

PREFACE: Two teams will be going to Malawi in May. The major project this year is constructing a school building. Barbara explains why a school and the dream in her newsletter. We hope that churches and individuals will be led to provide financial support. For instance, there is going to be an opportunity for fun/fund-raising at **"Bowling with Burleson," from 6-9 pm on Friday, May 9 at AMF Gastonia Lanes.** (That's Tommy Burleson, member of the Malawi team and former NC State Wolfpack, US Olympic, and NBA basketball star.) Put it on your calendar now and look for more information to come. Another idea would be to ask members of all ages to contribute 50 cents or a dollar for each year of education they've had. Even 5 year olds can participate! Of course, support for the on-going operations of Nkhoma Hospital are also vital & welcomed. Have questions or other ideas? Contact team leaders Teresa Locke (tlocke@carolina.rr.com; 704-867-8135 (h)), Tom Kilgore (ckpaints@bellsouth.net; 704-867-8135 (h)) or Michael Bailey (revmbailey@bellsouth.net; 828-437-1811(church)).

NAGY NEWS March 2008

Dear friends,

Greetings again from Nkhoma as we look forward to another harvest and visits from several mission teams. We are continuing to see high numbers of patients with malaria on the children's ward, and in spite of the good harvest last year, widespread malnutrition related to running out of food in the villages. Thus, we are extremely grateful for gifts sent to purchase mosquito nets and supplemental food for the most vulnerable, particularly young children. Your wonderful gifts are making a difference in the lives of hundreds of families, and giving hope that these highly at-risk children will not only live to enter school, but be healthy enough to learn and develop as they go through childhood. We are also thankful daily for general support that enables us to take care of patients who can't pay anything for their care. Some examples of people from this morning's clinic who have benefited from these gifts are as follows:

A nine month old girl was referred in from a health center where she was not growing after three weeks of nutrition supplements. She weighed only 4.5 kg, a little more than a newborn. Evaluation revealed a close family member with tuberculosis, and after investigation, the infant was started on TB meds, therapeutic feeding and malaria medicines. A family history revealed that her twin sister (hidden on her mother's back) was also severely underweight and has a high likelihood of active tuberculosis. Clustered around their bed was the contingent of pediatrics nursing students who got to observe closely what severe malnutrition looks like, how we evaluate it and what steps are crucial to the recovery process.

An eight year old who has not been able to walk for three weeks following quinine injections was found to have an infection in her hip, and was sent for emergency surgery, which we hope will restore her ability to walk.

A four year old with bilateral cataracts was referred from the eye department for pre-operative screening. Studies have found an extremely high mortality rate amongst children with blindness, and we find serious health problems in almost every such child examined. This child was very tiny and somewhat malnourished, but bright and engaging in spite of his visual impairment. I stopped a minute in the busy clinic to imagine what his face will be like when he is able to see clearly for the first time, and how much difference this will make to the rest of his life.

As I think about ways in which children's lives and health can be nurtured, I frequently come back to the core issue of education. Primary school in Malawi is now free, but it is usually of very poor quality due to lack of resources and teachers, and poor status of students as they enter the overcrowded classrooms. It is customary for a primary classroom to have over a hundred students, no desks, no

books and no supplies. By the time students enter secondary school, most are hopelessly behind and there is a high probability they will simply return to subsistence farming. Nursery schools have been encouraged to prepare the children better and to provide an outlet for feeding those who are malnourished, but there is no formal education for the teachers, who are mostly local volunteers. Most children don't recognize crayons or know what books are for. Our hospital staff values education for their children so highly that many have planned to make the long trip to Lilongwe daily (120 km) or to move even preschool children to relatives' homes to obtain adequate education, and some have left the hospital for jobs closer to better schools. However, the community at Nkhoma feels a better solution would be the development of high quality education here, both to serve the needs of staff and to function as a practical training facility for teachers from the village nursery schools, raising the education level of preschool students in a wide area. This would be the first step in a plan to eventually see a full private primary school, and I am very excited that the upcoming Presbytery mission teams will be working on the first preschool classroom building. We are late with fundraising efforts for this, due to unforeseen changes in our family's return to the US, so I would like you to please take the initiative to contact the team leaders (contact information at top of newsletter) directly if you are interested in helping.

Several weeks ago, we were encouraged by the Christian Health Association of Malawi to visit our secondary schools, encouraging students in our own community to pursue health related degrees and come back to work at Nkhoma Hospital. I sadly realized that most of our local students would not gain admission to any professional school due to their poor academic preparation. As a direct result of the primary school project being started, I would love to see that sad realization completely proven wrong in the next generation of students, and I would be thrilled to have been a part of its birth.

Blessings to all; we appreciate you standing with us in all that is done!

Barbara