

THE TRANSFORMATION OF A MISSION HOSPITAL IN CONGO – PART 2

Western Medicine and Spiritual Transformation

GLENN J. SCHWARTZ / Executive Director Emeritus, World Mission Associates.

Author of *When Charity Destroys Dignity: Overcoming Unhealthy Dependency in the Christian Movement* available at www.wmausa.org

This is the second article in a series of two. In an article in the Sept/Oct 2014 issue of *Mission Frontiers*, I wrote about the transformation of Vanga Hospital located in Northwestern Congo. I gave details about the transfer to local ownership and local management, a process which began in the early 1960s. I mentioned in that article that there was more to the story and that I would seek to deal with it in a subsequent issue of *MF*. This article seeks to deal with preventive healthcare and spiritual issues in an African context. Of course, the first question that comes to mind is what this has to do with sustainability issues. I suggest that time spent promoting preventive medicine or spiritual healing can significantly reduce the amount of time, effort and expense in providing hospital or curative care.

Early in his career, Dr. Fountain began to look into the lack of sanitation in villages surrounding Vanga Hospital. He wanted to know what it would take to reduce the number of patients with bacteria borne diseases coming to the hospital.

On one occasion a young lad of nine or ten years of age was brought into Vanga Hospital with a growing mass in his abdomen. Dr. Fountain proceeded to perform surgery on what turned out to be parasitic growth the size of a baseball.

Thankfully, with that removed, in a few days the boy was dashing about ready to go back to his home.

About six months later the same boy was back at Vanga with a similar growth. Dr. Fountain was again called to assist. His first reaction was that he was being asked to repeat the surgery because no one did anything about the reason why the boy was there in the first place. So Dr. Fountain stayed in his home to reflect and pray about the situation he and the young boy were facing. As he prayed and meditated, the Lord seemed to say that he should go and lay hands on the boy – but the Spirit also said, “When you lay hands on him, be sure that you have a scalpel in your hand”. He was to remove the mass again – yes – but also to do something about the cause or the boy would be back again after six more months due to conditions that produce the parasites.

Dr. Fountain began to visit the villages and advocate latrines as a way to cut down the exposure to such the infection caused by the parasites. However, he encountered resistance from villagers who simply did not believe in—or see the need for—latrines. He pointed them to Deuteronomy 23:12-13 which says that they should take a hoe with them and cover their excrement. That was enough to convince the villagers that what he was saying about sanitation should be

given consideration. After all, it was in the Bible!

As he proceeded along this line of thinking, a different kind of problem began to appear. It became clear that man’s sinful behavior also had to be reckoned with. He showed, for example, how people can become ill and die because of a curse put upon them by a disaffected relative. He acknowledged that this view was not part of his traditional medical training in North America. One illustration from his book shows the implication in Dr. Fountain’s own words:

John, a sixteen-year-old high school student, came to the hospital quite ill with . . . tuberculosis. We hospitalized him and put him on our standard triple therapy.... However, after one month of directly observed therapy, John’s condition was deteriorating.... Within another couple of weeks it was clear that John was dying.... The student nurse caring for him talked and listened to him and eventually found out why John was dying. He had been cursed by his maternal uncle, and he knew he was going to die.... I was dumbfounded. Asking about a curse was not part of my usual history-taking, nor did I have a clue how to treat a curse. Mrs. Masieta [a hospital chaplain] entered the picture. She knew the treatment for this situation. She and [the student nurse] introduced John to Jesus and John asked Christ to enter his life. He became a Christian, and therefore

I assumed our job was done; when he died of tuberculosis, he would go to heaven. Wonderful! But Mrs. Masieta was not yet satisfied. She was convinced that he did not need to die of tuberculosis and that she knew what impeded his healing.

She read John stories of what Jesus did—healing the sick.... She then asked John who was more powerful: Jesus or his uncle [who had cursed him]. Mrs. Masieta assured him that he was now under the protection of Christ and that this uncle's power could no longer get through to kill him. In this way she treated his fear, and with success.

She then tackled a much more difficult problem. She asked John if his uncle had done him wrong. "Of course," he replied. "He tried to kill me." She read to him the words of Jesus about forgiving those who do us wrong....

John finally released his uncle to God in prayer and asked God to heal the anger and hatred in his heart. God did, and within a few days John's fever disappeared, his appetite returned, and he went on to complete recovery, healed in body, mind, and spirit.

I share this illustration to show how recognizing a local resource such as prayer for healing or exercising forgiveness can sometimes outweigh complex and expensive medical procedures that might be available. Prayer for healing is a local resource available to all who believe in the power of the Holy Spirit. No funding proposals are required. No outside funding is required. No local fundraising program is required. No government grants are required. It simply requires faithful people who

believe in the power of the Holy Spirit and who fill the role that every believer is privileged to fill. Because God is sovereign, He does not heal everyone whether through medicines or spiritual deliverance. But both options are valid and both are a provision from the Lord. Be on the lookout for resources that are locally available at little or no cost.

If you have not done so, I heartily recommend that you acquire and read *Health for All: The Vanga Story*. It is a rich treasure of lessons that Dr. Fountain learned over thirty-five years in a rural hospital in Africa. It is available through William Carey Publishers at www.missionbooks.org



¹ This quote can be found on page 132 and following in *Health for All: The Vanga Story*.

FRUITFUL MISSION *from the* INSIDE OUT

"Ryan Shaw rightfully challenges us to not fall into the temptation of emphasizing the mission at the expense of our own souls. Ryan also brings this pastoral vision down to a practical level, giving us very helpful 'spiritual keys' that will help us cultivate a deeper inner spiritual life. If we heed these words and apply these keys, I believe we will not only be more spiritually equipped, but also will spiritually thrive in engaging the Great Commission."

—From the foreword by **Tom Lin**, vice president for missions, InterVarsity Christian Fellowship/USA

