



Free Methodist Healthcare Fellowship

Whole Person Care Newsletter www.fmhealth.org JANUARY 2015

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Free Methodist Healthcare Fellowship (FMHF) to share recent talks with those who could not attend our conference.

Dr. Willard Swartley, a nationally known author was the speaker at our annual conference/retreat in Sept 2014. He has published [Health, Healing and the Church's Mission: Biblical Perspectives and Moral Priorities](#), which was a featured book by InterVarsity Press in 2012. Part of the Free Methodist Healthcare Fellowship's new mission is to be a resource to the whole church and to help our churches become healing communities. His talks were very appropriate and encouraged our vision to assist our churches to become healing communities. He has provided us extensive notes, and we will share one subject in each issue of this newsletter. This will be a good review for those who attended and something new for those who could not attend. (Download at <http://www.fmhealth.org/dr-willard-swartley-notes>, or at Archives–Newsletters on <http://www.fmhealth.org>)

Save the Date for our Fall Retreat!

September 18-20, 2015

Free Methodist Chaplains are invited to present and participate.

September 18-20 are the dates set for next year's retreat, which will be held again at the Essenhaus in Middlebury, Indiana. Our theme will be "The Chaplain as a Member of the Healthcare Team." Our denomination has ordained pastors working as chaplains at many hospitals, nursing homes and hospices. Rev. John Vlainic from Toronto, with extensive experience as a local church pastor, teacher of theology, and for the last 15 years as a Chaplain in a major teaching hospital, has already agreed to come as one speaker. We are also planning for others to be part of the program.

Please mark your calendar and plan to join us!

To respond to any article in this newsletter contact: normwetterau@aol.com.

Our fellowship is expanding our mailing list. Please forward this newsletter to others, or print it out and give it to others including your pastor. Send Jennifer Becker (jsdbecker@gmail.com) the name and e-mail address of anyone who wants to receive this newsletter or any in the future.

FMHF NEWS FROM BOARD PRESIDENT NORMAN WETTERAU MD

Enlarged Vision for our Fellowship



During the past few years Free Methodist Healthcare Fellowship has been making some changes. We were a group of physicians and dentists who had an annual meeting for fellowship and mutual support. Now we want to become a fellowship of all Free Methodists who are involved in healthcare. Health is a major issue in our lives, in our society, and in the Bible. Our churches have been, or should be, addressing this. In addition to our previous goals, we want to help our churches to be communities of healing. This may be by supporting those in medical professions, but our vision for health and healing is much broader than this and we want to help our churches catch that vision.

Specifics:

1. Enlarge our membership by bringing in more doctors and nurses but also other health professionals
2. Enlarge our membership to include Free Methodists all over the U.S. and in Canada. To do this we will try to have regional events, be at General Conference, and develop a better newsletter. We also can enlarge our coverage by use of Facebook and other media methods.
3. We will develop a newsletter that will go out by e-mail 2 to 4 times a year. There will be a variety of articles covering what our organization is doing, health topics including physical and mental health, public health topics, and biblical passages on health and medical missions. Tim Kratzer and I will be editors, while Jennifer Becker has agreed to pull the magazine together and shepherd the e-mail list. To control expenditures, we will send the newsletter by e-mail whenever possible.
4. Once we have a larger mailing list, we will try to have a half day or evening regional meetings with a local speaker and a board member in attendance. The Pacific Northwest, Southern California, and Rochester are possible sites. If we can develop a group of local people committed to our group, then we will consider holding our annual weekend retreat there.

Expanded Newsletter

As part of our effort to help our churches become healing communities, we are in the process of expanding our newsletter and have renamed it. We are looking for e-mail addresses of interested people. Any healthcare professional, including chaplains, nurses and techs can receive it, as well as non-healthcare professionals such as pastors or interested laypeople.

Please share this newsletter and send the name and e-mail addresses of people who might be interested. Although they do not have to be health professionals, it would be helpful if they would identify themselves as to their profession: doctor, nurse, pastor, hospital administrator, interested person.

We also welcome submissions. Please contact normwetterau@aol.com with your contribution or with questions.

Extended Goals: to have regional meetings and to move our retreat around the country.

Our fellowship is national, but most of our active members are in the upper Midwest. Yet we have many doctors, dentists, nurses and others all over, and many missionaries from the Northwest. On November 1, members from Rochester, NY gathered for a Saturday morning breakfast. Jennifer Becker, a board member with a Master of Public Health, organized the event. Two physicians, who are also ordained Free Methodist Pastors, attended. One is head of an OB residency and the other does Adolescent Medicine at a community health center. Two physicians who do addiction medicine were there, the former chairperson of Roberts Wesleyan Nursing program and two physicians who have done extensive work overseas: one an obstetrician and one a family physician. A dental hygienist who is also a pastor joined in too. As you might gather, we had a lot to share. We plan to meet again and may do something in conjunction with the Roberts Wesleyan pre-med group and nursing school.

We are working on a regional meeting in the Northwest and possible other ones. We need someone to help organize them and the help of pastors to identify people who might attend. Once we have a core group in another part of the country, we can rotate our retreat from region to region. In a survey, most of our Midwest members who attended last year's retreat indicated they would be willing to travel east or to the Northwest for a retreat if there were a group of healthcare professionals in those areas who would help plan it and attend. Our group is reaching out to include nurses, hospital chaplains and many others, and as our mission includes being a resource to our churches, these retreats could become very exciting.

Parish Nursing Joins with Free Methodist Healthcare Fellowship

Parish nursing used to be a Free Methodist organization with a mailing list of 400. The main function of the group was to provide parish nursing education (initial and advanced) in the Wesleyan holiness tradition. That mission sustained the group financially for some time, however in the past 7 years registration at the educational events dwindled and the organization was no longer viable as an entity. Active parish nurses continue to serve in Free Methodist churches, including health promotion and visiting those who are homebound. Others had more informal roles in promoting health in their churches. The leadership decided to continue the fellowship, but disband as an official organization.

Since the Free Methodist Healthcare Fellowship had expanded its membership to nurses and its goals to include some of the same goals as Parish Nursing, the officers decided to invite their members to be part of our fellowship. FMHF already has one nurse as a board member, Linda Stryker. Helene Kahlisdorf and Susanne Mohnkern have already been attending our board meetings and we plan to ask them to be official voting members. This newsletter is being mailed to all 400 nurses on their mailing list. Nurses will be given the opportunity to join the healthcare fellowship group or receive the newsletter as an e-mail without being a member. Finally, by bringing in more nurses, it will help us to reach out to Free Methodist Colleges who have nursing, pre-med, and other healthcare programs.

Those who were on the Parish Nursing mailing list who wish to receive our newsletter should send their e-mail address to Jennifer Becker: jsdbecker@gmail.com No further hard copies will be mailed except to dues paying members without e-mail access.

Falling through the Cracks by Susanne Mohnkern PhD RN CNE

Wanda has lived all of her adult life in the same town and the same house, attended the same church and made many friends. Now she is old – she has had heart attacks and a hip replacement. Life becomes more and more difficult – managing household chores, all of her medication and various health problems. Overwhelmed and confused one Friday evening, Wanda talks of hearing voices and singing in the night and doesn't believe she's in her own home when she is sitting in her own living room. Friends are very upset. They know Wanda needs help right away, but aren't quite sure how to help.

Happily, there is a parish nurse at Wanda's church. A parish nurse is able to step in and make a late-night home visit, work with Wanda's doctor's office and interact with the visiting nurses who take Wanda's case. Wanda improves with regular nursing care and within a few weeks the visiting nurse has to discharge her because her needs have decreased. The visiting nurse is still uncomfortable with Wanda's ability to set up her medications (29 doses a week) and is able to call the parish nurse and communicate this concern. Wanda will "fall through the cracks" of our health system if parish nursing doesn't step in again and visit her.



Seven months later, Wanda is still in her home with her dog and cat. Volunteers from the church and family members help out regularly taking Wanda to doctor's appointments and different social occasions. The parish nurse is still visiting to check on Wanda's meds and to listen to the problems of old age – aching joints, confusion and fatigue. When Wanda loses an important check she has saved to pay her taxes, she becomes so distressed she doesn't sleep at night. Recognizing this as spiritual distress, the parish nurse is able to gently remind Wanda that God knows where the check is and we should rest in His promises. Wanda has a good night's sleep that night and calls "her nurse" the next day rejoicing over having found the check.

There is no cure for what Wanda is going through, but there is care to be given, care that will enable Wanda to live at home a little longer and have a quality of life.

Nursing at Hope Africa is Alive and Well

By Darlene E. McCown PhD, Nurse Practitioner and Educator

The Nursing program at Hope Africa is eight years old. It began with 11 students (2 females and 9 males). The current nursing program now boasts over 350 students and offers both a baccalaureate and masters level curriculum. In addition, the university offers a nurse midwife program of study. Dr. Darlene McCown served for the first 5 years as the Director of Nursing. Currently the program is under the excellent leadership of Eric Manirakiza one of the first graduates of the nursing program. Like the developing country of Burundi, nursing at HAU also has undergone many changes. It began as a traditional four year baccalaureate program but government mandate required changes to a three year 12 month program. In December 2014 HAU will have graduation for the last of the four year nursing students and the first class of the

Unlike the U.S., the majority of the students are male and all of the nursing faculty are male. Visiting nursing faculty from the U.S. assist with teaching on a regular basis. The Nursing Program achieved Government approval in 2014 following a rigorous review. Students engage in both classroom and clinical nursing experiences. They have clinical rotations at local hospitals as well as the university Van Norman Clinic and Hope Hospital at Kibuye. While off site for the Kibuye rotation they live in HAU dormitories built specifically for nursing and medical students for their clinical rotation experience. The urgently needed newest dormitory is nearing completion at the Kibuye site and will house 90 students.

The Masters in Nursing program started with 9 students and 7 completed which included writing a Thesis in English. All of those graduates are employed in leadership positions in the country and they also teach courses in the undergraduate nursing program. The second cohort of Masters students are currently in process and on their way to graduation in the near future.



Hope Africa nursing department has a Nursing Skills Laboratory providing students with “hands on” practical experience with medical equipment such as blood pressure, stethoscopes, microscopes, resuscitation Annie and babies. A special Nursing and Medical library and reading room have been established for the students in the nursing and medical programs.

Despite the impressive development of the Nursing Program at HAU, there is more to be done. More faculty are needed and more updated resources, equipment and books. Scholarships are needed for graduate and undergraduate students. God has blessed this work and I give thanks for the opportunity to serve Hope Africa University.



Ebola

By Norman Wetterau MD

The world is afraid and upset over Ebola as we should be, but this epidemic is only the tip of the iceberg of what is actually happening in Africa with healthcare. Ebola spread can be halted with adequate equipment. Many lives can be saved if there are adequate IVs and lab services to monitor electrolytes in people with severe vomiting and diarrhea. Instead there is rapid spread and high death rates. Over five thousand people have already died but thousands maybe even a hundred thousand people may die

The World Health Organization reports that approximately 500,000 children in Africa die of Malaria every year, plus 100,000 adults. Some of these people have no access to medical care. I letter from Dr. Sammy in Congo revealed a lack of medications to treat malaria in our hospital and clinics due to lack of money. Many Free Methodists in the Congo cannot afford a clinic visit and so their children die at home of a disease that is fairly easily treated. Money to support unpaid clinic visits hardly exists.

Right now most of our churches do not send any support for medical care through our hospitals. Many Free Methodists are not even aware our hospitals exist yet for many overseas members, they are the only source of medical care.

Lets be very concerned about Ebola but let us also be concerned about our overseas medical facilities. This might be a chance to share what is happening and ask our American members to help save our children from severe disease and death, whether it be malaria, pneumonia, diarrhea or Ebola. Our fellowship will work with CAHO on publicizing these needs.

Hope Africa Medical Update

We asked Joel and Janet Miller to share a prayer letter for our annual conference. We wanted to share that with everyone. At the 2013 conference we prayed for discernment of God's plan for the Millers in their last year of ministry in Burundi. Since then they have decided to move to Kibuye for a year where Joel will care for patients and continue to teach medical students. Dr. Randy Bond is still in Bujumbura.

Dear FM Healthcare Fellowship Friends:

As you gather in Jesus's name and in the spirit of his healing ministry, we greet you from Bujumbura and the Van Norman Clinic (VNC). I sit in my office listening to the clinic coming to life- babies are crying in the outdoor waiting area; taxis, motos, and tuk-tuks are arriving with patients, students and staff are beginning to check on patients from last night. In just over two years of operation, the VNC has gone from a beautiful but empty building to a well-used building with many patients served daily. This is a testimony to the hard work of our Burundian faculty and staff as well as to the dedicated prayer and financial support that many of you have provided.

The majority of our patients are children under 5 or pregnant women. These two groups receive care subsidized by the Burundian government. We have received some of this reimbursement but it is not surprisingly only a portion of the true cost to us. There are only a handful of Internal Medicine and Surgery patients in a normal week. We have a dedicated chaplain from the local FM church who leads morning devotions and engages daily with patients. Patients come from both Christian and Muslim backgrounds and we pray that they see Christ's unconditional love here.

The four services of the clinic are led by Burundian specialists. General medical officers including 4 of our HAU medical graduates see many outpatients and take call at night. The majority of our nursing staff are also HAU grads. All of our faculty are teaching health science courses at HAU in addition to their clinical responsibilities. There are usually medical, nursing, and midwifery students from HAU present in our morning report and rounding.

This year we have welcomed a new American Pediatrician, Dr. Randy Bond. He has been named Dean of Medicine replacing Dr. Innocente who requested release from her administrative duties. I have assisted Randy in administrative and student counseling tasks. I am participating in the pediatric staffing with him and am glad to be refreshed on pediatric hospital medicine. I try to minimize my classroom teaching but did teach a part of the Christian Philosophy of Medicine course in July. I am also helping with a revamped Introduction to Clinical Medicine course in the next few weeks.

Dr. Noel is our new Medical Director. There are still many efficiency issues and budget constraints and I sometimes advocate for the clinic or for Dr. Noel with the Rector or Vice-Rector. I also feel called to be a mentor to Dr. Noel and the other young faculty members. They regularly stop by my office and I have a chance to counsel, encourage, and pray with them.

We are looking for ways to invest in the spiritual life of the students. There is an active Christian Medical Student Fellowship (CMSF) chapter at HAU. When all of the CMSF students join together, there are over 150 present. We appreciate that this is a student-led ministry and only want to add our encouragement and experience for their benefit. Students are interested in missions and in using their gifts to build the Kingdom. I am also considering with Bishop Deo how I might help him and the church in their efforts to educate and participate in health and wholeness.

Our family is settled into Burundi life. We are now over one year since we last visited the U.S. with another year to go before we return. Janette is investing in women in the community and helping coordinate an ambitious feeding program for hospitalized patients in Bujumbura. It is exciting to see some of our medical students passionate about taking care of these poor patients. Her other role this year is teacher for our Hannah who is being home-schooled. The other three kids have returned to the Belgian School for their third year. They now correct our French regularly!



Prayers Needed:

- Discernment of God's plan for us in this last year of ministry in Burundi
- Opportunities to invest spiritually in the students and faculty
- Protection and healthy friendships for the kids at school
- Humility as we serve with HAU, FMWM, and the Burundi FMC

Thank you for your interest in Burundi.

Updates are on our blog at www.missionalmillers.org.

You can e-mail us at doctorsj@gmail.com.

Write It Down

By Lionel J. Hurd, M.D.

February 20, 2008 - Revised March 30, 2014



The Enthroned continued, “Look! I’m making everything new. Write it all down—each word dependable and accurate.”

Revelation 21:5 (The Message)

Recently I attended the memorial service for a 78 year old missionary colleague who served in South Africa. Her seven year debilitating illness finally ended with a sixteen day “no food or water” hospice marathon. Married for 57 years, her frail husband faithfully sat at her bedside waiting for her death, often stating, “She’s seventy eight but it is too early.”

Her favorite hymns were played and sung. Scriptures underlined in her own Bible were read. Eight different people presented memorials. Her life was summarized by the individual viewpoints of husband, children, grandchildren, siblings, and friends. E-mail messages from colleagues around the world focused on her service to everyone she met. Her work on earth was completed.

Then the minister stood to present the homily. My eyes moistened as he began to read my favorite passage from the Revelation of St. John the Apostle, written during his exile on the island of Patmos. The words were so familiar. No more tears. No more death. Everything becoming new. As a physician, these wonderful thoughts always energize my spirit. No more need to minister during the painful dying process. The many broken bodies in my career cured forever and made perfectly new for eternity. Truly those words become a physician’s ultimate dream.

Amid my thoughts of eventual unemployment came the new thought of writing down the truth. How had I missed that important command given to the apostle John? Because of his faithfulness in writing down his spiritual vision, his words have continued to provide comfort in grieving situations for almost two thousand years. But was that command also meant for me? Should I have been faithfully writing down the many spiritual experiences I

have had in my life? Would my written words have the same power to affect future Christians?

As I thought about the effort necessary to accurately describe in words very personal experiences, my thoughts shifted to newer communication techniques. A recent report indicated that young people were no longer regularly using libraries. To encourage increased use, the libraries are now providing, not a greater variety of books, but a larger collection of video games. Are words becoming outmoded? Should I now be consistently videotaping my experiences so that future generations can see me stumble or hesitate as I search for the right words to express the truths that God has taught me? Using that technique, could they better experience my emotions as they watch my tears or my smile as I recount my personal interactions with God?

Another reason for the command to “write it all down” may exist, however. As a lay speaker, I often prepare devotionals for mid-week Bible studies or Sunday School classes as well as sermons for church services. I allot a great deal of time for reading and thoughtful research as I prepare my message. Over the weeks of speech construction, I continue to tweak sentences and words as I attempt to present spirit-directed truths in the best way possible. During these preparation times I have often said to my pastor and close friends, “If no one in the congregation gets a thing out of this message, I have.”

Perhaps John wrote it all down so that he could experience God’s revelation again and again. I can see him weeks later, in that isolated cave on Patmos, reliving the miraculous vision of the new earth. In the ruggedness of his surroundings, he knew for certain that his horrible living situation was just the necessary prelude to a new heaven and new earth that would have no death or no tears.

From the sadness of a memorial service, God once again spoke to me. For my own future benefit, I will continue to write it down so that I can again be strengthened in the days ahead.