTH

Newsletter of Global Health Ministries

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## Liberia update

There is finally hope in Liberia after years of civil war. The United Nations has established a presence in the country and is sending peacekeepers, giving hope for lasting stability. But there is a tremendous amount of work to do to restore normal conditions in the country, especially in the medical facilities supported by GHM.

Phebe Hospital was raided again in the latest fighting and everything that could be moved, including pipes, wires, machines and parts of generators was taken. Doors, windows and furniture were damaged. However, the buildings are still standing and staff members are waiting to return. They have been ministering to refugees at another location.

Unfortunately the situation at Curran Hospital is worse. Everything there has been destroyed.

## Jacobson is honored

Dr. Mark Jacobson, director of Selian Lutheran Hospital in Tanzania, has been given the Wittenberg Award for 2003 by the Luther Institute of Washington, D.C. The institute is an inter-Lutheran center furthering education and research on social issues. It encourages servant leadership to church and society by its awards.



Dr. Purtilo, left, and Rafael Malpica Padilla, new director of the ELCA Division for Global Mission, led discussions.

## Conference stresses hope in face of overwhelming tragedy

“There is hope” was the message proclaimed by the annual GHM conference on global health on Oct. 11 in Minneapolis. The grim statistics of the AIDS pandemic cited in the keynote address and later detailed in the new GHM video are overwhelming. When we hear of up to a third of the population in some countries being infected with HIV, with a person dying of AIDS every 10 seconds, of the millions of AIDS orphans the first reaction is, What can we do in the face of such tragedy?

But Dr. Ruth B. Purtilo, director of the Creighton University Center for Health Policy and Ethics, used the example of Jesus and the woman with a hemorrhage to suggest how Christians can respond to this overwhelming disaster. If we are to continue the healing ministry of Jesus in this situation, she said, we need to connect with those who suffer, as he did.

First, because we are a part of the body of Christ, our small efforts added to those of millions of other Christians can have great effect. We need, however, to focus our efforts where the opportunity

for us exists through our overseas partners in Lutheran health care. And we need to trust them, finally, as brothers and sisters in Christ, to use their strength and abilities to continue the chain of hope from our land to theirs.

This positive note was emphasized in the video “We Can Give Hope,” produced for GHM by Dr. Joe Norquist. Shown for the first time, this video features a chorus from Africa composed of people who are living with HIV infections but bring an upbeat message. The video is intended to motivate people to support GHM's AIDS Initiative and is available for showing on request.

Hope also showed up in reports from several countries where GHM is working. Continuing efforts to train health care workers, especially in Cameroon and Madagascar, is creating hope for the future of our work. Expansion of facilities has resulted in Lutheran programs being a major percentage of health care in Tanzania. New opportunities for ministry are developing in Papua New Guinea and Guyana.



Lutheran Youth Encounter provided music during worship. Shown are Andrea Herman, Justin Rimbo and Josh Brecht.

## Direct Lines from the Director Lift Every Voice and Sing!

I wish all of you could have attended our Annual Global Health Care Conference on October 11th. It was a wonderful reunion of the many friends of Global Health Ministries as always, but also a time of reflection on how we respond as Christians to the world-wide pandemic of HIV/AIDS. I was especially grateful for the compassionate and insightful guidance given us by Dr. Ruth Purtilo, our keynote speaker. In the face of such an overwhelming challenge, she encouraged us to follow the example of our Lord Jesus. We need not be paralyzed by a sense of our limitations, she said, since we are but one link in a chain forged by the Holy Spirit, uniting us with the hands that heal and those who suffer. When we are faithful in performing our part, we can trust the Spirit to enliven others to bring about hope and healing.

For some time now I have been joyfully aware that Global Health Ministries is blessed to be part of a world-wide network of faithful people who together continue the healing ministry of Jesus. In the enormous task of combating the spread of HIV/AIDS and caring for those affected, we can do our part in prayer, in contributing to the GHM HIV/AIDS Initiative, making hospice kits, packing and shipping medical supplies and equipment, in telling the story through our new "We Can Give Hope" video and inviting others to join us, and through all of this, ultimately supporting dedicated health care professionals in their service of those whom the Spirit inspires to lift their hands in hope.

Dr. Purtilo quoted theologian Martin Buber, who said "When a man is singing and cannot lift his voice, and another comes and sings with him who can lift his voice, then the first will be able to lift his voice too—that is the secret of the bond of spirit to spirit." Around the world there are millions of our brothers and sisters who struggle each day to lift their voices above the burdens of poverty, stigma, and suffering of body and spirit. In the Spirit of God, as we do our part, it is as if we lift our voices to inspire their faith and hope, singing in the words of the wonderful old hymn by Robert Lowry (1826-99): "My life flows on in endless song above the earth's lamentations; I catch the sweet thought far off hymn that hails a new creation. No storm can shake my inmost calm while to that Rock I'm clinging. Since Christ is Lord of heaven and earth, how can I keep from singing." We can give hope! Let us joyfully do our part, in Jesus name! Tim Iverson



Smith assists in the operating room

*Following are excerpts from a report by GHM scholarship recipient Sharon Smith, who spent time at Selian Hospital in Tanzania.*

Selian Lutheran Hospital provides care to people, mostly Maasai, from a wide surrounding area.

The OB service delivers about one baby per day, with a few c-sections per week. The pediatric ward typically has 10-15 patients. Common ailments are pneumonia, bronchitis, TB, meningitis, AIDS-related complex, and kwashiorkor. Patients tend to come to the hospital late in the course of disease and as a result one or two patients die each week in the ward.

The general surgeon is one of two surgeons in an area of one million people and cares deeply about his patients. A favorite memory of him is his driving a 12 year old patient and mother as close to her home as he could. When his pickup couldn't go any farther on the road, he

carried her the rest of the 100 feet to her house.

Much of the medicine is based on what the patient can afford. While prices are much lower here (\$1 per day in the hospital) people are also much poorer and even the cost of an ultrasound (\$6-10) can be prohibitive.

Although medical staff speak English, most patients speak only Swahili or Maasai. Nurses and others are usually available to interpret, but they are not trained, and I was frustrated by my inability to communicate with patients.

I had the opportunity to travel with the Flying Medical Service, a Catholic volunteer organization. Four of us flew about an hour in the six-seater plane to a tiny Maasai village, landed at the dirt airstrip, and ran a clinic in a stick-and-thatch hut. The co-pay for the visit and meds was \$1. After about three hours we closed up shop and flew to the next place. We worked in three villages and saw about 100 patients.



In Malawi the arrival of a container (in the background) of medical supplies was a great event. A new medical vehicle was dedicated as shown above.

So far in 2003 nine sea containers have been shipped. They went to Madagascar; Selian, Tanzania (2); Bangladesh; Iambi, Tanzania; Papua New Guinea; Haydom, Tanzania; and Cameroon (2).

## School project helps Global Ministries work

For a project I was doing for school, I went with my Grandma on her day to volunteer at Global Health Ministries. We began by working on midwife kits. My Grandma showed me how to make one.

I enjoyed talking with the other volunteers. One lady told me, "Partly we come to do these midwife kits and partly we come to talk." Most of them were senior citizens. Most women were nurses. Many had served overseas. It was impossible to guess the careers of the men. From an engineer on the Apollo project to a hydrogen and atomic bomb builder, their professional lives were incredibly varied.

After coffee, Scott said he needed my assistance to hoist two donated operating tables onto a pallet. We struggled to lift the 500-pound tables onto the pallet and with the help of another volunteer we finally managed. Scott asked me if I wanted to do the honors of driving the pallet lifter with the tables to the back of the warehouse. I was happy to oblige. I then proceeded to hit every box on the way. Scott assured me I was doing a fantastic job.

By the end of the day I had learned a lot. In direct contrast to the old folks home on The Simpsons, GHM is a place where each volunteer believes that they are making a difference in the world by showing their love through Jesus' healing ministry. A veteran volunteer told me that though she may gripe, she wouldn't trade her job there for the world.

Ian Vaagenes

## Projects for Funding

04-01 Bangladesh: Shipping  
 04-02 Bangladesh: Charity patient fund.  
 04-12 Bangladesh: LHCB clinic-Dumki  
 09-01 Cameroon: Shipping  
 09-02 Cameroon: Charity patient fund.  
 09-27 Cameroon: Training of 2 anesthetists  
 09-28 Cameroon: Technician of Lab Training  
 09-29 Cameroon: Tech - Radiology Training  
 09-32 Cameroon: Prevention of Maternal/Child HIV Transmission:  
 10-11 CAR: Aids Awareness Program  
 12-11 Chile: EPES Community Health  
 14-10 Colombia: Holistic Health/ poor/displaced  
 18-02 Ethiopia: Charity patient fund.  
 32-15 India: AIDS Awareness  
 32-20 India: Renovation at Parkijuli Hospital  
 32-21 India: Renovation of Karunalaya Hospital  
 46-01 Liberia: Shipping  
 46-02 Liberia: Charity patient fund.  
 46-11 Liberia: Phebe Hospital Recovery  
 46-12 Liberia: Curran Hospital Recovery  
 48-02 Madagascar: Charity patient fund.  
 48-01 Madagascar: Shipping  
 48-10 Madagascar: Nursing Scholarships  
 48-55 Madagascar: Air Compressors/Dental Clinics



Bishop Mwamasika (center), John Toso (second from left) and Wally McKenzie (second from right) with local residents.

Dr. John Toso has left his position as president of Global Health Ministries to become medical director of the Dodoma Christian Medical Center in Tanzania. This new institution will be governed by a local board representing various elements of the community and supported by GHM and others. It fulfills a dream of Bishop Peter Mwamasika to provide adequate medical care in the Dodoma diocese, one of the poorest and least served areas in Tanzania. For example, a pregnant woman in the area has a 1 in 5 chance of dying in the pregnancy. In some cases, a woman in need of a doctor would have to be carried up to 12 hours.

The first priority after obtaining government permits will be to survey the communities served by six dispensaries, in cooperation with community and church leaders. Construction of a facility for a 60 bed hospital is hoped to begin next year. This hospital will support local dispensaries and will provide dental care, orthopedics and facial surgery nowhere available in central Tanzania.

Joining in the the project will be Drs. Wally McKenzie and Lee Griffin.

Dr. Herman Miller of Austin, MN, made housecalls until he retired this year. But he didn't stop his interest in health care. He donated all the medical equipment he had accumulated during a half century to GHM. It will outfit the new Dodoma Christian Medical Center in Tanzania. "I hate to see anything get wasted. I realize what a struggle it was to buy that equipment. I wanted to give it to someone who can use it." Dr. John Toso says, "This equipment is some of the best made. It's hard to put a price on something like this."

## New project manager named

Dr. Carl Stecker, former missionary, has been named project manager for GHM work in French-speaking Africa. He replaces Dr. John Toso who is now the director of a new work in Tanzania.

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79-35 Tanzania: Selian/Arusha Expansion  
 79-36 Tanzania: OB/GYN Residency program  
 79-01 Tanzania: Shipping  
 79-02 Tanzania: Charity patient fund.  
 79-91 Tanzania: Dodoma  
 79-92 Tanzania: Haydom Hospital Shipping  
 79-34 Tanzania: Textbooks for Haydom School of Nursing  
 79-93 Tanzania: Iambi Hospital Shipping  
 79-94 Tanzania: Ilula Hospital Shipping  
 79-95 Tanzania: Bumbuli Hospital Shipping  
 79-96 Tanzania: Nkoranga Shipping  
 79-97 Tanzania: Lugala Shipping  
 88-01 Zimbabwe: Shipping  
 95-03 General: Med. equipment purchase/repair  
 95-04 General: Malaria bednets, all countries  
 95-05 General: Safe Water  
 95-07 General: HIV/AIDS Initiative  
 98-10 USA - Travel for Medical/Dental Students  
 98-11 Short-term Mission Volunteers  
 99-10 GHM Administrative costs.  
 99-20 Endowment Fund - details available.



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*What is Global Health Ministries? GHM provides a gift of life -- physical and spiritual -- through Lutheran health care work across the world by providing project financial support, locating and shipping urgently needed medical supplies, recruiting health care personnel, and funding the training of national health care givers.*

email: ghmoffice@cs.com • Internet: <http://www.ghm.org>  
763/586-9590 • 763/586-9591 (FAX)

## GLOBAL HEALTH MINISTRIES

7831 Hickory Street NE  
Minneapolis, MN 55432-2500

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An oxcart brought water for the construction. In this very dry season barrels of water were hauled in to make cement.

Construction is proceeding on a primary health care building in the Maranara region of Madagascar. The GHM board has approved completion of the dispensary, which was begun some time ago, at a cost of \$5,000. The king in this area had requested the Church to provide health care. The region is isolated and present facilities are not adequate: a one room shack with cracks in the floor. A short curtain gives a semblance of privacy. "Often



Women in Mananara, Madagascar, show their joy over the construction of a new dispensary in their community.

they have to clear out the rats and snakes before treating patients."

ELCA missionaries, Doug and Monica Cox are on the site now (actually in the neighboring town of Diego Suarez) to supervise construction of the dispensary as part of their outreach to the predominantly Muslim population..