

# Ethiopia Mission Team Report

## **Margaret Zylstra**

Our team had the privilege of serving individuals and families with medical needs in several poor communities in Addis Ababa June 28 through July 5. Through partnership with Ethiopia ACT we worked for 5 days in clinics set up in 3 community locations. ACT serves families in these communities where a member has a major medical diagnosis. By providing gospel centered, wholistic outreach to include



housing and financial assistance, education for children in the household, as well as medical care, these beneficiaries are finding a future out of poverty. Short-term teams assist the ministry by increasing the capacity to provide medical care and through that care identify additional families in need.

The team included 2 physicians, 3 nurses, a respiratory therapist, and non-medical team members. Ethiopian staff included a physician, nurses, a pharmacist, social workers, and translators.

The clinics included triage, physical exams, lab and imaging services, medication distribution, prayer and

spiritual encouragement. Team members also participated in home visits with social workers to conduct additional needs assessment and to deliver medication to homebound patients. Through all these encounters opportunities to share the gospel and pray with and for the Ethiopian people were numerous.

One of the many tangible examples of God's blessings was during the assessment of and fitting for reading glasses for those who needed vision correction. When someone found glasses that helped them read clearly, their joy and gratitude showed in their face! What a privilege for us to witness such a simple example of humble service.

Another evident blessing came through 1<sup>st</sup> Pres members' prayer support through some team illnesses. We were able to travel home comfortably because you prayed for us!

## **Sydney Gallagher**

One of the most meaningful parts of the trip was participating in home visits. On Monday morning and again on Wednesday afternoon, I had the privilege of joining Lou in visiting families in their homes. Our first visit was to a young boy suffering from nasal polyps and experiencing rhonchi. During the visit, we took time to teach him and his family the importance of using his nasal drops and practicing coughing and deep-breathing exercises to aid his recovery. However, the most impactful moment came when we shared the gospel, using translators to help communicate God's love, and then prayed together with the family. It was a powerful reminder that healing encompasses both body and spirit.

Monday afternoon brought a different kind of blessing. I joined a group of pastors and a couple from a PCA church in California to visit the site where a new church and the future headquarters of a reformed denomination are being established. Witnessing how God is expanding His church in Ethiopia filled my heart with gratitude and awe.

On Tuesday and Wednesday, I served in triage at our second clinic location. Interacting with patients as they arrived was both humbling and uplifting. I was especially encouraged by the Ethiopian nurses who translated for me. One nurse in particular was a constant encouragement and even took the time to

teach me a few phrases in Amharic, helping me connect more personally with patients. The joy on their faces whenever I said "thank you" in their language was incredibly moving.

On Wednesday Lou and I conducted another home visit that deeply impacted me. We visited a little boy, and what began as a simple check-in turned into something much deeper. I had two small cross necklaces left in my bag, which I gave to the boy and his mother. When we asked if she needed prayer, she shared her heart with us. With the help of our translator, Amen, we prayed for her. Her gratitude was overwhelming. She walked us out, embraced us multiple times, and that moment remains etched in my memory. She is a single mother raising five children, and I continue to pray for her often. Her strength and vulnerability touched me profoundly.



### **Kathy Jones**

I have come to the realization that poverty in other countries, especially Africa, is much worse than in the US. Listening to peoples' stories in Ethiopia indicate many were dropped off as children to work in the big city with no way to get home and no options. Whole families live in one or two rooms in a mud or tin shed. They often need shelter, food, diapers, and medical help. ACT is well established with good connections to hospitals and the government which facilitates connecting resources to people in need. ACT founder Andy Warren shared one thing that the ministry found that had a profound impact on getting people out of poverty - put one family member through college. The graduate can then get a job which boosts the whole family's financial situation. We saw Ruth, a young woman who had just been hired to work for ACT. Her family had been a beneficiary of ACT help when she was a young child and both Ruth and her sister had completed college. Her family had gone from extreme poverty to both children finishing college - at least partly because of the ACT ministry.



Although I was not a medical provider much of my time was spent working in the pharmacy. A man came looking for sunglasses and the pharmacist said he really needed them. Because they are near the equator a lot of people have cataracts at a younger age than we develop them in the states. I told him we were out, and he started to walk away disappointed. I called him back and gave him mine (which were sort of sporty unisex type). The Ethiopians started whooping and clapping. I was ashamed because they thought I had sacrificed to give him my sunglasses when, in fact, I had multiple pairs at home.

### **Lou Milanesi**

To call this mission trip a life-changing experience would truly be an understatement. From the music at the church service which we attended the morning after we arrived, to the teary-eyed departure as we left members of our new family on Saturday evening, and all the amazing work, interactions and witnessing that went on is overwhelming to me. Considering that I had never met some of the team members, had never been to Africa or on a mission trip, I did not speak Amharic, and was apprehensive whether my being there would add value to the team, the experience was amazing and such a blessing!

I will never forget how well the translators worked with us. We quickly formed a team, and they were extremely patient with me when I struggled to understand them at times. We not only helped but also prayed with so many patients and their families. It is difficult to say which group expressed more gratitude, the patients or the staff that we were working with.





I am very enthusiastic about returning on another medical mission trip to Ethiopia next year. From my experience I now can see more of what I need to bring to ensure that the next trip is even more successful. Let us never forget that we are donating roughly 1 week of our year, we partner with people that are infinitely grateful to have our help, minister to people who are only too happy to have our help and then we come home. The people we are helping do not have this “escape option”. This is where they live and at times struggle to survive. Yes, it is a long plane ride, you will operate outside of your comfort zone, you may face some GI issues, it is not Hawaii, **it is far better!**

“Do nothing from selfishness or empty conceit, but with humility of mind let each of you regard one another as more important than himself; do not merely look out for your own personal interests, but also for the interests of others.” Philippians 2:3-4.

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We are so grateful to 1<sup>st</sup> Presbyterian World Missions for encouraging and supporting the work of short-term mission opportunities.