



GLOBAL HEALTH

Newsletter of Global Health Ministries

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Madagascar cyclones continue

Violent cyclones have continued to strike Madagascar, causing great damage. At least 74 deaths have been reported, not including an unknown number lost when a ferry capsized. More than 200,000 acres of crops have been wiped out, and roads, bridges, and communication facilities have been destroyed, especially in the northeast. Many church and medical facilities were damaged or flooded. The U.S. government has contributed financial aid.

Safari to support hospital

Ground breaking for the new 70-bed hospital in Arusha, Tanzania, an expansion of the Selian Lutheran Hospital, is scheduled for this May. Aaron Youngdahl, a twin city businessman, decided to organize a unique benefit for this project. Participants will experience the beauty of East Africa through a safari to Serengeti National Park and a climb of Mount Kilimanjaro, while raising funds for Global Health Ministries. For information, contact Aaron at 612/384-9000 or ayoungdahl@northlandscurities.com.

Book review

Mercy in the Bush, by J.B. Friberg
This book is about the life and times of a missionary doctor who worked in Tanzania 1942-51.

In 200 pages Dr. Friberg shares his experiences at Kiomboi Hospital with its huge outpatient clinic load. He writes movingly of the many times God led them during their service there. After returning to the U.S. he practiced in Minneapolis, retiring in 2000 at the age of 84. The title summarizes a delightful saga of God's servants.

You will rejoice to see mercy in action. The book is available at Christian bookstores such as Northwestern and Alleluia Shop (7913 Southtown Center, Bloomington 55431, 952/888-5336). It will be available later at Amazon.com and Barnes & Noble. Cost is under \$10.

Marilyn Gustafson

Tanzania begins major HIV/AIDS project

A major project in the effort to control HIV/AIDS has been approved by the GHM board. Entitled "Every church a caring church," the project aims to enlist all of the 600 congregations of Arusha (Tanzania) Diocese in combating the disease. This will be done by providing training for diocesan and local pastors and evangelists in an educational, counseling and service delivery program through congregations. This will include care for vulnerable children, helping distribute medicine as it becomes available and providing personal care to persons affected. The congregations of the church provide a ready made network to

demonstrate the healing love of Christ. Total cost of the project will be \$73,452 over a three year period.

A second project will attempt to bring the hospice program developed at Selian Hospital, supported by GHM, to all Christian hospitals in Tanzania.

The project is supported by the Lutheran World Federation, the ELCA and the Mennonite church. GHM has approved granting \$11,000 for this year with additional funds probably needed next year. Dr. Kristopher Hartwig has been called to direct the program. He has been a missionary in Tanzania and helped develop the hospice program at Selian Hospital.

In other actions the board voted to continue existing projects at Selian Hospital, Tanzania, a community health program in Chile, support for rural clinics and dental work in Madagascar and well digging in Nigeria.

GHM annual conference

The annual twin city global health conference will be held on Saturday, October 9, at Incarnation Lutheran Church in North Oaks (St. Paul), MN. Keynote speaker will be Father Anthony Gittins, professor and author at the Catholic Theological Union, Chicago. Mark your calendars!



Paulina Natema, (right), director of Selian hospice, visiting with family members.



Direct Lines

from the
Director

Scott Lien, our Operations Manager, and I recently returned from a trip to Cameroon and the Central African Republic. We are grateful for the opportunity this trip afforded us to meet personally with our partners in these countries, to see the opportunities and challenges before them in the healing ministry, and to strengthen our working relationships and plans for the future. Each trip deepens the bonds of unity we have with our brothers and sisters in Christ overseas, and further confirms the importance of our mission together.

At the same time, our visits enabled us to evaluate our mutual practices and test assumptions. We need always to ground and pursue our mission with an understanding of the contextual realities our partners face. There is much to celebrate in what we learned, ways in which we can improve, and there are also some threats and challenges that need our creative attention and prayers.

The Central African Republic is a desperately poor and undeveloped country, with public services for water, electricity, road maintenance, telephone, law enforcement and health nearly non-existent. Remarkably, the Lutheran Church is visible in nearly every village one passes, offering a haven of order, hope and compassionate service in an otherwise harsh land. GHM has been funding an HIV/AIDS awareness program that operates out of shipping containers made into office and storage space in the church compound in Bouar. The program, directed by a nurse, with two employed assistants and a large number of trained volunteers, has done a good job of reaching the population with preventive education, testing and counseling, support groups for people living with AIDS, and services for those homebound in advanced stages of the disease. This year they are developing a proposal to pro-

vide treatment to prevent HIV/AIDS transmission from infected mothers to their newborns.

We visited an old mission station at Gallo, an ideal site, according to President Andre Zoule, for a primary health center. There is nothing in the way of health services in the area. We discussed a 3-5 year time frame for the project, involving recruitment and training of needed personnel, facility renovations, and shipping of supplies and equipment. This can be an excellent project with which to engage the Eastern and Western North Dakota, ECLA companion synod programs in collaboration with GHM and DGM.

Thanks to the wonderful help of ELCA missionaries Jim and Karen Noss, who drove us all over Cameroon, housed and fed us, and served as interpreters, we were able to visit the three hospitals in Garoua Boulai, Ngaoubela and Ngaoundere, as well as the health center in Meiganga where a development project is planned. It was great to have Scott on this trip to do a thorough assessment of supply/equipment inventory systems and needs in each facility, and to discuss ways in which to improve services and utilization in this area.

I was pleased with what I learned about the progress and accomplishments of GHM-funded projects in Cameroon. Scholarships for training nurse anesthetists, lab and radiological technicians are making a contribution to the health care system. The newly funded program to prevent maternal/child transmission of HIV is off to a good start. The system-wide health management information project GHM has funded is also showing good results, and promises to

provide critical data for evaluation and management. At Ngaoundere Hospital, we toured a newly refurbished emergency room, surgical suite and laboratory, renovation projects about which GHM supporters can be proud.

We also learned that basic improvements are needed in how our partners inventory their needs and distribute the supplies and equipment we send them. Sometimes the simplest things are the most important to get right, and our face-to-face visits helped a lot to identify and solve these problems. At the same time, we found the Lutheran health system in Cameroon to be under financial stress, and there are no simple solutions.

Health care in the U.S. is going through similar strains, without easy answers. It is clear, however, that the finest physicians and services of a hospital must be matched with excellence in management and governance, and GHM will need to develop programs and services in this area.

In the end, we learned that there is no shortage of desperate human need for GHM to address, no lack of encouraging examples of success in "helping the hands that heal," and an abundance of challenges yet before us in advancing the healing ministry of Jesus, to the glory of God. With an exciting future of mission ahead, "We go into the world with faith, trusting all to receive us. We go into the world with hope, with God's will before us and great dreams in our hearts. We go into the world with love for all people, serving with those in whom Christ lives, and laboring for those for whom Christ died."

Rev. Tim Iverson



Ngaoundere chief medical officer Dr. Laoussou Pierre checking GHM supplies.

Ilula partnership: A model GHM/companion synod initiative

The Ilula partnership is a new model for collaboration that Global Health Ministries is working to see replicated across the nation. In it, diverse people of faith and medical expertise have been brought together through the ELCA Companion Synod Program to focus on one comprehensive health care development mission project. Upgrading the Ilula Medical Centre in the Iringa Region of Tanzania is being done through a partnership that includes the St. Paul Area Synod (SPAS) of the ELCA, Global Health Ministries, church and government units in Tanzania, and the Tanzania Well Project-St. Paul Partners.

The first Christian health work in what is now the Iringa Diocese began in 1938 when a Swedish nurse arrived at Ilula and set up a tent to serve as a health post. Chongoma, the local chief, however, refused to let his people use the health services. Later the chief's donkey developed a large abscess on a leg. He brought it to the nurse, commenting to his people, "If she claims to have powers to treat my people, let her treat my donkey first."

With hesitation and fear, the nurse treated the donkey. After a few days the donkey recovered, and Chief Chongoma convened a public meeting to order his people to go to the nurse's tent for all their health problems. People flocked to the tent. Most were cured, and many more came. That witness led many to Christianity.

The tent was replaced by a small mud hut that became the first health post in the area. A small dispensary eventually replaced the hut, which became a health

center in 1992. Ilula now serves about 15,000 outpatients, has 1,600 admissions, runs 8,700 laboratory tests, and delivers 700 babies annually. It is the major medical ministry of the Iringa Diocese, which began several years ago to upgrade it to hospital status. Improvement was moving slowly because of the limited resources that were available.

Officially begun in 1987 as a synod to synod program with a primary focus on educating pastors, the synod's relationship with the Iringa Diocese has evolved into a grassroots movement in which congregations in the Saint Paul Area Synod are matched with congregations in the Iringa Diocese. Before visiting their companion congregations two years ago, medical professionals on the visitation team contacted GHM for a briefing about Ilula and Tanzanian health care issues by Dr. Steve Friberg, an ELCA missionary doctor and GHM partner.

During their visit, team members Drs. Randy Hurley and Gary Moody and nurse Linda Held were impressed by the Ilula staff and their care for patients, and became motivated to help in the development process. After returning home,



Drs. Hurley and Moody and task force members review plans.

they formed an Ilula Health Center task force which set about assisting in that development. It has grown in members and expertise, and helped to raise the \$5,000 needed to fund the first GHM project for Ilula to finish and equip a laboratory building. GHM's Tanzania Project Manager, Gene Anderson, and Board member, Dr. David Johnson, participate in the task force's monthly meetings. This year, the first of regular shipments of supplies and equipment will be sent to Ilula, and the hospital development initiative became a formally approved project of GHM.

The task force's current major project is development and implementation of a long-range plan for the Centre. That plan includes the addition of medical services to reach hospital status and become designated by the government as the district hospital. The first construction priority is a new surgical building. With fund-raising now underway, construction is expected to begin this summer. The Tanzania Well Project-St. Paul Partners are also reviewing plans for the Ilula well drilling project to provide a dependable and safe supply of water.

Global Health Ministries has been a partner in this project from the beginning, and is presently involved in similar collaborations with 12 companion relationships programs of ELCA synods and other Lutheran units. With our experienced medical missionaries in leadership, our global network of relationships with Lutheran health care providers, our expertise in medical supplies and equipment procurement and shipment, and 16,000 supporters nationwide with a passion for global health mission, GHM has much to offer these initiatives to "help the hands that heal."



The laboratory building, recently completed, at the Ilula Health Centre



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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.

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Madagascar dentists meet; Quanbecks leave



Dental personnel of the Malagasy Lutheran church attended a 3-day training meeting on equipment repair, infection control and accounting, led by Dr. Wallace and Kathy McKenzie.



Dr. Stan and Kathy Quanbeck, seated at far left, received a rousing sendoff when they recently retired from their ministry in Madagascar. They ministered there for more than 35 years.