



A ministry of InterVarsity  
Christian Fellowship



# Greetings from Grace

JUNE 2009

## HEALTHCARE REFORM

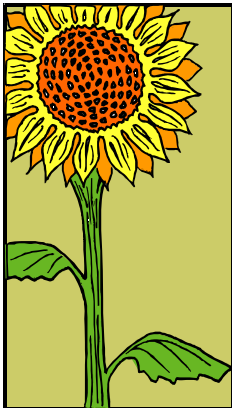
President Obama is on a campaign to “reform healthcare”. If you’re into statistics, somewhere around 50 million Americans lack health insurance; close to 15% of our GDP is in healthcare; and yet we rank number 37 in the world for healthcare behind countries such as Costa Rica, Chili, Morocco, and Colombia. President Obama says that the current healthcare system is unsustainable. As someone who is approaching another decade birthday, this has increasing significance. God has blessed me with relatively good health; but that is likely to change. However, as someone who for the past 25 years has been dedicated to healthcare among the poor and underserved, this is **old** news.

At the end of May, Irma Johnson, the Parent Child Program Director at Cary Christian Center, joined me at the Christian Community Health Fellowship (CCHF) conference in Nashville. Last year a Memphis television station reported on the high infant mortality rate in Memphis, headquarters for CCHF. Steve Noblett, the new CCHF executive direc-

tor, recounted the data to me. Coming from his church planting, ministerial background, he said something like “the Church needs to do something about this.” I agreed and suggested he get in his car; head a couple of hours down Highway 61, the Blues Highway; and visit Cary Christian Center where Irma and her team of lay home visitors have reduced infant mortality by over 50%. I sent him the link to the CBS report broadcasted last year, hoping it would encourage him. He came back to me with a request to present this at the CCHF conference. At the end of our workshop, “Successful Models for Lowering Infant Mortality and Increasing Health in Under-Resourced Communities”, one of the participants said that our presentation was the best part of the conference. Kudos goes to Irma and the team at Cary and the glory to our Lord Jesus Christ.

When I returned from Uganda to work in Mississippi, Hillary Clinton was taking on healthcare reform. Listening to the proposals at that time and planning for the domestic missions of the Luke Society, there were two areas that I knew would probably not get addressed by

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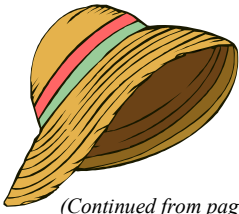
## PRAISE AND PRAYER

### *Praise — Thank God for:*

- A fun time with the Woltjer family on Spring break. Mom and I were delayed on the return flight due to an emergency landing in Cincinnati. Thankfully the pilot was able to land the plane with a faulty hydraulic system without incident.
- The 400 people, including 100+ students, who attended the Christian Community Health Fellowship (CCHF), The Church and the Ministry of Healing, in Nashville. The students represent the future of healthcare professionals committed to living out the Gospel through healthcare to the poor.
- The four nursing students and one faculty member involved in NCF who committed to following Jesus this past academic year.

### *Prayer — Ask God to:*

- Lead and direct Connie Jarlsberg, Renee Lick and myself as we plan the first NCF Global Project to Uganda for nursing students to take place in July 2010. We are hoping to have 10 students explore missions opportunities in nursing on that project.
- Guide and direct Pat Emery and the NCF staff through these financially difficult times as we set priorities and seek to grow the numbers of nurses and nursing students that we serve.
- God would lead the team working on Best Practices in Health Related Missions to develop guidelines and resources that would assist missionaries and missions organizations to provide healthcare that demonstrates His love for under resourced populations around the world.



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any healthcare reform program. The first was a focus on health promotion – living healthier lifestyles, nutrition, exercise, rest, and healthy monogamous families. At that time less than 0.1% of healthcare dollars were spent in the area of health promotion. The second was providing for the spiritual care of people. I knew the government would never get involved in this area. Yet I also knew that a personal relationship with God through the work of Jesus Christ and with the Power of the indwelling Holy Spirit was necessary to make the behavior changes necessary for a healthy life. The Parent Child Program at Cary not only taught mothers how to care for their babies; but also taught them about Jesus. The home visitors are the hands and feet of Jesus in the Delta of Mississippi. We began helping others to promote health and the gospel of Jesus around the country.

A fair number of e-mail messages recently have been from the team of folk who are seeking to reform healthcare missions by working on best practices for Christian short term healthcare missions, <http://csthmbestpractices.org/index.html>. Papers are being written and critiqued on topics such as donations of medicines, permission to practice legally in another country, medical records, informed consent for treatment and surgery, the use of interpreters, the place of culture, and sustainability. In the past, missions just sought “to do some good” for people who lacked healthcare. The one starfish thrown back into the sea analogy is quoted often. “We may not be able to do something for everyone; but at least one person may have been helped by our being there.” But sometimes the result was less than honoring to God. Surgeries have gone bad in the less than optimal environments; medicine has not been

taken as prescribed for a variety of reasons; and appendix have burst waiting for the American doctors who were coming soon when it should have been treated promptly. This group is trying to elevate the standards of short term healthcare missions by referring those engaged in such programs to information and resources that will lead to God honoring missions trips.

Missions are changing. There are more Christians in the global south than in the global north. Improved communications allows us to know almost instantly what is happening around the world. Many countries have good programs to educate their healthcare professionals. In fact many of them are coming to the US to practice here. The mission field is coming to America. As Connie Jarlsberg and I plan for NCF missions, we feel we need to take these facts into consideration. The Urbana 09 Missions Convention will be presenting seminars to explore how healthcare fits into missions. Connie and Renee Lick, NCF Director of Student Ministry, will be leading a Global Project for nursing students to Uganda in 2010 that will explore the many facets of healthcare missions. In addition, we are looking at how we can reach the nurses coming from other countries to study and practice in the US.

At our NCF staff meeting in March we wrote a new mission statement for NCF -- *Engaging students and nurses with the Good News of Jesus Christ to bring God's love and healing to nursing and healthcare*. We are indeed blessed to be present with others in life's vulnerable moments, to be used of God to bring His caring and compassion to others, to reform healthcare. Thanks for your partnership in this ministry.

## SUMMER SCHEDULE

July 16-18, 2009

Global Bioethics conference  
The Center for Bioethics and Human Dignity  
Trinity International University  
Deerfield, IL

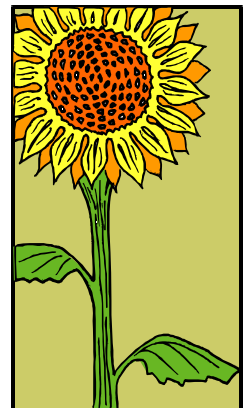
August 6-7, 2009

Leadership Summit  
Willowcreek Community Church  
Barrington, IL

September 17-19, 2009

West Coast Healthcare Missions Conference  
Fuller Seminary  
Pasadena, CA

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