

# SIM NOW

January 2022



**INSIDE**

Medical ministries around the world

**FACT:**  
**SIM has a global  
healthcare  
network**

## FROM THE DIRECTOR'S DESK



**JOHN DENBOK**  
Executive Director  
SIM Canada

**A few months ago, I was meeting with the SIM U.S.A Director, to do some strategic thinking. He mentioned a statistic that stopped me in my tracks.**

...that SIM has more than 40 healthcare teams operating around the globe. An amazing statistic when you think about it.

And that means there are endless service opportunities to minister for Christ in the healthcare setting. Almost any healthcare skill is needed somewhere around the SIM-world right now. Check out the chart of opportunities on page 6 and 7. Do you know someone in your family or church congregation - even you - that can be challenged to pray about using their healthcare skills to serve in mission? If you cannot go will you pray for more workers to feel led to serve Him? Will you

commit to support a healthcare worker in prayer or maybe finances? Donating to the 'Work of the Mission' (Project 084700) enables us to process and train workers for service or if you feel led to support a specific healthcare worker you can donate to an 'unlisted missionary' and we will assign your gift to a healthcare worker in need of financial support.

As you read the stories of what God is doing in and through these healthcare workers, I think, like me, you will see what a tremendous opportunity the role of health practitioners have in reaching the unreached for Christ, demonstrating God's love and compassion in tangible ways.

### **We're Searching**

In our most recent Board Meeting I announced to the Board that I would like to step away from the Executive Director's role while remaining an active member of SIM. I have been in the role for 10 years, and

I believe now is the time for someone new to step into the role with fresh ideas and vision. I have thoroughly enjoyed leading SIM Canada. It has certainly been challenging but also rewarding.

A search committee has been set up to find my replacement. The intent is to have the new Director in place by July 2022.

Will you pray with us that God leads us to the right candidate?

### **And a BIG thank you**




This past month we have asked donors who are regular online supporters to transition to a new donation platform. Actually it's an existing platform that we needed to step away from a few years back due to some significant computer related issues affecting reliability.

We now feel that we can fully support the platform once again, and provide a better service to you - and save some processing fees. I just wanted to thank those who have assisted us in making this change. It is certainly very much appreciated. ■



Canadian Centre for  
Christian Charities  
ACCREDITED MEMBER





# When God leads and we go, lives are impacted.

## UNLIMITED NEEDS - FROM SOUTH SUDAN TO CANADA

**In South Sudan hundreds walk from the surrounding area and refugee camps to wait for the doors of the Grieve Memorial Clinic to be opened.**

They wait to be seen for ailments like malaria, diarrhea, malnutrition, and respiratory illness and the team of doctors, nurses, pharmacists, and community health workers serve together to meet these needs. My husband and I served in South Sudan for two and a half years and, as a nurse, my main role was to oversee the Community Health program. My focus was training the clinic staff in organizing outreaches to the neighbouring villages, providing education on common health issues, and sharing the Good News of Jesus Christ.

At the end of 2020, we returned to Canada and began work at SIM Canada's headquarters in Toronto. I was unsure how my role would fit

into "Healthcare Ministry". I had just moved from a place where ministry included things like walking to neighbouring villages, working alongside the local staff at the clinic and completing inventory counts in the pharmacy. How would working in the office compare? One doesn't think of serving in the sending office when applying to the mission. But since joining the office team and being in the role of Health Coordinator for SIM Canada, I have experienced God's leading as I serve our missionaries.

In my role, I meet applicants at the beginning of their journey and walk with them as they move along the process through to their departure and beyond. It's so much more than simply going over vaccination records and which anti-malaria medication to take. I've helped missionaries on the field connect with counselling when they have felt alone and discouraged. I've been privileged to connect them to the Missionary Health Institute here in Toronto when they have been

struggling with physical health issues. And I've prayed over our missionaries by name as I join in on Member Care meetings. It's an honour to support our missionaries in a way that, by extension, helps them to thrive in ministry.

What a joy it's been to experience again how God uses the gifts and abilities He's given us when we submit our lives to Him; whether that be in the dust of South Sudan or the busyness of Toronto. I'm serving in a place where I did not expect "Healthcare Ministry" and yet here I am, amazed at how He is at work. God is good.

*"Each of you should use whatever gift you have received to serve others, as faithful stewards of God's grace in its various forms. If anyone speaks, they should do so as one who speaks the very words of God. If anyone serves, they should do so with the strength God provides, so that in all things God may be praised through Jesus Christ. To him be the glory and the power for ever and ever. Amen."*

1 Peter 4:10-11. ■



**By Rachel Stanley**  
Nurse, Canada,

To support the work of home staff, go to [donations.sim.ca/projects/WorkoftheMission](https://donations.sim.ca/projects/WorkoftheMission)

### Work of the Mission

#### PROJECT: CA 084700

SIM Canada currently have more than 160 missionaries ministering to people's needs - both physically and spiritually - all over the world. In this project, SIM applies your gift where it is most needed. For example, to help to train, teach and orient new missionaries and provide on-going support to each one of them. Your gift will also help to recruit, equip and mobilize more people for mission.

# Encouraging Malawians to be the hands and feet of God



## MALAWI - A NURSE'S PERSPECTIVE



By Shannon Brink  
Nurse - Malawi

To support the Brinks, go to [donations.sim.ca/missionaries/Brink](https://donations.sim.ca/missionaries/Brink)

**After nursing for over 15 years in Canada, my husband and I joined the staff at Partners in Hope in Lilongwe to help them grow their outreach.**

Sometimes it's not always clear how to do that! I've journeyed with many of the nursing staff over the last 2.5 years as we have faced COVID together in tents, cared for increasingly complex patients with limited resources, and now as they have started to provide surgical care for the most vulnerable Malawians for free in partnership with another organization. As they continue to try and provide holistic care by meeting medical and spiritual needs they often need support in more practical ways through education, developing documentation, policies, and trainings. I had the joy to lead the

nursing leadership to develop an orientation training program for care aids and a manual for future care aid hires. Care aides at Partners in Hope are heavily relied upon and often have no medical training so it all needs to be provided by Partners in Hope. As they continue to expand services, it is important that their staff are consistently trained in excellent care and challenged to see their work as a ministry. Many of the care aides we trained expressed how honoured they felt to have their own training and how much they felt encouraged to keep improving in their work to glorify God and serve their patients.

Similarly, my husband has been working with the leadership to identify all the technological needs of the centre to improve all their departments and strengthen their infrastructure. As an IT specialist and with his business administration gifting and education, he has been able to come alongside every department and help them see

ways to improve.

Even more exciting has been the opportunity to preach at the chapel and support the chaplain at Partners in Hope by leading a bible study with a number of staff to strengthen their ability to witness.

Recently, one of the nurses in the Bible study felt challenged to apply what she had been learning. A surgical patient came whose blood pressure was too high for surgery. As the nurse spent time with her patient, the patient shared how terrified she was about the surgery. After praying with her and encouraging her to sing hymns and songs to God, the patient soon stated "the fear, it's gone!" By the next day her blood pressure was down and she was visibly at peace and the surgery was able to happen.

Without the spiritual and physical care of Partners in Hope she would have had no access to the surgical repairs she needed. Praise be to God! ■





# It took a team to care for Nestor

...an evangelist, Hospital staff, volunteers, SIM missionary workers, as well as other patients

## BENIN - HIV & AIDS WORKER

### Nestor arrived at the Alafia clinic, after testing positive for HIV. He began on antiretroviral therapy to treat his HIV.

Nestor clearly enjoyed talking with our evangelist, Pascal, and spent many hours in his office. At his follow up appointment, he gave his life to Christ.

When Nestor missed his next appointment, we called many times with no response. Almost a month later he answered Pascal's call and said that he was very ill. He explained how we could find him, saying that he had been too weak to pick up his phone.

Nestor had no family or friends willing to care for him. His landlord had previously gone to the police to say that his tenant was dying and needed help. Their response was to just let him die. Thankfully the landlord had continued to feed and care for Nestor but was noticeably relieved when we arrived. He had

given Nestor a small room with no door, beside a building construction site. There was a man outside, literally waiting for Nestor to die so that he could take his possessions.

Nestor had numerous infections to his right leg that had become septic. Moving his leg even slightly caused him extreme pain.

After giving him the pain killers we had with us and gently wrapping the infections with pads, we carried him to the SIM vehicle to transport him back to the hospital in Bembéréké.

One of our Alafia volunteers cared for Nestor for close to two months during his hospital stay. She brought him his meals, helped with his basic needs, and went to the pharmacy for his medications. She went above and beyond what was expected of a volunteer as she was also in the middle of harvesting her crops.

Clinic staff had crutches made by a local carpenter when Nestor was discharged from the

hospital. With the help of another volunteer and clinic staff he now receives dressing changes every 2-4 days.

The evangelist often comes with us on home visits to study the Bible with him. Nestor is eager to learn more about Christ and is thankful for our visits. He has begun to put weight on his affected leg and his wounds are healing slowly but surely. He is starting to gain back the 10 kg he lost since the infections began.

It is not often that we have a patient completely dependent on us for many months with no help from friends or family. It was encouraging to see how so many were willing to help Nestor get back on his feet. Alafia staff, our volunteers, SIM missionary workers, and other patients on his ward worked together to help him in his time of need.

...and what is really special? This is just one of many examples of Christ's love in action. It is a privilege to be part of what God is doing through the ministries of the Alafia Clinic. ■



**By Miriam Stirling**  
Nurse at Alafia Clinic  
Bembéréké Hospital

To support this project go to [donations.sim.ca/projects/HopeforAIDS](https://donations.sim.ca/projects/HopeforAIDS)

### Hope for AIDS Project PROJECT: BJ 093234

The Alafia project aims to provide holistic care to People Living with HIV (PLHIV) and their families in order to improve their living conditions, reduce stigmatization within their community and demonstrate the love of God.

The project has four key areas of focus: Treatment of people living with HIV, prevention and education, enabling volunteers, and Holistic Care.

# Know someone in healthcare who

To find out more email [canada.goteam@sim.org](mailto:canada.goteam@sim.org) or go to [www.sim.org](http://www.sim.org)

It's one thing to know someone, another to challenge them to use their skills in service for God. but be assured that SIM has a place for them to serve.

The application process is relatively straightforward and the good thing is that applicants are guided through the whole acceptance and placement process by a coach. Then when they get to their place of service the coach will be checking in on them from time to time to see how they are going.

Serving in mission can be very stressful at times and it's good to know that they can turn to their coach with questions or support in the tough times. ■

## SPECIALISTS NEEDED

SIM accepts specialists of all kinds, including but not limited to:

- |                       |                                |                     |
|-----------------------|--------------------------------|---------------------|
| Audiologists          | HIV & AIDS Specialists         | Orthopedists        |
| Cardiologists         | Infectious Disease Specialists | Pediatric Surgeons  |
| Emergency Specialists | Neonatologists                 | Plastic Surgeons    |
| ENTs                  | Neurologists                   | Speech Pathologists |
| Fistula Specialists   | Oncologists                    | Urologists          |

## NON-MEDICAL WORKERS NEEDED

- |                         |                           |                            |
|-------------------------|---------------------------|----------------------------|
| Accountants             | Disciplers                | Maintenance Engineers      |
| Administrators          | Electricians              | Media Specialists          |
| Chaplains / Evangelists | Food Services             | Member Care Personnel      |
| Church Planters         | Guest Hosts / Hospitality | Refugee Workers            |
| Construction Workers    | IT Specialists            | Trauma Healing Specialists |

## Check out a video report from 3 SIM healthcare workers

Want to hear about SIM's healthcare ministries first hand? Go to [vimeo.com/537531086](http://vimeo.com/537531086) and watch a live report from 3 workers.



## WE SERVE AT MORE THAN 20 HOSPITALS, IN 13 COUNTRIES AND COUNTLESS CLINICS...

- |                |                             |              |                    |                |           |
|----------------|-----------------------------|--------------|--------------------|----------------|-----------|
| ■ ANGOLA       | - Lubango<br>- Rio da Huila | ■ KENYA      | - Kijabe           | ■ NIGERIA      | - Egbe    |
| ■ BANGLADESH   | - Dinajpur                  | ■ LIBERIA    | - ELWA             |                | - Jos     |
| ■ BENIN        | - Bembéréké                 | ■ MADAGASCAR | - Mandritsara      |                | - Kano    |
| ■ BURKINA FASO | - Mahadaga<br>- Piela       | ■ MALAWI     | - Lilongwe         | ■ SOUTH AFRICA | - Mseleni |
| ■ INDIA        | - Duncan<br>- Prem Sewa     | ■ NEPAL      | - Tansen           | ■ SOUTH SUDAN  | - Doro    |
|                |                             | ■ NIGER      | - Danja<br>- Galmi | ■ ZAMBIA       | - Mukinge |



For a copy of the Hospital Booklet email

[canada.goteam@sim.org](mailto:canada.goteam@sim.org) 6

# wants to make an eternal impact?

[sim.ca/contact](http://sim.ca/contact)

Other opportunities available; not limited to locations and expertise listed here

	ANGOLA	BANGLADESH	BENIN	BOLIVIA	ETHIOPIA	GHANA	INDIA	INDONESIA	KENYA	LIBERIA	MADAGASCAR	MALAWI	MIDDLE EAST	NEPAL	NIGER	NIGERIA	NORTH AFRICA	PAKISTAN	PARAGUAY	PERU	SENEGAL	SOUTH SUDAN	THAILAND	ZAMBIA	OTHER		
Anesthesiologist	●		●		●			●	●	●	●			●	●	●		●		●				●			
Biomedical Engineer	●		●				●	●	●	●				●	●			●							●		
Community Health Worker	●	●		●		●	●			●			●	●	●	●		●	●				●		●		
Dentist	●	●	●	●			●		●	●				●	●	●		●	●	●	●					●	
Hospital Administrator	●						●	●	●	●	●		●	●	●	●		●					●		●		
Lab Technician			●							●	●			●	●	●		●							●		
Midwife			●				●				●			●	●	●		●	●				●		●		
Nurse	●		●		●		●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
<i>RN / BSN</i>	●		●		●		●			●	●	●	●	●	●	●		●		●	●	●	●		●		
<i>Research Nurse</i>							●			●				●	●	●							●				
<i>Nurse Anesthetist</i>	●		●						●	●	●	●		●	●	●		●							●		
<i>Nurse Educator</i>	●		●				●	●	●	●	●		●	●	●	●		●		●			●		●		
<i>Nurse Practitioner</i>	●						●			●		●	●	●	●	●		●	●	●	●	●	●		●		
Nutritionist	●	●					●			●				●	●	●		●	●		●	●	●			●	
Occupational Therapist	●	●			●		●		●	●	●		●	●	●	●	●	●	●	●	●					●	
Ophthalmologist	●			●	●		●	●		●				●	●	●		●	●	●							
Optometrist		●					●			●				●	●	●		●	●	●			●			●	
Palliative Care					●		●		●					●	●		●		●								
Pharmacist	●		●							●	●	●		●	●	●		●		●		●			●		
Physical Therapist	●	●		●	●		●		●	●	●		●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Physician Assistant	●						●			●		●			●	●		●	●		●	●	●				
Physician	●		●	●	●		●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
<i>Physician, General or Family Practice</i>	●				●		●		●	●	●	●		●	●	●		●	●	●	●	●	●		●	●	
<i>Emergency Physician</i>	●		●				●		●	●				●	●			●		●					●		
<i>Ob-Gyn</i>	●		●		●		●		●	●	●			●	●	●		●	●	●			●		●	●	
<i>Pediatrician</i>	●		●		●		●	●	●	●	●	●		●	●	●		●	●	●	●	●	●	●	●	●	
<i>Surgeon</i>	●				●		●	●		●	●			●	●	●		●		●					●		
<i>Medical Student</i>	●			●			●			●	●			●	●	●		●	●		●				●		
<i>Medical Resident</i>	●			●			●		●	●				●	●	●		●	●				●		●		
Psychiatrist		●			●		●			●				●	●			●		●				●		●	
Psychologist		●		●	●					●				●	●			●		●				●		●	
Public Health Educator	●	●			●	●	●	●		●				●	●	●		●					●			●	
Radiologist	●		●				●	●	●	●				●	●			●		●							



# Satellite fistula clinics change women's lives



## THE DEMOCRATIC REPUBLIC OF THE CONGO



**By Dr. Claude**  
Surgeon, Rwankole  
Hospital, DRC

To support this work  
go to  
[donations.sim.ca/  
projects/Rwankole  
HospitalFistulaProject](https://donations.sim.ca/projects/RwankoleHospitalFistulaProject)

### Rwankole Hospital Fistula Project

**PROJECT: CA 509009**  
Vaginal fistulas  
profoundly affect a woman's  
physical, emotional and  
social well-being.  
According to the United  
Nations, there are an  
estimated 40,000 cases of  
fistulas in the DRC.

The goal of this project is  
to provide surgeries for 100  
women per year who suffer  
from vaginal fistulas and  
provide compassion, and  
exposure to the gospel.

**Travel into the north  
of the DRC is risky  
business. Sadly,  
terrorist activity has  
made any trip  
hazardous (at best)  
for locals and visitors  
alike in any area  
north of Bunia.**

This means that women in  
need of fistula surgeries who  
may have normally made the trip  
south to Rwankole Hospital in  
Bunia choose not to come,  
despite the knowledge that the  
fistula surgeries they need would  
change their lives. So many  
women are shunned by their  
husbands, families and their  
communities due to their fistula  
problem (leaking urine, feces or  
both) mainly caused through  
difficult childbirths.

So, through the  
encouragement of SIM Canada  
and after discussions with Dr.  
Claude (the fistula surgeon at  
Rwankole Hospital) a plan was

hatched. If the women could not  
get to Bunia then the treatment  
needed to come to them - to fly  
(thanks to MAF) to Mahagi on the  
border of the DRC and Uganda,  
and perform surgeries at the  
local Hospital.

A media campaign promoted  
the opportunity to the northern  
communities, encouraging  
women in need of fistula surgery  
to register. Meanwhile Dr.  
Claude, a nurse and an  
anesthesiologist prayed and  
prepared for the visit.

The outreach clinics at Mahagi  
Hospital took place successfully  
in November. On arrival, the  
team were welcomed by the  
medical staff at Mahagi Hospital.

In all 44 patients responded to  
the media campaign and  
following a consult, 36 were  
eligible for surgery. Of these, 30  
fistula surgeries were performed  
and 6 other patients were asked  
to return for their surgeries next  
year. As result, 25 patients were  
cured, 1 other had significant  
improvement and 4 failed,  
requiring further surgeries next

year, due to the complexity of  
their fistulas.

All the patients received a care  
package comprising food and a  
hygiene kit as well as some  
needed bedside trauma  
counseling.

After their stay in Hospital  
each patient received assistance  
with their transportation needs  
back to their communities.

These surgeries change  
women's lives. To see the  
immediate change in the outlook  
of these women who would not  
have been able to travel to Bunia  
for treatment was a huge  
blessing to the caregivers. To  
provide God-centered care was an  
honour...and praise God that the  
Lord kept all those involved safe  
in the process. ■

### Pray

Please pray for

- Dr. Claude who contracted COVID and is slowly recuperating
- more qualified surgeons, nurses and anesthesiologists for Rwankole Hospital
- for peace to return to the Northern regions of the DRC.





"Do you mean that Scripture is for us too?"

## ANGOLA - MINISTERING TO THE REJECTED

**One of Audrey's main roles is to help women who arrive at CEML with obstetric fistula. Canadians don't think of giving birth as dangerous, although it once was so even in Canada.**

But pregnancy and childbirth continue to be perilous in Angola. Many women have had difficult deliveries, are unable to access suitable medical care and have ended up with terrible damage. Fistula patients are usually rejected by their communities and families, since they are constantly leaking urine or faeces, and the smell is overpowering. They arrive ashamed and won't look you in the face. The CEML hospital is the only centre in the southern part of Angola where surgery can repair the damage.

The women are just ecstatic with joy and relief when they are

healed! The possibility of a cure has spread by word of mouth, and we have developed an outreach team of Angolan nurses who go into the community to clinics, hospitals, churches, schools and anywhere they get invited. A radio station is now running a weekly talk show on the subject. Even many health professionals have no idea why so many women suffer with fistulas.

Laurinda and Rosalina received fistula repair surgery at no cost at the CEML Hospital. After fistula surgery, they need Caesarian sections for subsequent births. We have a grant program specifically for this purpose. Both became precious to Audrey and she was able to visit them in their home village.

Audrey's translator and literacy teacher, Camia, comes on Fridays to the patient village at our CEML Hospital to help her communicate with the many Nyaneka fistula sufferers who don't speak Portuguese.

Maria, one of the Nyaneka

came with obstetric fistula, told church a few times, but they only spoke Portuguese. She couldn't understand anything and so stopped going. Camia was able to read Scripture to her in her own language. Maria was just thrilled and said, do you mean it's for us too? Yes, dear lady, the Gospel is for you too! Maria now has a glorious smile! ■



**By Audrey Henderson**  
Nurse - CEML Hospital, Angola

**CEML - Hospital Quality Sustaining fund**

**PROJECT: AO 094381**

The CEML Hospital in Lubango, in part staffed by SIM missionaries providing vital services in the south of Angola. Providing quality health care requires infrastructure that works reliably, medications that arrive reliably, and ongoing upgrades to medical equipment. This project provides funds for these needs and supplements ongoing training.

# Providing hope for people living in a nightmare



## PHYSIOTHERAPY IN SOUTH ASIA

Edited from an article written by Tianna Haas in South Asia



By Ingrid

Physiotherapist,  
South Asia

To support this project go to [donations.sim.ca/projects/WestDhakaUrbanRenewal](https://donations.sim.ca/projects/WestDhakaUrbanRenewal)

### West Dhaka Urban Renewal

**PROJECT: BD 098435**

This project reaches out to a large slum community on the western outskirts of Dhaka, the capital city of some 16 million people. It aims to provide a range of services that will improve the lives of the people. The vision is to plant 3 churches by 2025. This project Specific objectives include three non-formal primary schools, adult literacy groups, physiotherapy services, community health awareness and simple health care.

**Though COVID-19 in South Asia prevented Ingrid from doing her usual physiotherapy, she continued to use her gifts to treat a patient through WhatsApp.**

Ingrid provides home-based physiotherapy with an SIM ministry that enriches lives through spiritual and physical care. She and her husband have served in South Asia for 15 years.

Before COVID-19, Ingrid visited and worked with children with disabilities twice a week. She makes a difference in the lives of a number of children and their families.

But her new telehealth patient did not fit this demographic. An acquaintance of Ingrid's contacted her when the shutdown began and asked if Ingrid could treat her father who had recently been discharged from the hospital after a stroke.

Ingrid met with him over video, although it was her first experience treating a stroke patient through telehealth. Her previous consultations focused on orthopaedic therapy rather than stroke rehabilitation. Though it is not an ideal venue, it helps close long distances and bypass traffic complications through the crowded city – which can take two hours to cross.

The sessions required four people: the patient, his son, another family member to hold the phone, and Ingrid. The therapy occurred five times a week. Ingrid said: "I added more difficult exercises as the patient progressed. Some days I reviewed the previous exercises to make sure they were being done correctly."

The meetings differed from Ingrid's customary work, but during the pandemic, little remained the same. Fortunately, the Lord equipped Ingrid with adaptability and a heart for the hurting.

Ingrid said: "Doing things by

telehealth took about double the time as in person, but the man received physio during a crucial period of his recovery."

Ingrid saw participation from family members and improvement in the patient. She said: "The son wrote down the exercises in a notebook and did them with his father once or twice a day and the father made great progress."

Neil also met with people using WhatsApp who were suffering from various illnesses, and prayed for their healing.

They adjusted to ministry and creatively enacted the Great Commission through technology.

After a short time in Canada they have returned to South Asia and are seeking for God's leading to serve in another location. ■

### Pray

- For more physio and occupational therapists to join SIM to minister to those in physical need as well introduce patients to the Gospel
- For Neil and Ingrid to find the right location for future ministry



# 2-year old burn victim receives loving care from her cousin

## NIGERIA -SEEING GOD'S COMPASSION THROUGH OTHERS

**Okiki is a two year old with deep burns on her face and hands. Her mother had burns much worse, covering more than 30% of her body.**

Her four year old brother didn't survive the accidental explosion of gasoline in their house. Both Okiki and her mother were brought to Egbe Hospital in rural Nigeria after 24 hours of receiving poor care elsewhere.

Treatment for Okiki was

painful as she endured a makeshift apparatus used to keep her hands elevated while she slept.

When entering the unit the next day I saw her young cousin Sunday gently feeding Oiki her soup and wiping her mouth between bites. Sunday was engrossed in his job, speaking quiet words to her while he fed her and gave her water to drink.

Okiki was at Egbe Hospital many days while she continued to heal. Sunday did not leave her side in all that time.

I love coming upon them sitting in the hospital yard playing or eating fruit. I love to

see how she watches him with grave little 2 year old eyes as he swats at cashew nuts in the tree or plays with a toy car for her entertainment. God's grace is boundless.

This is just one story of more than 15,000 patients seen at Egbe Hospital each year who are served and loved by a team of missionary workers and Nigerian medical professionals who are providing exceptional health care in a rural setting. ■

### Pray

- for the work of revitalizing the Nurses Training buildings
- for Nurse Trainers and a maintenance foreman



**By Betsie Champion-Smith**  
Project Manager

To support this project go to [donations.sim.ca/projects/ECWAHospitalEgbeRevitalizationProject](https://donations.sim.ca/projects/ECWAHospitalEgbeRevitalizationProject)

### Egbe Hospital Revitalization

**PROJECT: NG 096214**  
The aim of this project is to revitalize the ECWA Hospital Egbe to ensure the hospital's sustainability as a leading medical and teaching facility.

The next phase of this project is to support and enhance nurses training by upgrading buildings, dormitories and furnishings.



## Help to the Hidden

Despite the unrest in the country, Hidden Abilities, a ministry to the physically and mentally challenged in Northern Ethiopia, has continued to operate thanks to capable local staff! It is a very tough time economically and emotionally. There are thousands of displaced people pouring into Bahir Dar, many staying with relatives, others in shelters packed to the brim and with the cost of living rising significantly and fewer jobs. ■

### PROJECT ET 092936 - Hidden Abilities Ethiopia

To support this project go to [donations.sim.ca/projects/unlisted-projects](https://donations.sim.ca/projects/unlisted-projects)

- Pray for occupational and physiotherapists to assist the local staff.





Photo by Joe Hepburn on Unsplash

## Will the legacy you leave reflect the life you've lived?

A staggering 60% of all Canadians lack a current up-to-date Will or do not have one at all. If your Will is the last statement you will make, it is important that it be a meaningful one. Many people are not aware of the benefits of good planning, the variety of options available, and the potential tax implications of certain decisions.

Whether you feel your estate is large or small, we are confident that you can benefit from these estate and will planning services.

Advisors and Purpose offer planned giving specialists who can help you think through your decisions regarding your estate and ensure that your estate plan and Will reflect your life, faith and values. These services are free, confidential, there is no obligation, and no one will sell you anything.

Here's what one couple has to say...

*"Thank you for helping us on the right path to completing our estate plan with such wise guidance. We are truly grateful and feel very much at peace with what was accomplished.*

*We are very happy with Advisors with Purpose and have recommended them to our friends."*

TEL: 1.866.336.3315  
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WEB: [www.advisorswithpurpose.ca](http://www.advisorswithpurpose.ca)

### WHY CREATE AN ESTATE PLAN?

- to reduce taxes and fees at death.
- to integrate your worldview.
- to ensure your Will reflects your heart and your values and not simply assume what should be done.
- to help offset taxes that are incurred with RRSPs/RRIFs at end of life.
- to plan correctly for the transfer of a cottage/cabin/vacation property and take into account capital gains taxes.
- to ensure that you have chosen an executor who will be able to complete the job effectively.
- to consider and prepare for special family situations such as a disabled child.
- to look at your investments and consider the best options for distribution whether in your lifetime or in your Will.
- to help ensure your Will promotes family harmony and avoids conflict over family assets, heirlooms, and expectations.
- to prepare and encourage the next generation to be good stewards.
- to help you understand which assets are the best ones to give to charity in your Will should you choose to do so.

 **ADVISORS**  
with **Purpose**