

Samaritan's Purse Humanitarian Aid to Mozambique, Africa

By Gene Erb

While traveling through Korea in the 1960's, Mr. Bob Pierce wrote these words in his Bible: "Let my heart be broken with the things that break the heart of God." He wrote these words after visiting suffering children on the island of Koje-do. This impassioned prayer, and his desire to help stop suffering throughout the world, is what led him to begin the ministry of Samaritan's Purse in 1970. His mission was to meet the emergency needs in crisis areas through working with existing evangelical mission agencies and national churches. After traveling extensively, he dedicated himself to finding and supporting other like-minded Christians who were caring for similar victims throughout the world.

In 1973, Bob met his eventual successor, Franklin Graham, who joined in Bob's mission to serve Christ by meeting the spiritual and physical needs of those who had experienced some form of disaster. Bob died in 1978, and one year later Franklin took over the organization as President and Chairman of the Board, a position he continues to hold today.

"Go and do likewise," Christ commanded after explaining the parable of the Good Samaritan in Luke 10. Samaritan's Purse travels the world's highways looking for disaster victims along the way. As servants of our Lord, Samaritan's Purse offers more than help – they offer hope and they share the good news of the only One who can bring true peace: Jesus Christ, the Prince of Peace.

While I was attending the 2018 CPF annual meeting in Flat Rock, North Carolina, I listened to a presentation by Dr. Elliott Tenpenny, Medical Director for Samaritan's Purse (SP). He talked about the SP mission and their need for pharmacists to consider joining the Disaster Assistance and Relief Team

(DART). I was struck by his commitment to providing care to disaster victims while spreading the Word of our Lord Jesus Christ. It was then that I decided to submit my application to join the Team. After a very lengthy interview process including two interviews, an application with references, a national background check, a statement of faith, and a commitment to the Christian Code of Conduct, my application was approved. The next step was one week of instruction at the SP Training Center in Blowing Rock, North Carolina, which I completed in early March, 2019. I was now ready to be deployed.

On March 15, 2019, Cyclone Idai passed through Malawi, Zimbabwe, and Mozambique causing complete devastation to these three countries. Many lives were lost, homes were washed away, and villages/cities were

businesses, and government offices. DART was contacted to assist, along with other international non-governmental organizations, with providing water, food, shelter, and medical care.

On March 27, 2019, I was contacted to be deployed to Mozambique. This would be my first deployment as a member of DART, so I had mixed emotions: I was excited about serving our Lord and those impacted by the cyclone, but also apprehensive about what I might experience in a country that had suffered such devastation – a country that I had never visited before. But when I recalled Proverbs 3:5-6 [KJV], "Trust in the LORD with all thine heart; and lean not unto thine own understanding. In all thy ways acknowledge him, and he shall direct thy paths", I knew I was in safe hands.

Three days later at 5:00 AM on March



completely cut off from the outside world. This natural disaster greatly impacted over one million people. Most of the country of Mozambique was flooded with major damage and complete power outages. All road transportation was blocked and communication was cut off to most of the country. There was extensive damage to all healthcare facilities,

31, I was climbing aboard an airplane at the Lynchburg, Virginia airport, on my way to join the DART that had been established in Mozambique. My travel time lasted 42 hours as I flew from Lynchburg to JFK Airport in New York, then to Johannesburg, South Africa, then a short flight to Beira, Mozambique. I was then transported by car (along with three other Team

members who arrived at the same time) to SP Headquarters (HQ). For this mission, HQ had been established in a vacant building in Beira, Mozambique. We arrived to HQ at 10:00 PM on Monday night. The three other people I had met on the ride to HQ included an OR Nurse, an OB/GYN Physician, and an Anesthesiologist. Early the next morning, the 4 of us climbed aboard a helicopter and were taken to the remote village of Buzi, the designated location for the Samaritan's Purse Emergency Field Hospital (EFH). The EFH was designed for a 40-bed inpatient facility, an OR/Labor and Delivery room, an outpatient clinic, a medical laboratory, and a pharmacy. It was later expanded to include a post-delivery unit and a pediatric unit.

The helicopter that took us to Buzi was Russian-made and piloted by two friendly Russian pilots. The chopper was also loaded with supplies to be delivered to a Japanese health clinic set up at another remote village along the way to Buzi. It was inspiring to see people from other (sometimes hostile) countries come together and help others in time of need. We landed and unloaded the supplies, then picked up an elderly gentleman diagnosed with tetanus which he contracted while being stranded for 3 days on the tin roof of a hut. He had been waiting for the flood water to recede and for help to arrive. After a 30-minute helicopter ride, we arrived in the village of Buzi and landed on an old soccer field. There we were met by other SP Team members already on the ground. We rode in the back of a pickup truck for about one mile down a dirt road, then hiked the rest of the way to the base camp location.

Base camp was set up at on old two-story hotel (roofless) that had been nicely cleaned up after the flood. We then hiked the three-fourths mile to the EFH location and began helping to set up the tents that would become the EFH. The plan was to create an EFH to begin treating injuries and illnesses, and to deliver babies within 72 hours. In addition to the twelve medical personnel, there were about fifteen

operational support team members responsible for establishing communication, and supplying water and food for the Team. Within the first three days of opening, the OR staff and one OB/GYN doctor delivered 12 babies, most of whom were HIV positive. The outpatient clinic opened at 7:00 AM and we began seeing over 100 patients a day. There were a variety of ailments and wounds to be treated such as infections, malaria, intestinal parasites, fungus, dehydration, and malnutrition. Cholera was beginning to be seen in the northern part of the country and was quickly working its way south.

Over the next few days we were pleased to see the arrival of additional medical people, including nurses, a physician assistant, and an additional physician. Several local interpreters were hired from the community and assigned to each area of the hospital. Once the tents were in place, I (the only pharmacist) was tasked with setting up the pharmacy to serve both the inpatients and outpatients. I was assigned a local interpreter named Alena, who was a true God-send. She had been a local village schoolteacher and she obviously had the respect of the other villagers who came in as patients. Her story of the flood was unimaginable. Along with several others, she sat on top of a two-story bank building waiting 3 days for help before US Air Force helicopters began dropping bags of food. As the food landed in the flooded village, those who could swim retrieved the bags, while avoiding the crocodiles, snakes and other living creatures that were also looking for food. It sounds like a fictional adventure story, but it was real. I asked how she was able to survive, and she said, "By prayers to Jesus Christ".

The DART operations staff developed a relationship with the local pastors who helped distribute the SP blue tarps, a highly sought-after item used for shelter. The tarps also helped create a system to purify water for drinking and assisted in providing support for the EFH operations. Samaritan's Purse had

established an international lifeline and worked closely with other non-governmental organizations from many other countries, all working together under the World Health Organization. Samaritan's Purse used their DC-8 cargo plane and their own jet to transport people and supplies into the country for distribution. Several tons of tarps, blankets, water filters, and other supplies were sent by small boat up the rivers to villages that were left devastated by the storm. Samaritan's Purse staff worked alongside local pastors to spread the Word of Jesus and to bring hope to those who survived the storm.

As the days passed, more DART members began to arrive and our operations team members were able to set up generators at the hotel where we were staying, which gave us a few hours of electricity and running water for showering at night. The long lines of patients seeking help never ended; but the presence of Jesus could be felt everywhere, and the enthusiasm of the DART members continued as we provided essential healthcare while spreading the Word of Jesus.

Unfortunately, I became ill during the trip (perhaps from dehydration and exhaustion) and it was necessary for me to leave before my 30-day commitment was over. I was soon replaced by another DART Pharmacist. When the time came for me to leave Mozambique, I left as a different – and humbled – person.

What I witnessed was a country devastated by nature's wrath. I saw children with no families, and families with no homes or possessions; yet at the same time, they were encouraged by people from all over the world who came to their aid, bringing the hope that one day they will be able to rebuild and continue their lives. I saw the excitement of the local villagers when they were finally able to access clean drinking water "right from the faucet." The spirit of the local village people and their faith in Jesus Christ never ceased, and they thanked Him every day for the blessings and help

they received from all the aid workers. The DART members – while exhausted from the heat, workload, and physical challenges – never stopped giving and never stopped praying with (and for) the people of Mozambique. I felt the presence of Jesus everywhere. Team members could be seen throughout the EFH praying with villagers, and also praying in groups as babies were born and ailments were treated. They worked from early in the morning until late at night, and they responded in the middle of the night to emergencies. They prayed together daily and thanked God for the privilege of serving Him and others. The team members always found time for fellowship and singing. Each morning began with a group devotional before we left for the day's work.

The Christian faith of the Buzi people was as strong as ever, celebrating the

answers to their prayers that someone would come to assist in rebuilding their community. Organizations from all over the world worked together in a land that was strange to all of us. There were no language barriers, no political barriers, no race or religious barriers; all the barriers were replaced by the desire of one human being to help another who was desperately in need... all in the name of Jesus.

Over the 5 weeks that SP staffed the EFH, they treated over 5000 patients, transported over 90 metric tons of supplies, delivered 40 babies (including 17 C-sections), and dispensed over 10,000 prescriptions. During the transition, SP staff instructed local healthcare providers on how to use and maintain the medical equipment. At the end of SP's commitment in Buzi, the EFH and all the supplies were turned over to the

local Ministry of Health to continue providing services to the local population.

While my first SP deployment ended sooner than I planned, I saw the amazing work of Our Lord and Savior in Mozambique. Through our trust in the Lord, He used our hands and feet and He directed our paths in successfully accomplishing Bob Pierce's dream: to administer help to disaster victims in a far-off land and to spread the good news of Jesus. I encourage everyone to visit the Samaritan's Purse website and see the work being done for victims of natural disasters while sharing the Gospel of Jesus Christ. You may also email me at geneerb47@gmail.com if you'd like more information about serving the Lord through Pharmacy and the Disaster Assistance Relief Team at Samaritan's Purse.



Gene Erb is a retired Pharmacist and Hospital Administrator. His experience has been in retail, hospital and long term care pharmacy, and as a senior level hospital administrator in Virginia. He received his BS Degree in Pharmacy from the VCU Medical College of Virginia, a Masters of Administration from the University of Lynchburg and his Pharm.D. from Mercer University. He is a retired Army Lieutenant Colonel, and resides in Forest, Virginia, with his wife Glennie. Gene has been active with CPFI for many years having served on the Board of Directors and Finance Committee. He has received multiple awards from his professional organizations and local community organizations for his volunteerism, and he continues to serve the Lord through active participation in several community organizations, and as an active member of his local church.

Heart for Honduras By Kelsey Merlo

BACKGROUND

Heart for Honduras is a Christian organization established in 1998 by my father-in-law, who is originally from San Pedro Sula, Honduras and is now a pastor in Aurora, IL. He returned home after Hurricane Mitch devastated the country. That year marked the beginning of an incredible journey as a medical mission team was born. This mission team focuses on sustainability within the community and the trip leaders develop every plan with ethical decision-making in mind.

In 2018, *Heart for Honduras* began serving a rural mountain village in Buenos Aires, Honduras. This community is extremely remote, and because of that, there are no doctors willing to live or work so high up the mountain which makes the medical needs of this community quite evident. This past June, our team committed to continue working in Buenos Aires. Throughout

