MULTIPLYING LIGHT AND TRUTH THROUGH COMMUNITY HEALTH EVANGELISM...

a book which examines the underlying philosophies, principles, training curriculums and materials for establishing a community based development program which is integrated into an aggressive evangelism and discipleship ministry.

THIS BOOK WILL BEAGUIDE TO

- ✤ missionaries who want to integrate evangelism discipleship with community based development.
- + church, mission groups doing community health who want to include evangelism discipleship.
- + church, mission groups doing evangelism discipleship who want to include community based development.
- ✤ people preparing for overseas development work.
- teachers and professors of mission in Bible colleges, seminaries.

"If only all towns and barangays in the Philippines will implement the CHE program, the Philippines will be a paradise on earth. I wish all our leaders would catch the vision of CHE. It is my hope that through what is happening in my town, the CHE program will spread to all the towns of lloilo and hopefully the whole nation."

Zafiro Palabrica . former Mayor of Bingawan in the Philippines

"Tens of millions of lives are waiting for someone to proclaim to them the truth of the gospel. Community Health Evangelism was first conceived and developed within Campus Crusade for Christ, by Stan Rowland, I am deeply grateful for the great advances of this effective strategy, one that ministers to the 'whole man."

Dr. Bill Bright, president and Founder, Campus Crusade for Christ

"I commend you for such an outstanding ministry to the spiritual and health needs of the 'poorest of the poor,' The sacrificial, personal investment of time is most inspiring. God bless you in this incredible strategy. May it spread and multiply around the world and change the lives of millions of people."

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Stan

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John Ashcroft, Former Governor of Missouri & U.S. Senator

Multiplying **Light & Truth** through Community Health Evangelism

(3rd Edition)

Stan Rowland

That all may know the truth

Multiplying Light & Truth

through

Community Health

Evangelism

(3rd Edition)

STAN ROWLAND



Multiplying Light and Truth Through Community Health Evangelism by Stan Rowland

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Foreword

Multiplying Light and Truth Through Community Health Evangelism is, without question, one of the most challenging, imaginative, comprehensive, and far-reaching approaches to health in the Third World that I have ever encountered. I have spent many hours going through this manuscript, and I find it quite breathtaking. It reflects lessons learned from deep personal experience and knowledge gleaned from much relevant reading. The emphatic approach to the needs of the whole man—spiritual, mental and physical—is nothing less than revolutionary. The whole concept is one of daring and challenging faith, and nothing like it could have been conceived other than by men and women profoundly conscious of the unlimited resources of Almighty God. The unashamed emphasis on preventive rather than on curative medicine, I believe to be absolutely right.

As one who has worked for 20 years as a surgeon in East Africa and is currently involved in a project endeavoring to provide the simple basics of medical care in a community devastated by political instability in Uganda, my allocation of priorities has been greatly altered with the passage of time. I have become totally convinced that far more suffering and death is avoided by the institution of simple measures to prevent disease, together with primary health care at the village level, than by the provision of high technology medicine at vastly greater expense. Estimates are that in large areas of the Third World, over 80% of disease could be prevented by provision of clean, adequate and locally available water, the introduction of simple but satisfactory sanitation, and relatively inexpensive immunization of children against common infective diseases.

Such highly successful and cost-effective measures must of course be accompanied by a demonstration of care and compassion through provision of simple but effective therapeutic measures, which are essential to gain the confidence and cooperation of the communities served.

This emphasis on primary health care in no way belittles the importance of a referral hospital, but it must always be emphasized that the provision of medical facilities must be in the proportion of a pyramid, standing on a broad-base of community care and with a much smaller apex representing specialized hospital amenities.

The people of the Campus Crusade project (for building health care in economically poor communities) have not only understood and accepted these priorities, but have added at least two additional and important dimensions to their commendable enterprise. The first and most important is the whole-man approach. Man's needs can never be adequately met if he is viewed as no more than a biological creature, an improved animal. It is precisely because man is more than biological that he cannot "live by bread alone," bread representing all the requirements of merely biological existence. The additional requirements represented by the rest of the quotation, "but by every word that God utters," refers to the hunger and thirst inherent in the spiritual dimension of man and met through a restored relationship between him and his Creator. From a purely practical point one is delighted to see the correct insistence that imported technology should be appropriate to the situation, which implies that repairs are within the ability of local craftsmen and spares are procurable from non-specialized sources. The stores of countless Third World hospitals are cluttered with elaborate but defective equipment, the repair of which is beyond the reach of locally available technology. The other important dimension of care which the Campus Crusade teams are providing is advice on such basics as the method of agriculture, including the growing of cash crops or the keeping of bees to enable the purchase of family needs.

A further and most valuable aspect of the work is the manner in which team members live with and work side-by-side with those they are ministering to. In this way, their words and teaching are demonstrated by life-style example, which must always be more effective than directions issued from above, no matter how appropriate. A particularly welcome feature of the project as a Christian endeavor is its ecumenical nature and its close involvement with the local church authorities, which must go a long way to diminish animosity or criticism from the local community.

Although I hopefully saved some lives, alleviated some suffering, and helped in the training of doctors for the future, I would have had more impact on the health of the community had I headed up a team engaged in health preservation and primary health care. I in no way, however, regret what I was enabled to do, since the choice between curative and preventive medicine is not an "either or" situation, but one of "both and." The mistake has been and remains a gross overemphasis on treatment and an inadequate appreciation of the role of prevention. Many hospitals rightly display a picture of the Good Samaritan caring for the traveler who was attacked by robbers. But in the long-term it is more important to clear away the bushes which might provide hiding places for any future robbers.

The Campus Crusade project is doing both.

Denis Burkitt, CMG, M.D., DSC, FRCS, FRS Formerly Senior Consultant Surgeon, Ministry of Health, Uganda Member, Medical Research Council, England The developing countries of the world, what we have known as the Third-World, are tragically under-served medically. In-country medical schools are based on the Western model, which presupposes that the doctor will have hospital and laboratory facilities. It's no surprise then that the vast majority of national physicians locate in or near the larger cities which have the medical facilities. Yet most of the people live in rural areas. The striking fact is that in the developing countries, between 65 and 90 percent of the population does not have access to trained medical workers.

The sad result is that 40,000 children die daily of disease which could have been prevented. Of those 40,000 unnecessary deaths, 98 percent of them occur in the developing countries.

In 1979 the world health organizations met in a major medical conference in Alma Ata, Soviet Union, and attempted to deal with this incredible inequity of medical care availability. Their very appropriate solution was to establish community-based primary health care throughout the world. This plan called for teaching the principles of disease prevention, rather than emphasizing cure. The village community was to be responsible for carrying out the primary health care program. In this way a sustainable program could be maintained.

As wonderful as this solution was, it fell short. It was a road map of what to do, but failed in proposing how such a plan could be carried out. Herein lies the genius of the strategy that is unfolded in this book, Multiplying Light and Truth. It takes up where the Alma Ata conference left off. It is a carefully worked through, tried and tested strategy for the establishing of community-based primary health care. It has proved to have incredible flexibility, allowing it to be adaptable to the squatter's villages of the Philippines, to the Muslim enclaves of Bangladesh, to the tribal chiefdoms of Africa, to the nomadic highlands of Mongolia and Tibet, to the initiativestifled Communist lands.

Interwoven within the fabric of the strategy is the goal of changing individual lives one by one in a community-based setting. The underlying assumption is that changed lives can only be brought about through changed behavior, which must be preceded by changed attitudes, which, in turn, depends on the changed heart which only Christ's recreation can bring. Therefore, the meeting of spiritual needs through evangelism and discipleship are integral parts of this effective strategy.

The name of the strategy is Community Health Evangelism (CHE). The architect of this plan is Stan Rowland, who gave up a profitable business administrating over 50 small hospitals throughout the western United States, to take up the challenge of providing health care to the villages of Uganda and Kenya. This adventure began with the mission organization Campus Crusade for Christ in 1979, in response to the Alma Ata mandate.

Over the next ten years, indebted to the work of other communitybased health pioneers such as Dr. Roy Shafer, Stan developed and tested Community Health Evangelism. A training of trainers course was developed to facilitate the dissemination of this ministry. To date, well over 400 mission and church organizations have been trained in Community Health Evangelism.

As the Executive Director of the medical mission organization Medical Ambassadors International (MAI), I became aware of CHE as the answer to our needs. Our clinics, run for the most part by national physicians and paramedics, were being overwhelmed by the enormity of the physical need. Our workers did not have time to successfully carry out their mandate of evangelism and discipleship. In 1989 Community Health Evangelism became the prime strategy of MAI. Since that time, Stan Rowland has continued to adapt this ministry, as our International Director, to a multitude of cultures throughout the world.

The Community Health Evangelism strategy is now highly transferrable, backed with lesson plans on over 500 topics, which can be taught through a problem-centered, action-oriented, group self-discovery technique. In addition, there are 17 picture books which even a semi-literate Community Health Evangelism worker can effectively use to communicate his message as he visits in the homes of his neighbors and friends.

I believe you will be stirred and impressed by the adaptability of this plan to an amazing variety of circumstances. Each adaptation, however, retains the core elements of the prevention of problems before they begin, community ownership and sustainability, and multiplication of leaders and workers to carry out the work of ministering to both physical and spiritual needs. Community Health Evangelism is a marvelous tool for one-on-one evangelism. It has led to the salvation and discipleship of 135,000 people over a tenyear period at MAI.

CHE is also an effective tool for church planting. Though our preference is to build up the available churches in the area in which we are working, MAI has planted nearly a church a week over the last ten years in areas where there were no churches, using the CHE strategy. Whether you are a trained medical worker, a public health worker, a missions pastor, one preparing to go to the field, one who has worked long in the field and is looking for a fresh approach, or simply one who is interested in missions and open to whatever God has for you, this book is a "must read." In a world where we unwittingly disempower the people we care for with welfare style relief programs, you will find this a refreshing and vital antidote.

> Paul Calhoun, M.D. Executive Director Medical Ambassadors International