

KEEPING THE HOME FIRES BURNING

Growing up in rural Kenya, in the early 60's we didn't always keep, or own, matchboxes or lighters. We didn't need to. Fire never died in our village. Back then, the women of our village stuffed their hearths, when not in use, and especially overnight with dry cow dung. This slow-burning fuel kept the embers burning, and the smoke would repel mosquitoes.

My grandfather's homestead had three kitchens. Four of his cousins had their homesteads within walking distance, so our part of Otok was, and still is, mostly family and relatives. A few neighbouring families were not related to our clan, but we shared grazing grounds, and the one village primary school where my mother taught. We all got our water at the well situated by the stream on my grandfather's farm.

What if the fire in our kitchen died out? The solution was simply to send someone to the next kitchen or across the road to the neighbours with a potsherd, borrow fire, and return with a few embers. There was always a fire somewhere and it was always shareable. Driven by community, certain essentials were always shareable even with strangers. Even in times of conflict, it was unheard of to deny someone a few embers to get their own fires lit.

Toronto's pandemic slogan "We're all in this together" is an expression of a daily experience in the village of Otok. On a global scale, our interconnectedness has been brought into sharp focus by the COVID-19, a virus that has "gone viral" on all of us. Equally, thrust into

focus is our ability to share with those in need.

Earlier this year, EMAS volunteers collected personal protective equipment for China. A consignment reached Wuhan at the peak of the pandemic. Later a young physician, who had come to learn about and embrace Christianity through EMAS in China, sent a box of masks to Toronto at the height of our crisis and protective equipment shortage.

Who knows when or who started the first fire at Otok? It has been shared so many times and is probably still doing the rounds like gloves first sent to Wuhan from Toronto returning as masks from China. Team leaders, the staff, and I are feeling the pressure of God's call to service:

But if I say, "I will not mention his word or speak anymore in his name," his word is in my heart like a fire, a fire shut up in my bones. I am weary of holding it in; indeed, I cannot. Jer. 20:9

This is why I come to you, empty potsherd in hand, to "borrow fire", not for my own sake, but for the sake of the trust that God has given you and I in EMAS Canada's Mission: **to heal, teach and serve those in need in a Christ-like manner.**

In 2021 we expect to:

1. Open our clinic in Haiti
2. Start a program for staff training for Zimbabwe in Gutu
3. Continue our feeding program for nursery school children in Haiti
4. Provide virtual Continuing Medical Education programs in partnership with hospitals in China and a university in Cambodia
5. Provide tuition funding for African healthcare and church leaders

Your year-end donation to the General Fund will keep our home fires burning in readiness for 2021.

Dr. Peter Agwa
Executive Director.



Photo by Ochiweo Agwa

HAND IN HAND WITH HAITI - MARCH 2020

By Janèle Fréchette

Although we were only in Haiti for one week the impact of that experience was much more than most of my rotations in medical school. I think part of this is because what we did was more unfiltered. Meaning, in the physical sense of being very hands-on, and working without diagnostics in non-clinical settings. But more importantly, that every day we were purpose-driven and did not filter our faith in how it makes us who we are and what we do.

THE COMMUNITIES

We were received warmly by the Denis family. The interplay of our treatment as foreigners in poverty-stricken neighbourhoods was bittersweet. It made me think of the multiple power imbalances I did not fully understand preventing proper infrastructure and stability in Haiti. One evening we were invited for dinner at the home of the pastor for El Shaddai Two. We discussed the impact of poverty on the community and the difficulties of feeding and schooling hundreds of children. Despite the elaborate meal (or maybe because of it), I could barely swallow my food and felt grateful for the dim lighting. But the community of El Shaddai Two is strong and beautiful. Their Sunday service blew me away and it was an honour to be in partnership with them.

THE HAITIAN TEAM

I think recognizing what you do not know can be just as important as what you do know. I do not understand many of the realities or nuances of being Haitian. Hence the importance of having Haitian health care providers. I enjoyed working alongside the nurses, a fellow resident, and a dentist. Receiving some of their perspectives was a great gift—although I am not sure everyone knew they were giving it. As someone very fond of languages I

also loved learning a little Kreyòl.

Before medicine, I taught, and did not have a chance to do it again until going to Haiti. I almost forgot that it was something that I enjoyed until our second day of clinic. When I started making this shift in our consultations, it surprised me how much faster we went and how much more the nurses were engaged. I think it made our time more meaningful on both ends and the challenge helped me grow as a clinician.

THE EMAS CANADA TEAM

I do not think I have ever been part of a more reliable group as this; both on and off the ground. It was truly full of smart brains with big hearts. I appreciate how we navigated new or frustrating situations with calmness and were ready to celebrate each other's accomplishments. Personally, I love how after clinic we would head to the room upstairs to sit or lay on the cool laminate floor.

EMERGENCY EVACUATION

COVID-19 threw a wrench in the mission and brought more mixed feelings. After our original flights were cancelled we were grateful

that Krista had secured flights back to Canada. Dr. Pierre and I would be leaving a week early and the nurses' course would also be cut short. Thankfully, they were ready to be tested early and receive proper recognition for their work before we left.

The Denis' presented them with certificates on their balcony in a lovely small ceremony. And yet, Haiti was on the verge of many deaths due to COVID-19. After receiving a call from Pasteur Denis in our Mississauga hotel and discussing this fact, I was not sure how to feel. The mission was a success but the reality of what was going on in Haiti, and indeed the world, was again hard to swallow. Upon arriving to my apartment in Winnipeg I realized how upset I was. I reflected in my chair and waited for my body to adjust to the lack of people and noise. So much had happened in such a short amount of time.

It was my passion for human rights that led me to this elective. Overall, it was an immense privilege to be part of an effort to lift up Haitians and I hope it will not be my last time visiting Haiti.

Photo: Canadian EMAS Haiti Team (from left to right) Jane McSwiggan, Tricia Akerley, Dr. Pierre Plourde, Janèle Fréchette, Vanessa Hrynchuk.



CREATIVE WAYS TO SERVE

By Melony
Teague

2020 certainly looks different this year. Together, we have learned to adjust to a new normal and find new ways to stay connected. Travel bans caused us to reevaluate how we can **reach those in need in a Christ-like manner.**

This pandemic has brought to light many challenges, but at the same time, it has brought us opportunities to look at the way we've always done things and re-evaluate. Our staff now work from their virtual offices and have put systems in place to do so effectively and efficiently.

Although travel has been restricted, teams have found ways to serve by raising funds for equipment, planning online virtual teaching and finding ways to work around any obstacles the pandemic has brought. God is the God of creation and He is enabling his people to serve in creative ways.

During the Ride4Refuge fundraiser in the fall, the **Myanmar** team participated in the virtual event with six bike riders, four people walked. The team leader's mother, Mrs. Hu, inspired nine others to do



Mrs. Hu and friends participating in Ride4Refuge 2020 via Zoom.

30 minutes at-home exercise with her on Zoom!

The construction and equipping stages are complete for the **Gambade Medical Clinic** and the team are now preparing to hire staff. Our goal is to raise \$50,000 CDN annually to meet day-to-day staffing needs. The staff will include field workers, doctors, nurses and support staff.

You can sponsor the cost of a staff member's annual salary by contacting the EMAS Canada office for further details.

Operation Esperanza, our orthopedic team have been raising funds for a hospital sterilizer and look forward to returning to provide life-changing surgery to the people of **Ecuador.**

Africa has not been as hard hit as predicted which is good news.

Our **Zimbabwe** teams are preparing to travel as soon as we are allowed and will be serving in Karanda and further laying the groundwork for serving the Gutu Mission Hospital.

Our **DR Congo** team are making plans to continue equipping local medical students to better serve their communities in 2021. Contributions can still be made to their scholarship fund.

THANK YOU

FOR STANDING WITH EMAS CANADA AS WE NAVIGATE THROUGH THESE UNPRECEDENTED TIMES.

YOUR PRAYERS AND SUPPORT MAKE THE DIFFERENCE TO THOSE WE SERVE IN TEACHING, HEALING AND SERVING, and EQUIPPING LOCAL HEALTHCARE PROFESSIONALS.

HELP US KEEP THE HOME FIRES BURNING BY CONTRIBUTING TO THE GENERAL FUND.

Donate online:

www.emascanada.org/donate

EMAS's vision remains firm: **Christ-centered healthcare teams proclaiming God's love to all the world through teaching and healing.**

We are keeping the lights on. Teams are meeting and we are planning for 2021.

With your continued prayers and financial support, we plan to be poised and ready to travel again as soon as we are able. You can do this, as you are able, by giving to the **General Fund.**

Thank you!

Donate online or by sending back your donation slip with the pre-paid envelope provided.

MERRY CHRISTMAS FROM EMAS CANADA



**SHORT-TERM MEDICAL MISSIONS
WITH A LONG-TERM PERSPECTIVE**

NEWS FROM THE OFFICE

GIVE THE GIFT OF SERVICE

If you would like to volunteer to serve locally or abroad with EMAS Canada there are several opportunities available.

To volunteer, please connect with Peter Agwa: peter@emascanada.org



YOUR DONATIONS ARE MAKING A DIFFERENCE!

Your donations and prayers make all the difference. Many receive the healthcare they need because of you.

THANK YOU!

To donate Online go to:
<http://www.emascanada.org/donate/>

FISCAL YEAR END

Please note, our fiscal year end is now **Dec 31st**. Because of this deadline to complete all financial transactions in a timely manner, please mail your year-end donation early so that it is postmarked **DECEMBER 31st** at the latest. If you **DONATE ONLINE**, kindly do so before **MIDNIGHT** or if by **PHONE** before 4:30 pm on **DECEMBER 31st**.

JOIN OUR PRAYER TEAM

If you would like to receive our monthly **prayer checklist** and join those who pray for EMAS Canada, please contact the office:
office@emascanada.org



2020 RIDE FOR REFUGE

Due to Covid-19 the ride was held virtually this year. 22 participants in 3 teams (Gambade, Myanmar, Zimbabwe-Gutu) raised **\$16,736**.

FROM SANDY'S DESK

Things look so different everywhere these days and our office is no different. We have been virtual since the pandemic began and things are working smoothly. When you donate, you might notice a few other things look different. Our amazing new database software provides new forms on our website and streamlined new receipts. Please let me know if I can send your receipt by email and further streamline our processes.

Email: sandy@emascanada.org

*Merry Christmas
from the
EMAS
office!*



STAY IN TOUCH



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