

Lutherans in Medical Missions 2009 Needs and Resources Forum

Reaching Communities for Christ with Health and Education

March 20-21, 2009

Forum Notes

Friday, March 20, 2009 Bible Study

Rev. Larry Rockemann, Chaplain, Lutheran Life Communities – Lutheran home and Services of Arlington, IL opened the Forum with a study titled “Where is Jesus?”

“Have we seen him lately? Scripture passages in the Gospels of Matthew, Mark, Luke and John show where Jesus was—out and about wherever people are in need—any need—where Satan is tempting and traumatizing people, wherever people are broken to bits by their sin and locked in darkness of their shameful guilt, wherever people are outcast and are untouchable; wherever sorrow and sadness are the order of the day. There is Jesus!”

- Mark 1:21-26
- John 4:3-26
- Mark 1:40-42
- Luke 5:18-25
- Luke 7:11-15
- Luke 8:41-42, 49-56
- John 2:1-11

Participants at each table shared where they had recently seen Jesus.

‘What God has Joined Together, Let No One Separate’: The Marriage of the Gospel and the Care of the Body in the Life of the Church

Rev. Leopoldo Sanchez, PhD, Assistant Professor of Systematic Theology, Director, Center of Hispanic Studies, Concordia Seminary, St. Louis, MO

How Luther dwelt with the question of the needy –

- The culture often has romantic view of the poor (they are closer to God)
- Like the poor, the sick are the needy
- Instructive focus: Medieval attitudes towards the poor—helping them helps the giver gain God’s favor
- Inadequate ways of seeing the marriage of the Gospel and the care of the body—the Gospel gets lost
- Luther’s way of thinking about the marriage

The trend of doing “Mission Trips” was clear when over half of Dr. Sanchez’s class stated they had been on one or more such events. Mission trips are short-term, international, deal with mercy and often have a medical component.

The students expressed their reasons for going as, “bringing them closer to God, and reacting out of thankfulness for plenty-- the American excess.

Are they talking like people in Luther’s Days: romanticism of the poor, idealizing the needy? Where is the Gospel?

So why care? We care because the needy and sick are our neighbors. It is unconditional love--we act without expecting something from God or to enhance “me”.

What does it mean to be human? God has a concern for the whole person.

How do we read the Gospels? Christ is a gift and is our example--The Incarnation and the Cross.

Yahweh's heart dwells with the needy.

LIMM celebrates evangelistic and medical mercy working together to touch the whole person.

Rev. Rodney Rynearson led the group in closing prayer

Saturday, March 21, 2009 Bible Study

Where's Jesus in the World Today? We see the face of Jesus in the countless faces "waiting at the door" with needs of body, mind and spirit. Through our mission we show the face of Jesus to the larger church and the world, bringing healing and hope in the Risen Christ.

Introductions

Bobbie introduced LIMM Board members and new participants attending the LIMM Forum.

'What God has joined Together, Let No One Separate': My Practical Experience

John Lautenschlager, M.D., Former LCMS-World Mission Career Medical Missionary

The early church fathers had to deal with the continuation of the work of Jesus as they continued their work of building the church. Aspects of Jesus' work included healing the sick, and teaching and proclaiming the word of God. The early church realized they had to split up those activities. Deacons were chosen to deal with the specific issues of the sick and hungry.

Their first assignment was in Nigeria after a bloody civil war and was work rehabilitating medical centers – this was the need. The next assignment was to establish medical mission work within a LCMS World Mission team that included a Bible translator, a church planter, and a literacy and development worker. At times, the duties overlapped.

The people the Lautenschlagers served had a world view where they felt that God didn't care and that there were many spiritual powers they could manipulate in order to get through life with some balance.

John told a story of how the Nigerian people created shrines outside of their huts. The women had to perform sacrifices to these shrines in order to cure fever from malaria. A neighbor lady broke her shrine when she realized that God would heal her and her family with the help of medication gotten at the clinic.

One of the leaders of the church was an older woman who had been hit by the mission ambulance driver. Because of his help and kindness to her, she became a Christian and became a real leader in the church.

In another area in Nigeria, John worked with Pastor Johnson, a Nigerian missionary serving in another language area. Rev. Johnson had learned to speak the language. He would go around at 5 a.m. and would do catechism classes in the congregations and John taught health classes.

When serving in Sierra Leone, there was a measles epidemic. It killed 1/3 of the children aged 1 to 5. Those that survived were very malnourished. The medical team aided in immunizations programs in cooperation with the Government, some of whom were Muslims. When the civil war broke out, many of the church people became refugees and spread the word of Christ where they had fled—in Ivory Coast, Liberia, and other areas of Sierra Leone. Betty Roon commented that she had witnessed the affects of first LCMS missionaries when she served in the refugee

camps in Sierra Leone. God's Word and deeds in His name had spread to the people in the camps in their need, and then later back to the villages when refugees returned home and established Lutheran congregations.

Community Health Education: A Strategy for Evangelism

Michelle Hoeppner, Concordia Welfare and Education Foundation, Hong Kong, China

Michelle wears two different hats: Facilitator for human care, LCMS WM Asia Management Team and Executive Director for CWF (Concordia Welfare Education Foundation). CWF works in places where LCMS can't establish traditional church bodies such as China, Indonesia, Cambodia and Vietnam.

LIMM has sponsored the CWF program in Cambodia with a \$10,000 gift.

Michelle led two group activities: a Cambodian facts and figures game and a role play showing teaching methods that does not create dependency. Michelle differentiated from the long term, development programs of CWF and the immediate needs met during disasters like the China earthquake. CWF's utilizes programs of the church and provides spiritual & medical assistance.

CWF's goal is to establish a ministry whose purpose is to bring together Jesus, the Great Commission and the Great Commandment. This is accomplished by training community members, as CHE's (Community Health Educators) who regularly visit 10 to 15 neighboring households sharing the gospel and promoting principles of disease prevention and healthy living. There needs to be a 3-5 years involvement before the project can run on its own. There is an ongoing effort with other groups to share resources to meet the great needs in Cambodia.

Hans Behrens – Viet Nam and Cambodia

In Aug and Sept 2008 he travelled to Viet Nam and Cambodia to teach medical terminology in English to medical students and nurses.

He learned the following lessons:

- He overestimated their language abilities. Learning medical terminology was difficult for them.
- One month was not long enough. He would recommend 3 months.
- Administrators were very cooperative as they wanted their personnel to learn English.
- Students were very interested in medical lectures. They were not accustomed to our way of teaching.
- They had no experience in how to organize and write medical presentations.

Impressions of Cambodia

- Suffering greatly from effects of the destruction of the Khmer Rouge Regime of the mid 1970's.
- At Life University the administrators are very eager to get help with any kind of medical education especially in Nursing and basic sciences.
- Inexpensive place to live and work.

Betty Roon - Cambodia

Betty has been working in missions part-time for 20 years. She will be returning to work with the CHE program in Cambodia.

The concept of CHE has been around for decades. Other organizations are implementing the CHE program using other names.

Lay workers are trained with triage skills and basic health knowledge. They teach hygiene, prevention and other holistic programs. They also teach lessons on agriculture and mental health.

Step 1 – Go into area and look for contacts. There needs to be interest. Then select village

Step 2- Involve the leaders. Talk to local medical people. We are not a threat.

Step 3 – Start involving communities. They ask the leaders if they can have community meetings. Pick 3 to 4 people to come to meetings and be on the committee.

Step 4 – The committee selects the CHE's. Betty's group facilitates this process. They determine issues that need to be addressed. CHE's are trained for specific needs for that area.

Step 5 – Determine projects to have a visible impact.

Step 6 – pick key CHE. Facilitate this as a village program not as a LCMS program.

This is very challenging. This is the first LCMS CHE program in Southeast Asia. Betty will assess and do surveys for follow-up. They will not see results for years. Need to build trust and relationships with the CHEs. The women need to be accepted in their communities. They are doing documentation. You can also have men as CHEs.

CHE Program, Cambodia

Betty Roon, R.N., Dr. Hans Behrens, M.D., Michelle Hoeppner, John Lautenschlager, M.D.

- China TB Program – Program was there but needed advocates
- Need education to teach doctors and nurses. Huge void/gap.
- There is a need for Newborn care/nutrition. Betty would like to see emphasis there.
- Work with Church workers/congregations to witness the Gospel.
- Follow up by pastor who does home visits. Those relationships are created and have an open door to share the gospel. CHEs are trained to do this. In Cambodia, they are starting with a church based program.
- Evangelism through teaching. Ted Englebrecht could teach catholic priests how to give sermons.

LIMM presented funds to aid CWEF Program in Cambodia

- Bobbie presented LCMS WM Staff Michele Hoeppner with \$2000 (remaining funds) for the CWEF Community Health Program in Cambodia.
- Bobbie presented Betty Roon, CHE Volunteer with the airfare and itinerary for her return trip to Cambodia and additional funds for other expenses.

Mercy Medical Team

Jacob Fiene – LCMS WR & HC

Jacob is the Manager of Medical Resources and organizes and leads medical mercy teams. LCMS WR & HC only has short-term mission teams. There were a total of 9 teams since 2006, 8 to 14 volunteers per team.

LCMS WR & HC Core Values:

- Capacity - developing and strengthening internal resources to meet human care needs in proximity to Word and Sacrament.
- Integrity – Affirming honor and accountability in our relationships with partners and donors.
- Fidelity. Demonstrating faithfulness to the Holy Scripture, the Lutheran Confession and the mission of the LCMS
- Mercy – Demonstrating the unconditional compassion and love of God.

WR&HC enhances international projects in the context of our mission and core values.

Mercy Medical Teams work in Rescue Centers and medical facilities, give orphan support, aid vocational and agricultural projects, and facilitate medical shipping.

When possible, an ordained LCMS pastor accompanies the Mercy Medical Team to give spiritual care to team members and those served. Eight to ten teams are planned for 2009 and 2010. LIMM is a valuable partner in recruitment communication.

Update on Malaria Initiative

Rachel Steele, Lutheran World Relief Project Coordinator for Lutheran Malaria Initiative (LMI)

LMI – in 2007 UNF approached LWR to coordinate a malaria initiative. They brought together the two church bodies, LCMS & ELCA.

In March 2008 the committee submitted draft plan and budget, and in February, 2009 they were awarded a 2.4 million grant.

Domestically they are creating a case statement, hiring staff, creating pilot programs like Nothing but Nets, creating vacation bible school materials, and facilitating major gifts.

Internationally they are working on the following:

- West Africa Roll Back Malaria
- Global Fund Forum
- ACT Development Alliance
- Roll back Malaria Advocacy Group
- Interfaith Action on Global Poverty
- USAID/President's Malaria Initiative, Uganda, Tanzania

Jack & Cathy Carlos – Guinea West Africa

The Carlos's will be career missionaries for LCMS World Mission in Guinea, West Africa. They will be promoting Community Health Evangelism. The Forum participants joined hands in prayer to send off Cathy and Jack.

Short-Term Medical Mission Opportunities

Bruce Wall, LCMS World Mission Director, Short-term Ministry

LCMS WM connects LCMS members with missionary trips. Examples are High school groups doing sport camps, professionals like Dr. Hans Behrens teaching medical English, and an accountant implementing accounting systems. It is unsure how short-term teams will interact with the medical van program in Kryganstan after the American teams leaves.

In the next five years, LCMS-WM plan to have 20 volunteer facilitators assigned as long-term missionaries internationally.

Congregation Connect is a new 5-year commitment/relationship for congregations to make individually with mission fields.

LCMS WM Focus is on the Mission of God, developing partnerships, and assuming a learning role as they serve in God's Kingdom.

Supporting Medical Missions

Scott Lein, Global Health Ministries

Scott has served with GHM for 11 years as director of operations. GHM has four full-time employees, two part-time and a 16,000 square foot building for storage.

LIMM and GHM have partnered on projects with GHM providing the volunteers and LIMM providing transportation costs to get donated equipment to the GHM warehouse.

GHM does the following:

- Funding approved health care projects, scholarships, support
- Gathering and shipping useful donated health care equipment and supplies
- Communicating to groups and congregations the opportunities and needs of the churches overseas health care programs
- Praying for the churches health care missionaries
- Advising mission boards, synods and other groups on health care mission issues

Scott presented a thorough review of the Lutheran Health Services of the Evangelical Lutheran Church in PNG which highlighted the work of Julie and Steve Lutz..

Recognition banquet hosted by Lutheran World Relief

John Speckhard welcomed the group and led them in prayer.

Bobbie read an email of Zack Sommermeyer's report on the health education program being conducted in the country of Georgia facilitated with LIMM funds.

LIMM recognized Velma Rynearson as a career medical missionary. Velma went to the mission field in India in 1961 and served 9 years. Later she finished her doctorate in nursing and went back to India and served another 6 years. She served four years on the LCMS staff as the medical missions coordinator. She has served in many capacities and through all stages of her life. We thank Velma for her service to her Lord.

Bryan Belcher was recognized as a faithful donor who gives regular monthly gifts to LIMM.

LIMM Banquet Address

Speaker Michelle Hoepfner, Director, Concordia Welfare and Education Foundation, Hong Kong, China

She expressed that it is exciting to see how God is moving people in Asia. In the Yunnan Province, the old belief systems have been swept away. Communist ideology is something that people don't hold onto any longer. Chinese Christians are amazing and active in leading the Christian life. In Hunan, in the year 2000, there were only 80 pastors and thousands of churchgoers. With good partners spreading the news of God, people were baptized and church leaders are trained.

Achievements of CWF:

- Implemented over 40 different projects. 10 service learning groups. Affected over 8000 people.
- School Resource projects. Teach health and Hygiene. 80% of people aren't washing hands before they eat. 70% do not brush their teeth.
- Drinking water projects.
- Well projects.

Michelle is the Human Care Coordinator for LCMS-WM and in that capacity facilitated services for earthquake relief in China after the devastating earthquake that killed tens of thousands.

The Closing

Rev. Alan Abel, MD closed the Forum with prayer for Whitney Heins who will be a LCMS WM GEO Service Coordinator for the CWF.

The 2009 LMM Forum participants joined their hearts in voices as they sang the Doxology together to end the program.