

HEALING AND TEACHING

MAY 2019

Christ-centered healthcare teams proclaiming God's love to all the world through healing and teaching.

Healing and Teaching are our instruments or tools for proclaiming God's love.

Through the skill of orthopedic surgeons in Ecuador; and the investment in training the next generation of healthcare practitioners and leaders in the Democratic Republic of Congo, these tools are being used to make God's love a tangible and long-term reality for those we serve. Our Ecuador team now in its twenty-second year of service specializes in hip and knee replacements for people who cannot access such help due to a paucity of funds and skilled surgeons, and this is in keeping with our core value of Going to Underserved Areas.

In the Democratic Republic of Congo, we are Empowering Local Leaders by investing in their development through higher education. Doctors, nurses, hospital administrators, and pastors are in training for future leadership roles among their people. We provide funds and trainers at teaching hospitals, a continuation of relationships that have existed for more than four decades.

Healing through the technical skill of surgeons, and Teaching provided by medical educators are the mechanisms by which we implement our mission. The Holy Spirit applies these to His purposes in ways we do not understand, but we see lives changed. Sometimes the transformation transcends obvious

physical improvement of bodily health or the acquisition of new clinical or leadership skills.

It is a tremendous privilege to be stewards over God's people through healthcare and medical education. Our sacred calling to care for people on behalf of God makes us undershepherds who aspire to follow the teaching and example of Jesus.

At Easter we celebrated the profound mystery of Christ's suffering and triumph to deliver on God's promise of salvation to all people. Now we who know Him personally actually share His very life, and will share with Him the glories to come in His eternal kingdom: Amazing love given by the infinite grace of God. We willingly accept the responsibility of looking after God's people. We don't feel we have to, but we find God's love compels us. We work because we are concerned that others come to understand God's love

for everyone. We are not spiritual neo-colonists; we simply want to show by our actions that God is truly good.

To show His trust, Jesus invited Peter to the role of a shepherd¹ as if to say "Peter if you love Me care for people on My behalf" EMAS Canada volunteers care for God's people through **Healing and Teaching for Tomorrow and for Eternity.**

Join us by giving to the **Project Development Fund** so that we can send a team to explore a new teaching opportunity in Masvingo, Zimbabwe.

1. John 21: 15-17 (NIV)

Dr. Peter Agwa
Executive Director



OPERATION ESPERANZA

By Janet Greidanus

“Again this year we have been so blessed on our Mission to Cuenca, Ecuador,” said orthopaedic surgeon, Thomas Greidanus. “We were able to do a record 48 hip and knee replacements. Our patients were so grateful for the help they received, and we, in turn, were moved by their gratitude.”

Likewise, recovery room nurse, Anna Sokolowski, expressed, “The gratitude that the people of Ecuador have leaves me speechless and warms my heart. I think everyone goes into healthcare wanting to help people and every year that I go on this mission it renews every single reason why I went into nursing.” In a similar vein, dentist, Dan Van Berkel reflected, “I see the tears of the team members after a hard week of doing great service and the difficulty of parting. I’m inspired by the impact the trip has on the team members, what it brings to their lives back home.”

Greidanus, Sokolowski, and Van Berkel are describing an aspect of what happens when participating on a mission such as Operation Esperanza which last month marked its 22nd annual trip to Cuenca, Ecuador. Not only are the lives of those who receive care changed, but the lives of the caregivers are also changed. In addition to the 48 hip and knee replacement surgeries, the team provided 71 intra-articular injections to relieve pain for adults who were not surgical candidates, 18 paediatric surgeries for children with club feet and dislocated hips, and dental care to 280 individuals, including adult candidates for surgery, poor children in rural schools, and those living at a local shelter which at this time is housing a large number of Venezuelan refugees.



Photo: Maria surrounded by nurses.

Every patient touched our hearts,” said Sharon Litchfield, charge nurse of post-operative care, “but a few stand out. We all fell in love with little toothless Maria who smiled non-stop. She looked 91 but was really 61. When asked what she was going to do now with her new hip she said, ‘take care of my family’. Cornelia, who had bilateral hip replacements, brought both her daughter and the physiotherapists to tears when she walked the next morning. Melida, whose sister had been lifting her in and out of her wheelchair daily, had not walked for three years. We witnessed her taking her first steps after surgery.”

And there was Jose, a man called in from the standby list who took a harrowing three hour drive over an Andean mountain pass instead of a usual six hour route on better highways so as not to miss out on the opportunity to have a knee replacement on the last day of surgery. On average, most of the adult orthopaedic patients were discharged within 24 hours, needing

only plain Tylenol and Advil. “When we ask our patients if there’s pain,” reported Litchfield, “the answer is always poco or poquito (a little bit) and always with the biggest smile.”

“I get the greatest satisfaction in seeing how the dental health of the children has improved over the years,” said Van Berkel, “their previous dental procedures holding well, including many dental sealants - the most cost effective prevention available. A favourite story of mine is from a couple of years ago when I did extensive dental work on a 7 year old boy. The following year he needed minimal work but his friend required a lot. The boy stood by his friend comforting and encouraging him and explaining in Spanish that we were there to help him, that he would feel much better afterwards. With his persistent close proximity, I donned him with small gloves that were still too big for his hands, had my dental assistant pass him the appropriate dental instruments that he could in turn pass to me, allowing him to be in the centre of our action. My hope is that this could inspire an occupation choice in the future. Anything is possible.”

Physiotherapy assistant, Marnie Kranenburg, who joined the team for the first time this year, sums it up well. “Their (the patients’) lives were bettered, but so were ours for having worked as a tight knit team and for having experienced the strength of these brave people who trusted strangers to do their best for them.

Returning to the bitter cold of Edmonton, though work and travel weary, the experience has encouraged us to go back and serve where we can to make a difference in the lives of those we work with and for.”

TEACHING FOR TOMORROW

Our China East Teaching team have taken the EMAS Canada mandate to **heal and teach in a Christ-like manner** seriously. In addition to serving at their usual sites, this year the team went to smaller county hospitals to share ideas on psychiatric illnesses.

Besides large group presentations, they engaged in small group discussions. This interactive approach was an unusual as a learning practice for local doctors and nurses. (Photo right)

In helping them to know what, and how to learn, the team wanted to promote individual participation that might deepen relationships.

In 1968, aware of the need for health-care missionaries overseas, EMAS Canada began subsidizing health-care students to spend time at mission hospitals to complete their electives. Nancy Wood was our first healthcare student participant.

After Nancy participated in two short-term visits Nancy and Philip began to serve full time in various roles until 2012. Now, in the Democratic Republic of Congo, Nancy and Philip Wood have made a long-term commitment to return for three months a year to encourage and teach local health-



care professionals, and to follow up on scholarships. Living in a place where temperature checks accompany travel, and vaccination against Ebola is a necessity, they serve as teachers and mentors for medical students.

Nancy teaches a class on Gerontology which has been a success with interested mature nurses, four of whom Nancy taught before, and there was one young bright woman who is just four years out of high school. Philip has been teaching Histology and radiology both to Lab students at the college and to medical students at Shalom University.

Photos: Philip and Nancy Wood teaching in DRC.

To set up **monthly donations** or to make a **one-time donation**, please contact:
office@emascanada.org

EMAS Canada is planning to send new teams to Cambodia, India, Myanmar and Zimbabwe.

To support these new initiatives and help further our vision to serve those in need in a Christ-like manner, please donate to the **PROJECT DEVELOPMENT FUND**.

You can donate online today at www.emascanada.org/donate



NEWS FROM THE OFFICE

DONORS PLEASE NOTE

Because our volunteer team leaders are our fundraisers, they may receive contact information for donors to their team. We do not disclose private financial information. If you would like to opt out of this practice and would prefer we do not share your information, please check the box on your donation card or contact Sandy at the office.

OFFICE RENOVATIONS ARE DONE

Our new landlord has been working hard to provide a new and improved work environment in the office.

We are thankful for God's blessings in providing a space where we can serve Him with excellence. (Photo below)



Did you know you can donate your AirMiles to EMAS? Transfer them to AirMiles # 8900 512 1314.

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UPCOMING MISSIONS

CHINA WEST

June 16 - 30, 2019

ZIMBABWE (Masvingo)

June 29 - July 6, 2019

INDONESIA

June 18 - 28, 2019

MYANMAR

Oct 16 - 31, 2019

For more information go to:

<http://www.emascanada.org/join-us/upcoming/>

GIVE THE GIFT OF SERVICE

If you would like to volunteer to serve locally or abroad with EMAS Canada there are several opportunities available.

To volunteer, please contact Peter Agwa: peter@emascanada.org

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<https://www.emascanada.org/ed/>



Find out more at giveconfidently.ca

OUR FISCAL YEAR END HAS CHANGED

Please note, our fiscal year end is now Dec 31st. Because of this deadline to complete all financial transactions in a timely manner in order to begin our annual audit, please ensure your year-end donations arrive in our office prior to Dec 15th if you require a tax receipt for the current year. Submissions for travel expenses should be received no later than Nov 15th to ensure donation is realized in current year.

YOU ARE MAKING A DIFFERENCE!

Your donations and prayers make all the difference. Many receive the healthcare they need because of you.

THANK YOU!

To donate Online go to: <http://www.emascanada.org/donate/>



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