

health in developing countries

– a call we can all respond to?

Katie Dexter considers how we can answer the call

In Angola, 180 out of every 1,000 children die before the age of five - nearly 20%; in Britain, four out of every 1,000 children die before the age of five - barely 0.5%. In Zambia, life expectancy is 40 years; in Australia, life expectancy is 81 years - double.

In Uganda, 77,000 people die of HIV annually; in Canada, 500 people die of HIV annually in a similar sized population.

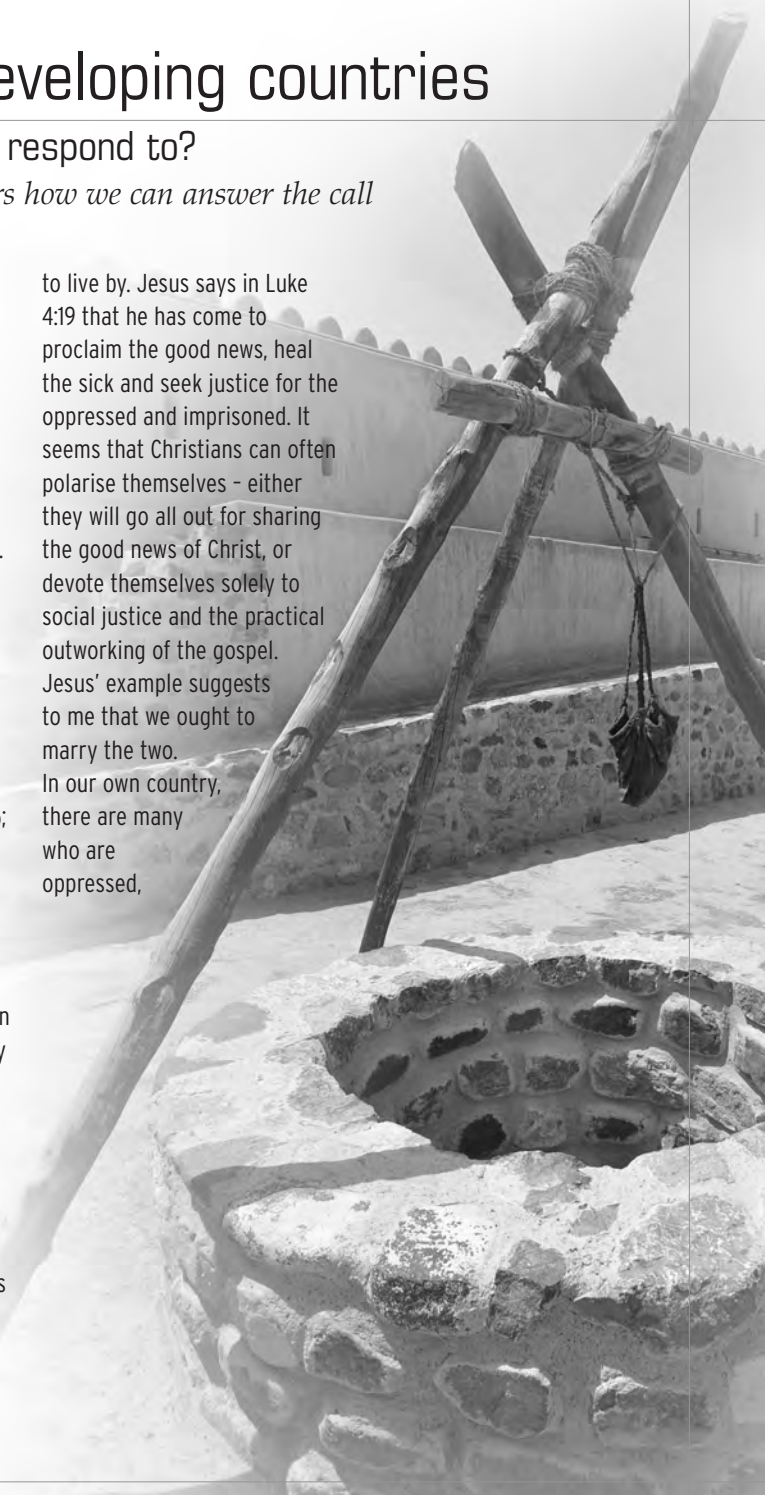
In Afghanistan, total clean drinking water coverage is 22%; in Norway, it is 100%.

Should Christians take a real interest in the health of people living in developing countries? International health can be seen as something which should only really concern those who feel 'called' to work abroad. What does the Bible say - should we be bothered?

the 'call'

In Matthew 6:33, Jesus instructs us to seek first the kingdom of God, and his righteousness. By coming to earth, Jesus showed us what the kingdom of heaven will be like, giving us a pattern

to live by. Jesus says in Luke 4:19 that he has come to proclaim the good news, heal the sick and seek justice for the oppressed and imprisoned. It seems that Christians can often polarise themselves - either they will go all out for sharing the good news of Christ, or devote themselves solely to social justice and the practical outworking of the gospel. Jesus' example suggests to me that we ought to marry the two. In our own country, there are many who are oppressed,



many who need healing, and many who have not yet heard the good news.

Wherever we live, we are still part of a global family. The statistics on how we in the UK act towards our global family don't reflect well. For example, it is estimated that it would cost roughly \$13 billion to provide everyone in developing countries with basic health and nutrition. The world's annual spend on pet food is currently \$77 billion.¹

We know that we are called to take the good news of Christ throughout the world. We are called to love one another as we are loved by Christ. Luke 12:48 says that from those who have been given much, much will be expected. Medical students from the UK have been given much. How then can we respond as Christian medics to the challenges in health around the world and the teachings of Jesus?

our response...

Historically, Christian medics have responded to Jesus' words and instructions throughout the gospels to care for the poor and spread the good news by setting up mission hospitals in parts of the developing world.

It is thought that the first mission hospital was set up in 1518 in Mozambique, and in the 1850s, mission hospitals spread into sub-Saharan Africa and elsewhere. John 10:10 illustrates the purpose of mission hospitals - to bring life in all its fullness to everyone, physically, psychologically, *and* spiritually.

A simple response to this call is to go

A simple response to this call is to go. This could be long or short term, and involve anything from going on an elective to a developing country to working for years in a hospital or research institute. When considering longer term mission, an important thing to consider is whether your trip will contribute to sustainable development in international health. It can take a long time to learn a language and begin to understand a different culture and way of life, even in a Christian country!

Traditionally, medical mission was seen as dedicating your whole life to living and working in a mission hospital. However,

dependence upon the skill of foreign workers is not necessarily a sustainable way to provide healthcare in developing countries. There is a real need to contribute to the training of local staff, allowing hospitals to develop in a sustainable manner. It is a great witness to share the privilege of knowledge and ensure that the basics, such as childhood illness management or ante-natal care are done for the glory of God.

Research also has an important role to play in international health. One example of this is Dr Paul Brand's work on leprosy. Born to missionary parents in India, Dr Brand returned after training to Vellore in India, where he researched leprosy, discovering that many leprosy related problems were due to pain insensitivity. He spent his career pioneering techniques of tendon transfer and ulcer management, which transformed the lives of many with leprosy, and are also used today in the management of diabetes mellitus.²

Although these ideas all sound very practical, we can remember that being a Christian pervades all parts of our lives, and through our work and example, we may win

opportunities to share Christ and fellowship with others around the world.

So for those who are currently in the UK, how can we impact international health for Christ?

Firstly, we can inform ourselves about our global family. Talk to people who have worked in developing countries, pay attention to national news, and the updates of charities like WaterAid and Tearfund. Books are a great way to learn - both the stories of Christian missionaries (see the CMF student reading list)³ and of those working for humanitarian agencies - try *An Imperfect Offering*, by James Orbinski⁴ - can help us to begin to understand how others have to live.

Another way in which to inform ourselves, apart from going to see for yourself, perhaps on elective, is to consider studying international health at some level - some universities offer intercalated degrees in international health, or for those thinking bigger, Master's or other degrees in public health or tropical diseases. Many focus on health system development, governance, and learning how to plan strategically to improve health; all valuable skills which both challenge and broaden our attitudes to healthcare and its provision.

There are plenty of places to find out more about how we might respond to the challenges of international health as Christians - a good place to start is www.cmf.org.uk/internationalministries

Tearfund⁶ also often produce prayer leaflets focused around the world which might guide your prayer life.

Although not all of us can do this as students, providing financial support to those involved in improving health in developing countries is another way to respond; particularly when as doctors, we may earn enough to support others in their work, either charities or individual colleagues and friends.

Thankfully, we live in a country where we are privileged to each have an opportunity to speak our minds, and this is a tool we can use to speak for those who cannot speak, as we are instructed to (see Proverbs 31:8-9). We can lobby governments and others in power in all sorts of ways, including regarding climate change, which is a major health threat for developing countries. We can vote with our feet by buying fairtrade goods,

supporting charities and people on the ground who are spreading the good news of Jesus and fullness of life for all. We can also put on events at university, both as CMF groups and through organisations like Medsin,⁵ such as debates or talks which raise the profile of the health of others around the world.

And above all - pray! This is always the most valuable thing we can do as Christians. Even if we do not feel called to 'go', hopefully this article has touched upon some of the ways that to care about international health is a call we all can respond to.

Katie Dexter is an intercalating medical student in Leeds

REFERENCES

1. www.petfoodindustry.com/ViewNews.aspx?id=27134
2. en.wikipedia.org/wiki/Paul_Wilson_Brand
3. www.cmf.org.uk/students/booklist.asp
4. Orbinski, J. *An Imperfect Offering*. New York, Doubleday 2008
5. www.medsin.org
6. www.tearfund.org