

How Short Term Missions Can Impact

The Local Church for Sustainable Healthcare:

Ghana Case Study

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Introduction: Can a church in a poor and vulnerable community run a sustainable healthcare ministry in her community?

Yes, if the church and short term medical team are well prepared for ministry. Here are the steps we have done in Ghana to enable local churches run sustainable healthcare ministries as result of short term medical teams.

1. Envision the local church that God can use her to share the gospel, disciple and demonstrate the love of God in her community. Most churches in poor and vulnerable communities have an inward looking mentality because of their overwhelming needs. They are used to short term teams coming in to do things for them instead of being empowered to continue ministry after the teams leave.
2. Train the church in wholistic ministry: We encourage pastors to select four other members of their churches to undergo a 10 day training in wholistic ministry. During this training they learn how to practically share the gospel, demonstrate the love of God, use simple project management skills to plan and reach out. This training is critical in helping churches in poor and vulnerable communities to learn that under the Lordship of Jesus God can use them. We require the churches to provide the volunteers to be trained provide a venue, get transport to the venue. Our team provides the trainers, manuals and lunch.
3. Partner with a medical team to come in and train the lay workers in lay medical and lay dental ministry. They do not come to do the work alone but to train the lay workers to continue after they have left. We have partnered with mPower Foundation Inc and have trained the lay workers in vital signs, treating wounds, back problems and lay dental ministry.
4. The pastor and the four other TOTs select the lay workers to be trained using a criteria agreed with the medical team. They have to know English as the language of communication. The training takes about 5 days. Our team and the churches get a suitable venue and contribute towards the tools and equipment needed for ministry. The medical team has skills to pass on.
5. The pastor and church members mobilize the community. They make arrangements for when and where the treatment will be and how much the patients will pay.
6. Our team prepares letters asking for permission to the local government, social welfare department and medical department. Write the letter to show that you want to provide a community clinic for their people.
7. Logistics: teach the lay workers how to get regular supplies of medicine and equipment locally for their outreach. Nurture an attitude of prayer and loving care among the lay workers. Appoint one of them to supervise the team and prepare reports. The fees they collect cover the costs of medicine and supplies.

8. Prepare to pull out and let the lay workers continue the clinic under a local board (inclusive) of the pastor. You should always tell the team that you will leave. This helps them to prepare psychologically and take seriously any training and coaching being offered to them.
9. Establish a support network – a standby nurse to assist, referral to hospital. This helps the lay workers to have the necessary person to get in contact with quickly.

Conclusion: Since 2010 we have ministered to _____ patients. We have had _____ extractions.

