

December Prayer Points

Those who do not have time to read the stories may get the prayer items and main points in less than three minutes by scanning the portions in bold italics.



Maputo Airport

Dear Friends:

Once more I must begin this letter apologizing for a long hiatus in our regular reports. The previous account was prepared in December of last year.

In January I was much occupied making arrangements to leave our ministry in the hands of the mission's 13 employees for one year during our family's upcoming furlough.

We were finally able to leave Mozambique for South Africa in early February, but before coming to the States I was quite busy

in Johannesburg purchasing the multitude of materials needed by our workers back home. With the invaluable assistance of Alex Van der Merwe in Pretoria, and to my great amazement, all was accomplished in time to catch our flight to the States the end of February.

Once in the States ***the hectic pace continued for the first six weeks as we visited key supporting churches and family members scattered across the country from Nashville to Los Angeles.*** In mid April we finally settled in Oxnard, California, home of our sending congregation, Faith Community Church. Here we have enjoyed a more relaxed schedule, and I have finally been able to tend to neglected matters such as this long overdue update.

The need for brevity precludes my giving a detailed account of our first months of furlough. May it suffice to simply say with regard to our friends that our family has been overwhelmed repeatedly at the kindness of so many toward us; and with regard to myself it has been a long time since I was so keenly aware of God's ability to accomplish His purposes despite the feebleness of the human agent. I hope there will be many more manifestations of divine help in the months to come, because I face ***an intimidating task this furlough.***



Sunrise over Europe

That task is to find the personnel needed to operate the surgical hospital which could conceivably open within a year of our return to Nampula. Our family has operated alone for almost all of our 21 years on the field despite many prayers from the beginning that God would raise up additional families to join us. After decades of drought, now in the space of a few months we expect to find at least five families prepared to work long term in Nampula. Statistically speaking, that would appear to be most improbable.

Specifically we need:

Two general surgeons

One anesthesiologist or nurse anesthetist

One family practice doctor

A hospital administrator.

Of course, Nampula is in need of a great many other servants of God. There is no shortage of opportunities to minister in this land, though getting permission from the government to come work in Mozambique has grown increasingly complicated for a variety of reasons, two of which are bad experiences the government has had with previous immigrants and high unemployment. Not everyone who has come to Mozambique in the name of religion has been helpful, and the government would prefer that mission organizations hire Mozambicans to help them rather than bring in free missionary labor.

Nevertheless, ***we are praying that God will also provide for us:***



*Neurofibromatosis,
or the elephant man syndrome*

***An administrative assistant or secretary for me.
A variety of church planting missionaries.***

The physical ministry of the hospital is itself a glorious endeavor, addressing crippling and long neglected surgical problems that often grow to enormous and grotesque proportions because of the profound shortage of physicians and medical resources here. When I first visited Nampula in 1985 only two countries in the world had fewer doctors per capita. According to official statistics from the health department, as recently as 2002 there were only four surgeons to meet the needs of over 850,000 people in our province. In the U.S. one would encounter 140 surgeons for the same number of people.

However, as rewarding as it may be for patient and doctor alike, providing surgical relief is not the most important function of our facility. Evangelism is. So it is vital that the missionary staff for this hospital be



Chondrosarcoma (bone cancer) of the foot

unequivocal in their commitment to evangelizing lost souls and to the gospel of Jesus Christ. Modern evangelistic methods are often based on faulty doctrines of salvation that render the associated gospel ineffective in producing true conversion. The missionaries we are seeking need to be committed to the Biblical gospel set forth by the doctrines of grace so well elucidated by the Reformation Fathers.

That means, however, that the pond we are fishing in for prospective missionary associates is much smaller than the professing Evangelical church. Given our track record over the past 21 year and the restricted nature of our recruitment pool, we do indeed need God's intervention on a dramatic scale in leading us to the people we trust He is preparing for ministry in Nampula.




Elephantiasis of the scrotum, a sexually transmitted disease

With this background, we come to the **first major item of praise for this newsletter.**



Venette and Larry Stack

Even before we could begin our own recruiting efforts, the Lord recruited for us entirely apart from any scheming or effort on our part a highly qualified general medicine physician. He is Dr. Larry Stack, an emergency room specialist who has worked for the past 15 years training medical students and residents at Vanderbilt University Medical Center, a prestigious medical school and training hospital in Nashville, Tennessee. According to some ratings, the medical school is one of the top ten in the country and the medical center is ranked 16th amongst the thousands of hospitals throughout the U.S. We could hardly have expected someone to leave such a highly regarded position to come work in our mission hospital, but the Lord has placed that desire in Dr. Stack's heart and that of his wife, Venette. The encouraging thing is that God recruited Dr. Stack and Venette quite apart from any efforts by us as we



are only now gearing up our recruitment program to begin next September.

Our second great item of praise is related to the first. Besides praying for missionary associates, ***for years Julie and I have prayed for the Lord to grant the mission hospital favor in the sight of local government authorities. This is an almost impossible request, as the government is wary both of foreign doctors from highly developed countries and of private hospitals.*** Compared to what wealthy nations invest in health, the Mozambique health ministry is still quite restricted in personnel and funding. Their philosophy appears to be to promote steady improvement in Mozambican medical care while avoiding or even preventing projects and circumstances that would arouse dissatisfaction over the level of medical care presently available through the hard-pressed but improving government health centers. Such dissatisfaction could understandably take place if well-funded mission hospitals or highly-trained western missionary doctors began providing care that the government system could not match. Meanwhile, our strategy is to provide the best surgical care we possibly can with all the resources at our disposal, divine and otherwise, for the glory of Christ's name. ***Given these two conflicting purposes, to request the government's favor upon our enterprise is to seek a result that runs contrary to nature.*** This is the predicament which our ministry has faced from the beginning and which has not infrequently been the source of opposition and intrigues over the years, though the Lord has always overruled in those situations, at times using the very efforts of determined adversaries as the means to propel our project ahead beyond our fondest expectations. Still, as Julie and I have prayed over the past years for favor from the government despite the high standards being set by our mission hospital, we have been at a loss to even imagine how that result could take place.

Yet the desired result has come through Dr. Stack's decision to move from Vanderbilt to Nampula, because Dr. Stack wants to continue his work training medical students and physicians in emergency room medicine even after he moves to Mozambique. Mozambique just opened four years ago its second medical school, and quite "coincidentally" it was located only a few hundred yards from our hospital. When Dr. Stack came to visit in August he asked if there were a medical school nearby. Formerly I would have had to say there was one 1300 miles down the road, but I was pleased to tell him we now had a medical school just a few blocks away.

When Dr. Stack returned in December he brought textbooks he has co-authored as gifts for the medical school and downtown hospital and visited the local health officials asking to continue his academic work by teaching part time at the medical school and writing papers on emergency medicine in the third world setting. The prospect of having Mozambican medical students and doctors trained by a faculty member from one of the top ten medical schools in the U.S. and having papers published by their faculty in important international medical journals has thrilled the rector of the local med school who has offered money, a house, and the promise of short-circuiting the usual bureaucracy to ensure that Dr. Stack fulfills his dream of coming to work in Nampula. ***Since Dr. Stack will be practicing from our hospital and using our facility for the***

clinical training of his medical students and residents, we imagine any plans to frustrate the opening of our hospital have been swept away in the excitement Dr. Stack's advent has produced amongst local medical authorities.

It bears noting that the rector of the medical school is not a physician or even a para-medical practitioner. He holds his position by virtue of being a highly competent individual much revered for getting difficult tasks accomplished. Because of the respect he enjoys at high levels of the Mozambique government, according to what we are told via the grapevine, he is not even under the Minister of Health in the chain of command. He answers only to the President of the Republic. So we are grateful to have someone of his stature opening doors for Dr. Stack and for our hospital.

Continuing with the theme of recruitment, we praise God for the help of Steve Weaver, professional videographer and member, together with the Stacks, of Community Bible Church in Nashville, Tennessee. Steve came to Nampula last August with Dr. Stack and brought his equipment for preparing a documentary of the hospital project. ***This professional five-minute video and a second one addressing additional opportunities for ministry with Grace Missions here in Nampula can be viewed at www.hospitalafrica.org.*** We are thankful for the excellent work Steve has done.



Besides the two videos, Steve is also redoing our web site. Dr. Stack and I are preparing professional exhibit booths, table top displays, brochures, and ***a short book detailing God's hand in our ministry over the past 21 years*** for use at mission conferences and church visitation. ***Please pray for God to meticulously guide all these efforts, that we may present the ministry in a way that glorifies Him*** and that will appeal to the kind of Christians we desire to have as associates in this work.

On the home front, our family of seven is rejoicing in finally being together again. We were reunited with Sarah in April when we made it home to our sending church in Oxnard, California where Sarah had been studying at a community college during the spring semester. In May Kent joined the family after finishing his Freshman year at Covenant College in Chattanooga, Tennessee.

Later today, we are all departing for a camping trip at Yosemite National Park. In a week ***I will be returning to Nampula to set up and supervise the 12th Fiel Conference in Mozambique. Please pray for another successful conference.***

When I return the family will be together again in southern California the last two weeks of August before Kent and Sarah depart for Covenant College and the rest of us begin the church visitation / recruitment phase of furlough.

In the next couple of months we will be scheduling the churches we will visit as we seek the medical people needed for the hospital. Please pray that God would guide us to the right places where the people He is calling to work in Nampula will hear and respond to our presentations.

If you or your church leaders are interested in a visit from us while we are on furlough, please contact us at cjwoodrow@gmail.com or at 615-815-7125.

In summary, our items for praise and prayer in this report are:

1. Praise for God's help in enabling me to accomplish all that was on the work lists for Mozambique, South Africa, and the first four months of furlough.
2. Praise for a fruitful and relaxing 2 months of renewing friendships with members of Faith Community Church, our home church in Oxnard, California.
3. Praise for God's work in drawing Larry and Venette Stack to service in Nampula.
4. Praise for the impressive way God appears to be answering our prayers for favor in the sight of local government and health officials.
5. Praise for the professional services of Steve Weaver in preparing the documentaries and new web site (still not live) Grace Missions will need as we begin recruiting missionary associates.
6. Pray for God's superintending hand to be manifest as we seek the various medical and church planting workers needed for the next phase of the Mozambique ministry.
7. Pray for God's help as I, with the help of other experienced writers, prepare a recruiting booklet summarizing the Lord's hand at work in our Nampula ministry during the past 21 years.
8. Pray for God's direction as we plan the six months of church visitation beginning this September.
9. Pray for a successful 12th Annual Fiel Conference to take place in Nampula 19-22 July.

By His grace,
Charles and Julie Woodrow