



Mission Newsletter

AFRICA CHRISTIAN MEDICAL MISSIONS, Inc. (ACMMI)

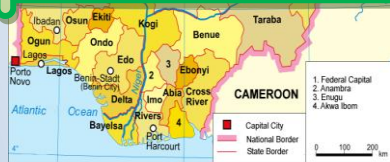
"Volunteers healing bodies and souls in the nations of Africa and the Caribbean."

Upcoming Events

ACMMI-Mission 2012



NIGERIA-Mission 2012
Date: **May 11 - 25, 2012**



For Info Call: 713-240-0235

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ACMMI HIGHLIGHTS:



Over 50,000 reached with the Gospel of Salvation through JESUS CHRIST



Over 500 operations performed

Ethiopia Medical Mission- An Eye-Opening Experience

by Sandra Buchanan, RN, CCM

It is not very often that people get the opportunity to visit the land of their ancestors. It has always been my desire to visit the continent of Africa but never thought it would be possible. In October 2011, this desire became a reality.

After much prayer and submission to the Lord, I took on the challenge by joining ACMMI team of highly dedicated and skilled professionals on a medical mission trip to Ethiopia. As a health care provider residing in a developed country, I have become content in my comfort zone and took such affluent lifestyle for granted.



Ladies of ACMMI- Ethiopia Team

Our first clinic site was in the village of Goro. Motivated by the large crowd who appeared desperate to receive our services we put in long hours attending to their health needs and sharing the Gospel. Our group felt accepted and loved by the people we met but what impacted me the most was the poor state of the health care system, the limited resources available for medical care, and the great number of people afflicted with goiter, an abnormal enlargement of the thyroid gland

Seeing the joy and gratitude on their faces more than rewarded us for the long hours of service. It was the first time most of them had ever been treated by a doctor. It was very difficult for me to comprehend why those known to have goiter, vision problem or hypertension could not afford to follow up with a local physician or clinic for treatment.

We briefly visited Shashemane Referral Hospital to see a patient referred by our pediatrician. I was very amazed that the family could not afford the US\$35 per day hospital cost. ACMMI caring and

compassionate team members contributed funds to pay the estimated 3-week hospitalization cost.



Kwashiorkor Child Hospitalized

The child's mother at the bedside was speechless. Our team members then laid hands on the child and his mother and prayed. It was remarkable to see the large crowd of onlookers who joined in this glorious occasion. What a great demonstration of the Gospel of Jesus Christ in human action!

One of the memories that I will always cherish is the consistent appreciation and gratitude from the people we served. Our new-found friends from the Harvest Church of God, led by Bishop Hiruy Tsige, went out of their way to welcome, protect, and care for us in such an unselfish manner. The gleam in the eyes of the children and the adults was such a great inspiration to me, and I felt honored serving them. I could not help but think that "service to others" is one of the greatest calls for a Christian.



Nephrotic Patient Hospitalized

My mission trip to Ethiopia was a tremendous eye-opening experience! It gave me an immediate awareness of how blessed and privileged we are to be living in the United States. I left Ethiopia thinking about all the needs I encountered and how I could make a difference in impacting those in need.



From The Founder's Desk – “An Expected End”

by G. Gbaanador, MD, FACS, FICS



“For I know the thoughts I think towards you, saith the LORD, thoughts of peace, and not of evil, to give you an expected end.” Jer 29:11 KJV

December is a time of the year for reflections, transitions, and expectations. We take time to reflect on the year just past, transition into the new and have great expectations for the New Year. It is bewildering how quickly the year seems to have gone by. In 2011 we witnessed the so-called Arab Spring mushrooming into a geopolitical force reshaping nations and leaders in that part of the world. In the United States, movements like the “Tea Party” and “Occupy Wall Street” brought about rethinking and realignment, in politics.

As we reflect on the year, we may find that we failed to live up to our expectations in certain areas of our personal, vocational, political, physical, and spiritual lives. Our perspectives may have even changed on a whole array of issues such as, our new year resolution of losing weight with dieting and exercise, the dreamed vacation that we never got around to, our plan to read through the Bible, or that nasty habit we have been trying to kick. My wife and children lovingly reminding me AGAIN that sometimes I still raise my voice when conveying my displeasure about what they did!! I reassured them not to give up on me as God is not quite done with me yet.

On the other hand, we are sometimes amazed by the degree of success we managed to record in other areas of our endeavor. Such recognition of our potential for good often reinforces our predilection for self-reliance and a false sense of self-sufficiency. Welcome to the universal human experience! Africa Christian Medical Missions, Inc. (ACMMI) started short-term medical missions in 2000 and has a record of laudable success. It therefore seemed strange when we found ourselves in Ethiopia having to relearn humility, total dependence and submission to God's plan. Some aspect of the mission did not turn out as we had anticipated. Little did we realize, at the time, that God had set “an expected end,” full of peace and hope for this particular mission.

Expectations

January is usually full of expectations for the year ahead. What were your expectations back in January of 2011 as compared to 2012? What goals did you set for yourself, family or career? What was your expected end and did you reach that destination? If not, what were the challenges you encountered and how did you handle them? What were the lessons you learned? Candid answers to these thought-provocation questions may hold the key for your future success as we in ACMMI learned in Ethiopia.

ACMMI started out 2011 with great expectations. We successfully executed two missions in 2010. One was the medical mission to Nigeria in April in partnership with Pro-Health International. The other was a humanitarian mission to Haiti in November where we ministered to the physical and spiritual needs of the displaced masses inhabiting the so-called “tent cities” of Port Au Prince, Haiti. ACMMI was therefore poised for the 2011 medical mission to Ethiopia with great expectations.

Realizations

ACMMI team of 13 volunteers departed Houston, Texas on October 24, 2011 arriving Addis Ababa, Ethiopia, the next day. We were warmly received at the airport by our local partner, Harvest Church of God, Ethiopia (HCOGE) led by Bishop Hiruy Tsige. It was at the airport that we faced our first challenge. Agents of the Ethiopian pharmaceutical regulating authority were not readily available at the airport due to our late arrival time. All our medications and supplies were therefore seized and held in storage pending their action. When they arrived the next day we then found out that there were several bureaucratic hoops we had to jump through before the medications would be released to us.



Queue in Medo, Ethiopia

We did not know how long this will take and not wanting further delay of the mission, the team left Addis Ababa for the remote and medically underserved village of Goro in Oromia region where our first field station was started. I was left behind in Addis Ababa to attend to the issues of getting our medications released. ACMMI had to buy locally available medications and supplies in order to serve the health needs of the people we encountered. Although it was a predominantly Muslim community they happily welcomed us and were very cooperative in ensuring that our service to the community was hitch-free. HCOGE already had a footprint in the community in the form of a primary school as a practical tool for the Gospel. Our humble effort further watered the grounds and we pray that the seeds sown in the hearts and lives of these Oromo people will grow to produce a great harvest for the Kingdom.



ACMMI Team - Ethiopia Mission 2011

Other stations of service included Finchir, Medo, Hawassi, and Waliso. In all we served in 5 communities, attended to **1104 patients (406 children and 698 adults) 4 surgeries and 2 hospitalized** (Kwashiorkor and Nephrotic syndrome). Most of these were predominantly Muslim communities in remote medically underserved areas. However, they welcomed us and some even volunteered as translators to facilitate our work in the area. In Medo, we were even stationed at a Christian school adjacent to a mosque but the people were very friendly, worked cooperatively with us, and blended with our team seamlessly. (Cont'd)



The Crowd in Finchir, Ethiopia

“An Expected End” ... *Cont'd*

An Expected End

In **Jeremiah 28 & 29**, the Israelites have just been taken into Babylonian captivity. Their situation appeared hopeless. Their false prophets promised a quick return to Jerusalem in 2 years but God (through Jeremiah) was assuring them that although the sojourn in captivity will be longer (70 years) than they are being made to believe (declaration from their false prophets, Hananiah), He had a clear plan for them. It was to bring them to an expected end, one filled with peace and hope.

It so happens that I was the one “in the eye of the storm” that brewed over the release of the ACMMI supplies in Addis Ababa. I must admit that initially I was counting on my past medical mission experiences to get me through the current challenge. Suddenly, I realized that such self-reliance was not just a mistake but a direct disobedience of God’s command! (“*Trust in the LORD with all your heart and lean on your own understanding; in all your ways acknowledge him, and he will make your paths straight.*” **Prov 3:5-6** NIV). I therefore confessed my sin and asked God for forgiveness. I let go of my personal ideas and submitted completely to God’s perfect plan. Once I jettisoned my human-contrived solution to the problem and handed it over to God, I received a spiritually refreshing peace knowing that God’s plan was better than mine. The rest of the team was praying continually for God’s intervention in ACMMI’s challenge but it had to start first with **me** submitting to Almighty God.

I do not know what your situation, plans and goals are as we venture into this New Year but **what is your expected end?** We are often tempted to buy-in to easy and convenient solutions proffered by the ‘false prophets’ we have surrounded ourselves with. Sadly, some of those false prophets are actually of our own making or more specifically, ourselves and the belief systems we have embraced which are contrary to God’s plans as clearly stated in His WORD, the Bible. God’s WORD is TRUTH (**John 17:17**) therefore any other thought, or plan contrary to this TRUTH is false (**John 14:6**) regardless of its appeal of correctness.

In many ways, my experience in Ethiopia is common when we look **outside** of God’s plan for solutions to our problems. We often believe that our past works of righteousness will be sufficient equipment for our redemption. But the Bible states “*all our righteousness are as filthy rags;*” (**Isa 64:6**) “*There is none righteous, no, not one ...*” (**Rom 3:10-12**) and that “*we have all sinned and fallen short of the glory of God.*” **Rom 3:23**. The consequence of our sin is death and eternal separation from a righteous and holy God. **Rom 6:23a**. Our sinful, fallen state makes us not only deaf to the WORD of God and blind to His redemptive plan but also incapable of saving ourselves or salvation by any other means (**Act 4:12**).

But there is Good News! God has made a way for us to be set free from the damnable consequence of our sins. **Rom 5:8, 6:23b** God loved us so much that He gave his Son to bear the penalty for our sins thus setting us free. **John 3:16** The only requirement is that we acknowledge that we have sinned, confess our sins and accept the finished work of Jesus Christ on the cross and thereby be expunged of the guilt of our sins. **Rom 10:9-11** Would you like this FREE GIFT (**Eph 2:4-10**) of being released from the burden and consequences of your sin? Then accept Christ TODAY!

God allowed the ACMMI challenge in Ethiopia both to teach me afresh to always trust in Him instead of my ability and to bring about an expected end to the mission. “*For I know the thoughts I think towards you, saith the LORD, thoughts of peace, and not of evil, to give you an expected end.*” **Jer 29:11** KJV God has an expected end for YOU today and it is for your peace and hope.

ACMMI – MEDICAL STATS						
YEAR	COUNTRY	CHILDREN	ADULT	TOTAL	SURGERY	EYE GLASSES
2000	NIGERIA	1500	4500	6000	73	N/A
2001	GHANA	1100	3900	5000	N/A	N/A
2002	S. LEONE	907	2450	3357	11	N/A
2003	NIGERIA	1200	3260	4460	14	N/A
2004	KENYA / TANZ	1895	3174	5069	N/A	N/A
2005	JAMAICA / NIG	1373	6150	7523	147	N/A
2006	RWANDA	802	1703	2505	3	N/A
2007	GHANA / NIG	5327	7914	13241	307	863
2008	HAITI / NIG	4128	6147	10275	202	1426
2009	ZAMBIA / NIG	2929	3612	5641	96	467
2010	NIGERIA / HAITI	497	1653	2150	164	473
2011	ETHIOPIA	406	701	1104	4	N/A

Our medications and supplies upon release by the Ethiopian authorities were donated to the health clinics of HCOGE. This seed will be used by HCOGE to extend our ministry of free healthcare to other remote areas of Ethiopia beyond the stations ACMMI physically served. God had an expected end but I did not see it initially just like He had an expected end which the Israelites in Babylonian captivity failed to see at the time. I pray that by sharing this experience with you it will spark the flame necessary to burn the rope which binds you from experiencing the fullness of your expected end. Please accept Christ and be born-again **John 3:1-21**.

Regardless of what you are going through currently or how bleak your future seems, I want you to know that God’s thoughts toward you in 2012 are thoughts of peace, and not of evil, to give you an expected end.. Amen!!

God’s Grand Plan For Ethiopia Mission

by Willie & Dr. Janice Powells

We thought we had everything together. We even spent time with our host Bishop Hiruy Tsigie of HCOGE while he was visiting Houston to plan the last stages of our missionary trip to that ancient land - Ethiopia. We were therefore shocked by what happened in Addis Ababa when our medicine and supplies were seized and held by customs. At that point, I knew that it was no longer in our hands. My prayer was “God, have your way and thy will be done.” Once we let go and let God, we started to see God at work.

We felt beaten down and made emotionally and spiritually low by the onslaught of challenges. However, we survived the attacks with prayer and the word of God!! We overcame every challenge with hope, persistence, and dependence on the Holy Spirit. Finally, the medicines were released and we made arrangements for our partnering local doctors of HCOGE to carry out further medical missions. This in itself was an immeasurable blessing. What a grand plan God had for Ethiopia!!

ACMMI – SPIRITUAL STATS				
YEAR	COUNTRY	NEW CONVERT	REDEDICATED	REFUSED
2000	NIGERIA	2600	3400	N/A
2001	GHANA	3000	2000	N/A
2002	S. LEONE	1242	866	342
2003	NIGERIA	1597	1500	183
2004	KENYA / TANZ	2461	2044	219
2005	JAMAICA / NIG	1709	5397	267
2006	RWANDA	742	1628	135
2007	GHANA / NIG	1551	2080	1132
2008	HAITI / NIG	743	3262	159
2009	ZAMBIA / NIG	2178	2708	755
2010	NIGERIA / HAITI	694	251	60
2011	ETHIOPIA	262	116	322

Set Apart for the Work of the LORD



Go into all the world and preach the gospel to all creation. Mark 16:15



ACMMI / HCOGE Team



HCOGE Core Team

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ACMMI 2012 Missions – NIGERIA

Dates: May 11 – 25, 2012



SOME FACTS ABOUT NIGERIA

Nigeria is the most populous country in Africa, and the 8th most populous country in the world. It also has the highest twin birth rate in the world.

The Federal Republic of Nigeria is comprised of 36 States, and the Federal Capital Territory, Abuja. The three tiers of government are Federal, State, and Local Government Areas (LGA).

Healthcare services in Nigeria is in a deplorable state due to a combination of factors; under-funding, dilapidated infrastructure, lack of modern equipment and properly trained personnel, under-staffing, and overutilization.

The majority of Nigerians live in rural communities but the few healthcare practitioners in Nigeria are concentrated in the urban areas. People living in rural and remote areas therefore have limited or no access to even basic health care services also because of geographic isolation, poverty, lack of education and inefficient public transportation system.

In the Niger Delta region these factors are further compounded by decades of neglect by the political elite and now exacerbated by mushrooming militancy and criminality. ACMMI will partner with Gateway International Church to serve the physical and spiritual needs of the Nigerian people in 2012.



Location: West Africa.

Population: 150 million ('08 est.)

Ethnic groups: Over 250 ethnic groups.
Hausa & Fulani 29%, Yoruba 21%, Igbo 18%, Ijaw 10%, Kanuri 4%, Others 18%

Major Infectious Diseases:
HIV/AIDS, Lower Respiratory, Malaria, Diarrheal, Measles, Typhoid fever (2004)

Religions: Muslim 50%, Christian 40%, Indigenous beliefs 10%

Life Expectancy at Birth: 46yrs ('08)

Infant Mortality: 97/1000 life births

Under-5 Mortality: 197/1000 life births

Source: [worldfacts](#) & [World Health Data](#)

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ACMMI

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- Volunteer for missions, call me at _____
- Professional Partner (i.e. doctors, nurses, dentists, pastors, counselors, or donate medical equipment, supplies, medicines, literature, etc)
- Become a Prayer Support Partner of ACMMI



Name: _____
Address: _____
Phone: _____ E-mail: _____

