

Speak up for those who cannot speak for themselves, for the rights of all who are destitute. Speak up and judge fairly; defend the rights of the poor and needy. (Proverbs 31:8-9)

he coronavirus pandemic (COVID-19) has stretched health systems, locked down societies and claimed lives across the globe. While COVID-19 research and prevention strategies have been widely publicised within high-income nations, the limited financial, governmental stability, and healthcare resources faced by low and middle-income countries (LMICs) put them at disproportionate risk of suffering and death.

We interviewed three UK-CMF partners working overseas to explore their experiences of the COVID-19 pandemic.

NATHAN LAWRENCE

Mandritsara, Madagascar



I think God has been at work in people, helping them to trust him and remember that 'to live is Christ and to die is gain' work as a medical doctor at the *Hopitaly Vaovao Mahafaly* (The Good News Hospital), in northern Madagascar. We share gospel hope with the Tsimihety people of the Sofia Region, providing them with life-saving medical care as we do so.

The community impact of COVID-19

Madagascar has 12,000 confirmed COVID-19 cases (August 2020); however, there have been few recorded deaths. A strict and lengthy lockdown not only risks economic downturn and massive loss of crucial tourist revenues but even outright famine. Storing food is difficult; very few people own a fridge or freezer and so visit the market almost daily. Restrictions are variable and not well enforced or adhered to. Given the alternative, that's probably the lesser of the two evils.

Mandritsara is very remote. Our first two COVID-19 cases were confirmed in July. The local population are mainly rice farmers, meaning people are unlikely to lose their livelihood. They will, however, have more mouths to feed as family members return from towns and cities as their income evaporates. Local culture is strongly relational – this continues to (mostly) trump infection control. I've just returned from a housewarming ceremony where 50 people shared rice porridge, prayed, and sang together in the main

room of one of our community health team's new houses. Social distancing was somewhat limited, with mask-wearing intermittent at best.

As COVID-19 has only just arrived in Mandritsara, it's hard to know the longer-term impact. I would not be surprised if there were a significant rise in malnutrition next year. The economic impact will be dramatic for the tourist-dependant parts of the island.

The impact of COVID-19 on your work

Travel restrictions have closed borders since March preventing home assignment and much-needed holidays. Probably even more significantly no-one's been able to get in: students, short-term doctors (medical and surgical), engineers to mend the solar panels, friends visiting, and long-termers in the UK when the pandemic struck. We expected dozens of people over the last six months - we're pretty stretched without them. The hospital itself is quiet (people are avoiding hospitals/towns wherever possible). This makes balancing the budget harder and almost certainly means there's a lot of untreated patients and fewer people hearing the gospel. That said, we have more time to share Jesus with those who are here. It's nice to go beyond just handing out a tract whilst trying to get through a rammed 40 person morning clinic.

Has there been a spiritual impact?

When COVID-19 first reached Madagascar, there was a lot of fear, especially amongst staff who'd read stories on Facebook of healthcare workers dying. I think God has been at work in people, helping them to trust him and remember that 'to live is Christ and to die is gain'. (Philippians 1:21) Church has been cancelled, and online services are not feasible. We have a one-hour radio service each Sunday. Do pray for Malagasy brothers and sisters missing those meetings. They are a huge part of how people relate to Jesus in this highly collective society. I'm grateful for our team Bible-studies keeping me going spiritually (just finished a series in John 5-10).

How can CMF members be supporting and praying for you?

Please pray for:

- Spiritual sustainment, particularly without church
- Gospel fruit, making the most of our time with patients (despite tiredness and feeling overstretched)
- The hospital's financial stability
- Energy for hospital staff and for those on-leave and students to be able to return

Information on updates, arranging a student placement, or giving to the work of Mandritsara can be found here mandritsara.org.uk or by contacting nathan.lawrence@mandritsara.org.uk

ALISON DUDGEON

Salavan, Laos



The significant economic hardships are having a greater impact than COVID-19 itself

am a trained nurse and midwife. My husband, Colin, and I work in Laos, a beautiful landlocked country facing many economic obstacles. Buddhism is the official religion, often mingled with animism by the native ethnic groups. I work in Salavan Province, one of the poorest in the country. Malnutrition, stunted growth, malaria, dengue, TB, and Japanese Encephalitis are all major problems and daily challenges. As the sign in our dining room says' every day is an adventure'.

We work for a small Swiss-French NGO called SFE Laos on a health education and community development project in the provincial hospital, five health centres and ten rural villages. My work is to reduce maternal and child mortality. The project also aims to improve health by working with communities to build toilets, water systems to provide clean running water, improved agriculture and health education.

Our ministry is based on 1 Peter 2:12, which tells us to 'live such good lives... that they may see your good deeds and glorify God'. Our aim, with his help, has been to live our lives this way. In a place where it is difficult to share, we have seen God at work, touching people's lives.

The community impact of COVID-19

Laos has very limited resources, making communities very vulnerable. Borders are closed, with restricted entry points and a 14-day quarantine. So far, only 20 COVID-19 cases have been confirmed with no fatalities. Many Lao people working abroad or in the cities have lost their jobs and returned to their home villages. This has put extra pressure on already limited resources. Rice stocks don't typically last between harvests and foraging for food in the forest is common. We have heard that even in the cities some people are foraging along the waterways. Loss of income from tourism is making life very difficult in Laos. So far, the significant economic hardships are having a greater impact than COVID-19 itself.

The impact of COVID-19 on your work

We were advised to leave Laos in March due to the pandemic. It was a tough decision to leave our colleagues and friends behind. We have been able to maintain contact and continue to help and advise them while working remotely. It has been wonderful that social media contact has led to some conversations that wouldn't have happened under normal circumstances. As we prepare for the next phase of our project in January, we are praying for finances. We know many donors are also facing difficulties.

SFE has been active throughout the COVID-19 outbreak. We continue to provide equipment and knowledge while working with our local and national colleagues and other agencies, including the World Health Organisation, to upskill local health professionals. The Government of Laos is training medical personnel to recognise symptoms and perform tests to identify and manage individuals with COVID-19. We hope that the pandemic will positively impact healthcare provision and particularly hygiene in all aspects of life in the nation. One of our challenges has been to promote handwashing. Now this message is coming from all quarters. Irregular running water and limited sinks for staff, patients, and families had been an issue. SFE offered expertise by implementing a 'handwashing station model' to the hospital, working with staff to install twenty-four handwashing stations with water bins and soap. With temperatures of up to 40°C, SFE also provided Terraclear water filters allowing clean drinking water for staff and patients around the hospital.

For prayer:

- That Laos will continue to have very few cases of COVID-19 and the healthcare quality will continue to improve
- Pray for the Lao people who have lost their jobs and are struggling to survive
- That our brothers and sisters will continue to grow, support and encourage each other – particular as technology is very limited
- That we know Gods leading and timing of our return to Laos

Updates and further information on the work in Laos can be found by emailing alison.dudgeon@sfe-laos.org

IAN SPILLMAN

Kisiizi, Uganda



We have been encouraged by The Blessing, reminding us that we are not isolated, but part of God's church around the world

y wife Hanna, a midwife, and I work at Church of Uganda Kisiizi Hospital in southwest Uganda. The hospital is situated in a hard-to-reach rural area serving a poor community who are mostly subsistence farmers. Our motto is 'Life in all its fullness' (John 10:10) and a key theme is 'care for the vulnerable'. In addition to our core work, we run a not-for-profit community health insurance scheme (more than 40,000 beneficiaries in 224 groups), a primary school including special needs children, a school of Nursing and Midwifery, a child sponsorship programme, the Kisiizi Falls tourism project to support our Good Samaritan Fund for the neediest patients and a 300kW hydro-electricity plant for the hospital and our community!

The community impact of COVID-19

We currently have a few suspected COVID-19 cases. However, while none have yet been confirmed, the secondary impact has been unprecedented. Entebbe airport and all borders have been closed since March, except for cargo. Churches, markets, shops and schools are all shut. There was a serious lockdown on public transport, and a curfew with beatings and even deaths reported relating to its enforcement. Thousands of people such as boda-boda (motorbike) drivers lost their source of income overnight.

The impact of COVID-19 on your work

In Kisiizi, the closure of our schools, guest house, and cancellation of tourism, electives and visits have significantly dropped our income. Patient numbers have reduced as they have been unable to get here. Supply and equipment costs have increased, sometimes dramatically, as supply lines were interrupted. We had to get special permission to drive to Kampala (a seven to eight-hour trip) to obtain supplies from the national psychiatric hospital for critical medications, including chlorpromazine and carbamazepine.

Some short-term overseas volunteers returned home early, and we were forced to send some staff home, eg primary school teachers on a 10 per cent retainer salary. We had to increase patient charges and insurance fees and for the first time ever, cut salaries by 25 per cent for all staff.

Difficulty getting to the hospital has led to late presentations. One lady with a dog bite was unable to complete her anti-rabies vaccine course and tragically died. Some patients with chronic problems such as epilepsy, diabetes, and schizophrenia could not get ongoing treatment though Kisiizi. Staff have worked very hard to do extra home visits to keep the most vulnerable supplied.

Has there been a spiritual impact?

Prior to COVID-19, Kisiizi was holding weekday staff prayers, fellowship groups and Sunday services. These provided a sense of community and family, encouraging teamwork, perspective and communication, eg'...whatever you did for one of the least of these brothers and sisters of mine, you did for me.' (Matthew 25:40) The absence of the student nurses affects the atmosphere and the dynamics in the hospital. Connecting digitally has helped. We have done this through a WhatsApp'Thought for the Day' from our Chaplain and Zoom meetings with colleagues across Uganda and overseas (Internet permitting). We have been encouraged by The Blessing, reminding us that we are not isolated, but part of God's church around the world. The Ugandan version is brilliant!1

How can CMF members be supporting and praying for you?

As we sail these uncharted waters not knowing what is ahead, we thank God that he is our anchor in the storms and is with us in the boat! We pray for wisdom in our planning and good stewardship of the limited personnel and material resources available. It's hard to know what the long term impact will be given the daily increase in cases being reported. We hope the disease is contained as we have a very vulnerable population with malnutrition, TB and HIV still prevalent. Please pray for staff morale and unity and may the joy of the Lord be our strength.

May this time of shaking up cause many prodigals to come home. Amen

More information on the work of Kisiizi and regular updates can be found at www.kisiizihospital.org.ug or by contacting us on khmedsup@gmail.com

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references

 The Blessing Destiny Africa - Acapella youtu.be/Gq0LWHX7odM (accessed 8 September 2020)