

# IHDN News

DECEMBER 2006

MAY GOD BLESS YOU

**INSIDE THIS ISSUE:****MESSAGE FROM THE PRESIDENT**

Another year is quickly coming to an end. We usually spend this time taking stock of what happened to us during the year. We also make New Year resolutions, most of which are hard to keep. Another truth about our lives is that the end of year and Christmas celebrations bring excitement to most of us. At IHDN, we are also very excited and thankful to God for seeing us through another calendar year. During the year, we celebrated our 10<sup>th</sup> year birthday with our 10<sup>th</sup> mission trip to Ghana. We took a medical student and other potential medical students on our team. As a group, we exposed them to tropical medicine and the reality of practicing medicine with very few resources. We also took full possession of the land at Adzadokpo-Wheta in the Volta Region of Ghana for the construction of our Mission Hospital and Nursing Training School. We broke ground for the outpatient clinic building during the year. We also shipped medical and non-medical supplies to the Ghana for the hospital.

Several people showed interest and supported our efforts in various ways. We are very thankful for all who donated their time and money in support of our work. Above all, we thank God for making it possible for us to accomplish the impossible. We wish you a Merry Christmas and a Happy New Year.

Sincerely,

***Dr. Edem S. Agamah***

***President, IHDN***

## IHDN Needs Help to Provide Water and Electricity for Ghana Mission Hospital

We used to think there was a large body of underground water in most areas of southeastern Ghana that could easily be tapped by a well. That belief has been disappointed. IHDN made two major attempts to sink a well at the hospital construction site but came up empty.

The first attempt used local technicians' simple tools for well drilling. The second attempt used the drilling equipment of a U.S.-based group now drilling wells in Ghana, called "Waters of Love for Ghana" and sponsored by Aldersgate United Methodist Church in York, Pa. Neither effort yielded enough water to support construction work, let alone to provide water for the hospital.

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**SPECIAL POINTS OF  
INTEREST:****COMPARING US VS  
GHANA**

- % Rural Population using improved drinking water  
100 % versus 64%
- % Under 5 receiving anti-malarial treatment  
0% versus 63%
- Adult prevalence of HIV  
0.6% versus 2.3 %
- % government expenditure on a) Health b)  
Education c) Defense  
a) 24% versus 7%  
b) 3% versus 22%  
c) 20% versus 5%

Source: UNICEF

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## African Babies Get a boost Against Malaria

### By Dr. Edem S. Agamah

If you follow the news, you probably have read about recent efforts led by the World Health Organization (WHO) to promote use of DDT as one strategy in the fight against malaria. Malaria is a parasitic disease transmitted by the bite of a mosquito. Theoretically, if there are no mosquitoes there will be no malaria.

DDT is a highly effective insecticide that was used to kill mosquitoes and eradicate malaria in various parts of the world including Asia and South America over 30 years ago. When sprayed indoors on walls, DDT stays for several months and kill mosquitoes that settle on the walls. This Indoor Residual Spraying (IRS) method was not widely used in Africa in the past.

We do not know all the potential hazards of DDT. What we do know is that environmentalists were very concerned about the extinction of the bald head eagle and the potential effects of DDT on humans, birds, and other wildlife. This led to a major campaign to ban DDT throughout the world, resulting in withdrawal of the single most effective weapon against malaria.

As a result, mosquitoes multiplied in areas that did not receive widespread spraying. It is no wonder that malaria is the most common diagnosis in outpatient clinics in sub-Saharan Africa (44% in Ghana). Globally, 350-500 million people contract malaria each year and over 1 million die—mostly babies and children under 5 years.

HIV/AIDS, which was unknown 30 years ago, slowly crept into these countries, becoming a major cause of illness and death in some places. For complex reasons, HIV/AIDS received widespread global publicity and sympathy. Drug companies were urged to give away cheap drugs to dying patients in Africa, and much money went into HIV/AIDS research and control in Africa. But treatment of HIV/AIDS is very costly and complicated, and not readily available to most patients in Africa. Still, the developed world poured in money to treat these patients. Gradually, Western donors began to realize that another major killer, malaria, was killing children faster than HIV/AIDS.

For some time now, WHO has advocated use of insecticide-impregnated mosquito nets. They were not widely adopted due to cost and because they were only a short-term solution to the overall problem. Besides, trying to sleep in mosquito nets in tropical heat may not appeal to everyone. As more money went into HIV/AIDS control, mosquitoes were allowed to multiply. Many children, in particular, suffered premature and avoidable deaths from malaria.

The global focus on HIV/AIDS is a good thing. But it is even more rewarding to focus on preventing and treating malaria. Let us all join hands to support the Indoor Residual Spraying (IRS) effort in sub-Saharan Africa. While this will not eradicate mosquitoes, it will reduce the burden of malaria. What is needed is to find a way to kill the mosquitoes. This may call for developing new, effective, and safe chemicals that could be used for outdoor and aerial spraying. It will also involve the use of small airplanes to provide aerial spraying.

### **Help Needed to provide Water & Electricity for Ghana Mission Hospital (Contd)**

As a result, water is being trucked to the construction site in large containers. This is very costly and inefficient. Thus we need to tap a water source 3 miles the Mission Hospital site. The estimated total cost of this project is about \$15,000. Please consider partnering with us by donating money to help provide water to the IHDN Mission Hospital.

We are also looking for help in bringing electricity to the hospital site and buying a backup generator for the hospital. More details on this aspect of the project later

**IHDN sends Volunteer Construction Team to Ghana**

IHDN is sponsoring a 13-member volunteer construction team to Ghana, in February 2007. One part of the team will be there February 1-18, and the other part February 1-27. They will assist with construction of the IHDN Mission Hospital, which is already well underway. The team members are as follows.

**February 1-18:**

Dr. Edem Agamah      Mr. Abe Stutzman      Mr. John Neal

**February 1-27:**

Mr. David Calley	Mr. David Daniels	Mr. Matt Kolding	Mrs. Laura Woodworth	Mr. Gary Gaard
Mrs. Janice Calley	Mrs. Janet Daniels	Mr. Dale Abegglen	Mr. Phil Woodworth	Mrs. Sally Gaard

The two teams will be active on the following projects:

1. Assisting with ongoing construction of IHDN Mission Hospital.
2. Connecting to a water source three miles from the IHDN Mission Hospital site.
3. Assisting in establishing a Farmers' Cooperative.
4. Christian Leadership Training.
5. Marriage and Family Life Seminars.
6. Rural outreach medical clinics in villages.

Please pray for traveling mercies and good health for the group. Pray for the people we seek to reach in Ghana. Pray for the ongoing human and material resources we need to continue with our ministry. We appreciate your donations of money and appreciated stocks. All donations are tax-deductible as allowed by law. Above all, please pray for God's name to be glorified and for others to be drawn to Him.

**Two Small Coins    by Dr. Remi Imeokparia**

When we reiterate to friends that small gestures mean much more than expensive gifts, I am sure they sometimes doubt the sincerity of our gratitude. The story of the widow who gave "two small coins" (Mark 12:41-44) should resonate with those who give regularly for a good cause. The surprising aspect of the widow's generosity was that her "small" gift was more revered than the thousands being donated by the rich people. Why? Those two coins were all she had.

IHDN has benefited from "small" donations. The list of persons volunteering with this nonprofit organization keeps expanding. The small group of three volunteers on the 1<sup>st</sup> mission trip to the village of Agbozume in 1996 compares to the latest group of 13 volunteers on the next mission trip. (Please go to the IHDN Web site at [www.ihdn.org](http://www.ihdn.org) for a complete list of all volunteers.) All past volunteers have contributed in a variety of ways to the success of this 10-year-old organization. I am most impressed by the current group who will leave for the next mission trip in early 2007. They will contribute tremendously to accomplishing a big project, the construction of the new IHDN hospital in the village. The impact they will have on IHDN by going to Ghana is no small feat. People young and not so young, men and women, have volunteered to give their talents, diverse skills, and precious time to IHDN. Of course, some of them, like past volunteers, will experience a new culture (shock). Despite facing the unknown, they have decided to give their "two small coins" to ensure the success of this big project. Their commitment is admirable.

On behalf of IHDN-USA members, and on the 10<sup>th</sup> year anniversary of IHDN, thanks to all the past, present, and future volunteers for their continued, collaborative hard work to foster the success of IHDN. We also thank all who donated money and their time to support our work both in the U.S. and in Ghana. May God bless you as you continue to support our work. As the English philosopher John Ruskin said:

*'It is not how much one makes but to what purpose one spends. What we think, or what we know, or what we believe is, in the end, of little consequence. The only consequence is what we do. When love and skill work together, expect a masterpiece.'*

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an example.*

**www.ihdn.org**

#### IHDN Welcomes New Board Member

We would like to welcome Mr. David Miller as our new Board member. Mr. Miller is a lawyer, who works for the Illinois Legislative Research Office. He has served IHDN in several capacities and recently volunteered to Ghana. His late wife, was Mrs. Rhonda Miller, who served on IHDN's board. Let us welcome Mr. Miller to our Board.

#### **Financial Update through From January 1, 2006 to October 17, 2006**

Total contributions	\$41,014
* Expenditures	\$26,781
<b>Net Balance</b>	<b>\$14,233</b>

We thank all of you for your support and generous donations. May the Lord richly bless you.

\* Refers to cost of building supplies and shipment to Ghana. Waiting to receive reports on ongoing expenses and outstanding debts from mission hospital construction work in Ghana.



Unsuccessful drilling for water - Sep 29, 2006



Delivering of water at Construction project site -Oct 21,



Site Preparation for IHDN Hospital - June 10, 2006



Foundation work in progress— October 16, 2006



Foundation completed, Columns up—Nov 27, 2006



Construction of Beams - December 10, 2006