



The CHALLENGE of Africa

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God' Solution to Save the World

"All authority has been given to Me in heaven and on earth. Go therefore and make disciples of all the nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit, teaching them to observe all things that I have commanded you; and lo, I am with you always, even to the end of the age." Amen. (Matt. 28:18-20)

WANT TO SCHEDULE A CHIMALA MISSION PRESENTATION?

When I am not overseas or on the road, I schedule appointments for presentation reports to supporting churches or churches interested in learning more about the *Chimala Mission*.

If you would like a report, please contact me by email, phone or text!

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Howell Ferguson Highlights from Chimala Mission Hospital



Since the opening of the Chimala Mission Hospital (CMH) in 1965, an incredible amount of effort has been given over the years in helping with the medical needs of the people within the Mbarali District and beyond. In this month's *Challenge of Africa*, hospital director, Exavery Ngullo has happily provided our readers with short stories and typical scenes around CMH. While we are being decreet, still some of these pics may be somewhat disturbing.

To begin with, medical costs in Tanzania are only a tiny fraction when compared to western costs, yet the poverty of many of the people keeps some services completely out of their reach. And the reluctance and corruption of the government makes receiving timely NHIF reimbursements a huge road block. Even while giving our best efforts to keep costs to a bare minimum and yet still making timely payments to our employees, there is no easy answer. We never turn anyone away, but the hospital simply cannot bear the costs alone. In the meantime, the Chimala Mission Hospital will stand in the breach; but we could really use help.

Howell Ferguson

“Our Hospital Needs Help”

The above title and article that follows were written by Bill Stinson back in 2012. I think it is still in many ways relevant to the Chimala Mission Hospital today.

“I wrote an article about a year and half ago seeking financial help for the hospital. Many of you were very generous with your gifts and this allowed the hospital to ‘get back on its feet’ financially. The hospital managed to do well enough the next several months, but as I have written in previous articles, we have been required to join the government in an agreement where the hospital must give free care to expectant mothers and small children. The agreement included payments from the government to reimburse the hospital for services rendered. However, as I feared, the government is failing to keep their end of the agreement. We have been sending funds to the hospital every month, but have not been able to keep up with the deficit that has been building.... We need your financial assistance in order to keep this much-needed hospital open. We cannot express what an impact your contributions to the hospital make on so many levels. This hospital not only saves physical lives, but also leads souls to Christ.”

Even 20 years later, this original deficit has dogged the hospital from being able to stand on it's own feet. It's very similar to getting into credit card debt. Today, the hospital needs \$25,000 to finally be rid of an old pharmaceutical debt in order to have meds and supplies on-hand rather than to continue to buy them “on credit.” We can't continue down this same old road. Please help the hospital break out of this vicious cycle.

Exavery Ngullo

Baby Warmers in Action

One year old Yesaya Mjengwa was brought to the hospital from Isitu Village after having difficulty in breathing. His parents worried and were frustrated due to the condition of their child and their beliefs in superstition. But a team of doctors and nurses came together to figure out the cause and gave a diagnosis of bacterial pneumonia and hypoglycemia. They decided to keep him on a warmer machine and oxygen machine. But the hospital doesn't have a Pulsometer for heartrate or oxygen input testing. They are also in need of a RBG machine for sugar level testing when monitoring patients.



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Help Chimala Mission use our financial support more wisely!

Exavery Ngullo

Helping the Helpless

The picture to the right is a photo of our first orthopedic surgery performed at the Chimala Mission Hospital. Not only was this first orthopedic surgery a great success; but from the last information received, there have been six orthopedic surgeries and all of them have been successful. The frequency of motorcycle accidents emphasizes the importance of having orthopedic services at CMH. Fortunately we now have an orthopedic surgeon who is on-call when needed.



Health professionals, after performing a Caesarian section, are sweating due to the lack of AC and also the challenges of electricity here in the hospital. Electricity has been cut off most of the time leaving the hospital to depend on solar energy; but due to heavy rains this year the sky is covered by clouds most of the time. Also, the batteries for the solar panels are dying due to overwork. We resort to the generator, but generators are costly because they use gas which is very expensive here.

Love is an important pillar in the health sector. In the picture to the immediate right, Tumaini Saturo one among hospital nurses cares for a child after receiving him from his mother who came for treatment. Parents of sick children feel very comforted when they see nurses helping children not only by providing them with medical care but also when they show love and cooperate with them as brothers and sisters. In the far right picture, Sarah David Bayi giving first aid with love in the children's ward.





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**Exavery Ngullo
Doing Much with Little**



A team of doctors fighting for a 3-year-old child who was brought to the hospital after being infected with a bug in his ear, causing him to be in severe pain and unable to sleep at the night. But unfortunately, here in the hospital there is no device called Otoscope which is used to examine foreign bodies. Despite the challenge, they managed to solve the problem, and the child was allowed to go home.

[Seldom do we imagine such things happening in the USA. But the "unusual" is very common for the people of Tanzania. hf]