

Dear Friends of PAACS:

*Despite the effects of COVID-19, the care of patients and the training of surgical residents continues apace. It is just harder on the hospitals and the expatriate personnel. We are thankful that the travel restrictions are slowly lifting. Please remember to use the newly available 2020-2021 Prayer Guide to keep them all in your prayers and after supporting your local church, consider a gift to PAACS to make this all happen.*

*Pray also for the continuing resolution of recurrent violence in Ethiopia and Cameroon – for peace and for the protection of hospital environments and personnel.*

*We are pleased that our PAACS residents again did so well overall on the written COSECSA exams. Pray for the second-year residents as they prepare for the oral exams in December. Also pray that all five of the planned new training programs can start in January. God continues to bless PAACS.*

*The Editor*



# PAACS PAACS Bulletin Bulletin

**Our goal:** To train and disciple 100 African surgeons by 2020.

**No. 195  
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**Our vision:** PAACS trained surgeons living the gospel and ministering to the sick.

**Our Mission:** PAACS exists to train and disciple African surgeons to glorify God and to provide excellent, compassionate care to those most in need.

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## FROM THE DESK OF THE CEO

Dear PAACS Family:

*I want to begin by congratulating the PAACS residents for their performance on the recent COSECSA exams. All FCS (fellowship) candidates, and all but one of the MCS (Membership) candidates passed. We are praising God for His favor and mercy on the PAACS residents who took these exams. CONGRATULATIONS to our surgical residents on a job well done!*

*September has been a very busy month. We are in the process of preparing for the PAACS Board of Directors meeting which will be held virtually on Friday, October 30th. We are expecting approximately 150 people to participate during the Open Session of the Board Meeting via Zoom. In preparation for the meeting, 19 PAACS Councils, Task Forces, and Committees are meeting virtually in advance of the Board Meeting. This is usually a two-day, in-person meeting that has been condensed into a one-day Zoom meeting. This is the first Board of Directors meeting since PAACS became an independent ministry. I ask for your prayers for this meeting, the PAACS leadership, and the ministry to continue to do God's will and glorify Him through our work.*

*The PAACS Prayer Guide was recently released. This is the 25<sup>th</sup> Anniversary Edition of the prayer guide and was mailed to all PAACS supporters. [Click here](#) to download the 2020-2021 PAACS Daily Prayer Guide.*

*We are also in the process of completing the PAACS Annual Report. This report details the impact, work, and finances of PAACS from July 1, 2019 - June 30, 2020. This annual report will be emailed to all supporters in early October. Please watch for this report in your email and it can also be downloaded from our website. You may also request a hard-copy of the 2019-2020 PAACS Annual Report, and we will gladly mail it to you.*

***Please mark your calendar for Monday, October 12<sup>th</sup>.*** *This will be the PAACS Global Day of Fasting and Prayer. We will have two prayer Zoom calls on this day to allow the PAACS family from around the globe to participate. We will be praying for our residents, graduates, faculty, leadership, partners, supporters and the PAACS ministry. We will also be praying against COVID-19 and for hearts and nations to be turned back to God. [Click here](#) to view the prayer requests and the information needed to register for the Zoom call for the PAACS Global Day of Fasting and Prayer.*

*May God continue to bless and pour out His grace and favor upon you.*

*Blessings to everyone,*

*Susan Koshy, JD, MPH  
Chief Executive Officer  
Pan-African Academy of Christian Surgeons (PAACS)*

## PAACS'S NEW ASSOCIATE VP FOR ACADEMIC PROGRAMS

PAACS welcomes Dr. Walter Johnson back to the PAACS family. Johnson is well-known to PAACS having been involved since 2011. He was one of the inspection team from Loma Linda University in 2012 and became the liaison for LLU on the Commission later that year. In 2015, Walt Johnson resigned from PAACS and accepted the position of the Emergency & Essential Surgical Care Program Lead in the Service Delivery and Safety Department at the World Health Organization in Geneva, Switzerland. He has subsequently returned to Loma Linda University in 2019.

Dr. Johnson was born into the family of a missionary surgeon and grew up in the Far East. He completed his medical degree at Loma Linda University in California, followed by neurosurgery training at SUNY-Health Science



Center at Brooklyn, and a cerebrovascular fellowship at UCLA. He was involved in academic neurosurgery until 2009, serving as the Vice-Chairman of Neurosurgery at Loma Linda University for over a decade. Currently, he holds Professorships in Surgery, Neurosurgery, and Public Health, and is the Director of the Center for Global Surgery at Loma Linda University in Loma Linda, California. Walt holds Master's degrees in Business Administration and Public Health from Claremont Graduate University in California. Dr. Johnson now rejoins PAACS on a part-time basis as the Associate Vice President for Academic Programs.

With the continued growth and expansion of PAACS into subspecialty training, the need exists to grow the administrative personnel of PAACS. In a part-time role of Associate Vice President for Academic Programs, Dr. Johnson will be carrying the load of overseeing the subspecialty academic programs, including working with the respective councils and committees of PAACS to set requirements and policies, developing streamlined processes for reporting requirements of programs, and helping to plan for the future development of PAACS to help us maintain the high-quality cutting edge training that PAACS is known for. Dr. Johnson will also take advantage of his background and the connections he has made to speak on behalf of PAACS to international groups such as COSECSA, WACS, and WHO.

During his day-to-day interaction with PAACS, Dr. Johnson will work closely with PAACS Executive Vice President, Keir Thelander, to give oversight to the PAACS programs, promote PAACS within the LLU community, and leverage Dr. Johnson's global surgery experience to further the PAACS mission to train and disciple Christian African doctors to become surgeons and fully-devoted followers of Jesus Christ.

He stated, "I view my role as primarily supporting the mission of PAACS to train and disciple surgeons and anesthesiologists to provide access to the enormous numbers of underserved people, particularly in the continent of Africa, who currently lack access to safe, timely and affordable surgical and anesthesia care.

It is my hope and prayer that my contribution to PAACS, the leadership team and the programs, that God will be glorified and that His gospel of Grace will be further advanced.

Please welcome Dr. Walt Johnson to the PAACS family. His e-mail is [walt.johnson@paacs.net](mailto:walt.johnson@paacs.net).

## WELCOME TO OUR NEW FACULTY PEDIATRIC SURGEON

By Britney Grayson MD

By the time I graduated from high school, I'd made plans to become a missionary doctor. That idea was fueled by an innate desire to become a physician coupled with experiences serving on international mission teams in Venezuela. My calling to become a physician was strengthened by my mother's experience with a chronic illness but it was also this illness that compelled me, later in life, to feel the need to stay in the US to help care for her. Unfortunately, she passed away during my general surgery intern year. While I would give anything to have her back, that loss opened the door for me to reconsider becoming a missionary doctor. During my fourth year of residency at Vanderbilt University I was able to practice medicine abroad for the first time, completing a one-month rotation at Kijabe Hospital, in fact! My time in Kenya confirmed that I was still quite interested in global surgery and this plan was, in fact, realistic. I went on a silent retreat in the fall of my chief resident year specifically to pray about my calling towards missions- would this be a part-time commitment? Full-time? Would I serve immediately following graduation? Later? I went on a hike one afternoon, praying and speaking to God out loud. To make a long story very short, I ended up in the middle of a forest in rural Kentucky staring at a field of rotting

corn that had been meticulously planted, in rows, without a road or path in sight. I pondered how the corn got there? I wondered why someone would take the time to plant this corn and then leave it there to rot? In the midst of these thoughts, I heard a voice say clearly, "The harvest is plenty but the workers are few." (Matthew 9:37) I dropped to my knees in prayer, understanding that this is the confirmation from the Lord that I had been praying for all week. He was telling me to GO.

My husband, Micah Wilfong, participated in a one-year missionary training program in Johannesburg in 2013. He was in between jobs, searching the want-ads, when his father encouraged him to pray about what God wanted him to do next. Micah awoke the next morning with the verse Genesis 12:9 in his mind, "Then Abram set out and continued toward the Negev." Negev is another word for South and an opportunity quickly came for him to spend a year in SOUTH Africa. God's word was clear. I met Micah in his home state during the last stage of my training, pediatric surgery fellowship, in Indianapolis. We quickly bonded over our shared heart for global ministry and married 14 months later.

I love teaching – always have. As my interests in global surgery grew, two things were clear. First, there is a dire need for pediatric surgeons in the developing world, especially sub-Saharan Africa. Second, I alone am not the solution to that problem. Rather, teaching and training

African pediatric surgeons in Africa is a much better plan. We recently moved to Kenya and Bethany Kids/Kijabe Hospital. I join the team of Drs. Ken Muma and Jason Axt to specialty-train pediatric surgeons in a Christian hospital where spiritual mentorship and discipleship go hand in hand with surgical skills. We have four fellows here, representing the countries of Kenya, Ethiopia and Democratic Republic of Congo. We just sent our last graduate back home to Rwanda where he will become one of only two specialty trained pediatric surgeons in the country (both trained here at Bethany Kids/Kijabe Hospital, in fact!). Isn't that so exciting?

Micah and I are grateful for the support of the Samaritan's Purse/World Medical Mission Post-Residency Program. We've committed to two years here but hope to stay much longer. I joke that I'll be here until I train myself out of a job! And after that? Perhaps an opportunity will present itself to start another PAACS Pediatric Surgery Fellowship on the continent. For now, we are thrilled to be here and pray we serve the people of Kenya (and beyond) well.

## COSECSA EXAM RESULTS

On Wednesday, September 9, COSECSA successfully held its first ever online examination process. Paper backups were available in case of internet connectivity or laptop problems. Of the 261 candidates, 253 (97%) finished the online portion of Paper 1 successfully and 238 (91%) finished Paper II online. There were 122 candidates for the MCS (first two years) exam and 139 who sat the various FCS (fellowship) exams: 54 general surgery, 3 neurosurgery, 48 orthopedic surgery, 1 ENT, 4 pediatric orthopedics surgery, 19 pediatric general surgery, 7 plastic surgery and 2 urology.

There was a total of 261 candidates, 41 (15.7% of the total) were from PAACS. Forty (97.5%) of those passed their respective exams. All candidates (both PAACS and non-PAACS COSECSA) sitting the FCS cardiothoracic, neurosurgery, ENT, pediatric orthopedic, pediatric, plastic and urology exams passed their exams. In the MCS exam, the overall passage rate was 86% with 19 of 20 PAACS candidates passing (95%) as compared to the



Dr. Britney Grayson and husband, Micah Wilfong exploring their new home area in Kenya.

non-PAACS residents having a passage rate of 86/102 (84.3%). In the FCS general surgery exam, the overall passage rate was 83% with 14 of 14 PAACS candidates passing (100%) compared to the non-PAACS residents having a passage rate of 77.5%. In the FCS orthopedic surgery exam, the overall passage rate was 96% and all four of the PAACS residents passed.

PAACS residents Joseph Nderitu Gachimo (Kijabe) and Josephat Mburu (Kijabe-Ortho) ranked #1 and #2 respectively in the MCS results from all 122 candidates. Three more PAACS residents were also in the top 10<sup>th</sup> percentile of the MCS examinees. PAACS resident Fred Minja (ALMC) received the highest score for the FCS exam with two more PAACS residents also in the top 10<sup>th</sup> percentile of those 54 FCS candidates. One PAACS Orthopedic resident was in the top 10<sup>th</sup> percentile of his cadre.

One of the four pediatric orthopedics residents who passed was a PAACS alumnus, Festo Ladu. Arega Fekadu Leta was the only one sitting the CTS FCS exam and he passed. Alain Jules Ndibanje from the BethanyKids program also passed the pediatric surgery FCS exam.

## GOD IS WORKING IN ANGOLA

By Stephen Foster

*Editor's Note: Stephen and Peggy are long-term surgeons serving under SIM-Canada in the country of Angola and have faced years of lack of governmental recognition and cooperation. This newsletter was just received a few days ago and God is clearly working. It reminds us of the truth of Proverbs 21:1 – "The king's heart is in the hand of the LORD, like the rivers of water; He turns it wherever He wishes." Please pray that He will open this country for medical missions and the Good News of Jesus Christ. Pray for encouragement of the missionaries there. Pray that the dreams that the Fosters have – which include a PAACS Program in Lubango – will come to fruition.*

Dear Friends,

September 11th and 12th will be forever etched in my memory!

On Friday afternoon, September 11, I was scrubbed in the OR working on a lady needing an extensive skin graft. My phone rang. I ignored it but 15 minutes later, it rang again while I was de-gowning. This time, I answered to hear "Are you Dr. Estevão Foster?"

I answered "Yes, Sir".

He went on to say "This is the General in charge of the Office of the President of the Republic. Can you be at the airport in 90 minutes?" And then, "You are an invited guest of the President at the official opening of the Dr. Walter Strangway Hospital tomorrow morning at 10am in Cuito, Bie." That is only 600 kms away.

A month ago, an old friend, Dr. Campos, a former Dean of the Faculty of Medicine with whom I had worked 30 years ago, who is a member of the Congregational Church of Angola with long links to the United Church of Canada, had called me to say that they would like to ask me to say a few words on behalf of medical missionaries' efforts here in Angola that date back 140 years. This would be at an opening ceremony of this hospital at a date to be determined and organized by the churches in Central Angola. I told him that my colleague, Dr. Steve Collins, had grown up knowing Dr. Strangway and had called him Uncle Walter and wouldn't it be more proper for Dr. Collins to speak?

Nothing more got said and I figured it was off due to Covid-19 restrictions preventing travel outside Luanda for those inside the sanitary cordon of Luanda.

Back to September 11th: Clearly, I didn't know the powers of the President.

Peggy dropped me at the Lubango airport about 105 minutes after the call. I was met by State Protocol and asked to wait for the new Dash 8 bought from De Havilland some 4 months ago. At 4:45, we were on our way to Cuito. Opposite me were 3 members of the President's office, one of whom took me to supper that evening. He was Chief of Social Media for the office of the President, a very friendly and engaging chap. He plied me with questions about our 42 years here. I didn't spare him any of the details of the lengths to which his ruling party had sought to make enemies of the church and in particular how we missionaries had been variously accused of working for the CIA, gun running, rhino horn reselling, diamond smuggling, gold digging, and most recently selling human organs procured from innocent rural folk to be resold in Namibia with Mission Aviation Fellowship based in Guelph ON, serving as the delivery mechanism. I told him that bringing us in from the cold is going to be a long process of relearning to trust one another again. At that point, I figured if I was being offensive, so be it. I kept asking him if the President was serious in getting the Churches involved again in Health Care.

On Saturday, I was up at 5 AM, penning a speech as they still hadn't said what was going to happen at the Opening Ceremony. I wondered if we would get a chance to meet.

A helicopter was scrambled at 7:30 to get Dr. Collins from Dondi mission 130 kms away, where he was doing a cataract surgery field trip. He has been doing this for 25 years now and has helped more than 20,000 Angolans recover their sight with the simple technique of lens extraction and intraocular lens placement. The previous evening, he had refused to come by road as he said that, in the morning, he needed to do the post op care and bandage removal on the eight newly operated patients from Friday. He told the Chief of Protocol that, "if the President really wants me, send a helicopter in the morning!" That is what happened and Dr. Collins joined us at 7:30am for breakfast.

By 9:30, we were taken in a car with the Canadian flag in the windshield to the new Provincial Reference Hospital. There we met with our Honorary Canadian Consul, Allan Cain. He is also Director of Development Workshop and a 40-year veteran of Angola as well. We shared notes. He had been given 24 hours' notice as he needed a rapid test for Covid to be able to travel outside of Luanda. He said that, after much internet research, he hadn't been able to uncover a connection between the state President and Dr. Walter Strangway but there was a persistent gap in the story from birth in '54 to '72 when he entered the clandestine activities of the MPLA and became a soldier.

Just before the President walked down the red carpet, a lady from the President's office drew all three of us aside and said that the President had asked to meet us in the Governor's Palace after the tour of the hospital. She told us to please be ready for the pickup vehicle. Finally, I thought we might get his ear, something I've often wondered when or if it would ever happen.

The Ceremony started with a video on the life of Dr. Strangway, born in Petrolia ON, a U of T MD grad, who, with his wife Alice, a Lab Tech, left Ontario in 1928 and worked at a place called Chissamba, 60 km from the Provincial capital, until 1967. He built a 140-bed hospital, doing some 40,000 operations. In addition, as a reflection of his holistic thinking, he setup 42 primary care points before the advent of antibiotics and vaccines. The Colonial regime didn't permit any Protestant work within a 15 Km radius of any town. I found it difficult to believe that State media was broadcasting a paean of praise to a medical missionary after having been treated like a pariah for so long.

The tour of the hospital found us in a first-world place of 230 beds. It was if we had been beamed up to the donor Spain's backyard. Some 47 million Euros later over two years, a beautiful place is ready. It will need just 170 doctors and another 800-plus staff to begin to use it. At present, there are 17 largely Cuban specialist MD staff.

What a preparation into our 'Audiência' with the President who did indeed give us a half hour of his time. After intros, Dr. Collins asked what was his connection to Dr. Strangway.

He smiled and said, "Let me tell you my story." For the next 15 minutes, we were spell-bound as it emerged that his father had been a nurse trained at the Methodist mission hospital of Quessua near Malange, about 400 km

due east of Luanda. After '53, his dad got a job with the Port of Lobito clinic where indeed the President was born in '54. His dad got picked up by the secret security police known as PIDE in '58 and jailed for 2 years in Luanda. Upon release in '60, his CV was blackballed, preventing him from working in any state institution ever again. His father found employ at the Chissamba Hospital and a warm welcome from Dr. Strangway. During his boyhood, the President watched Dr. Walter on rounds as his Dad insisted he do his homework under supervision, often on the porches of the wards. The President spoke with such affection and emotion, one could see he was deeply moved by those events of many years ago. He said he hoped that, someday, there would be an opportunity to honor Dr. Strangway. Clearly Saturday the 12th was some 5 days from what would have been his 121st birthday.

I couldn't have prepared a more perfect moment to be asked by our Consul to present a vision of what the next ten years in Angola could look like. "Sir", I said "If God should spare me for another decade to be the age of my colleague, Dr. Collins who is 82, I would like to prepare up to a 100 new Doctors, nurses, admin folk and midlevel providers, capable of bringing health care at the primary and secondary level to the rural people of Angola. We need your permission to launch a pilot 'skunk works' program, admittedly at first in only 4 municipalities. Once proof of concept, costs, impact on health indexes, etc. are known, then generalization to other areas can be carried out."

Angola has drunk the "wine of Cuba" for too long. At that, he smiled. We are shackled to inappropriate models of health care delivery whereby without 40 different specialists present in a hospital, nothing happens. We need polyvalent generalists in the 2nd line of care, able to handle 80% of the traffic. They would refer appropriately, instead of inundating our tertiary care hospitals with floods of primary care needs.

I said further, "Sir, we in the Churches of Angola have had our hands tied. Undo our handcuffs please." He smiled! I said, "I have been here for 42 years and my other Christian colleagues up to ten years and none of have been recognized by your Angolan College of Physicians and Surgeons. Please allow us to work!"

He asked what all this would cost i.e. to train Human Resources, to rehabilitate broken hospitals and create the teaching hospital over the next decade

I told him that \$25 million USD would get us started. He turned to his cabinet chief and said, "That's only 2.5 million per year. Let's do it. Please get Dr. Foster's contact details."

There are many more handcuffs for which we still need some appropriate lock pickers to go to work on.

Some include a legal framework for recognizing rural doctors, generalist surgeons, and mid-level provider career paths.

We need a framework for Not for Profits hospitals to function. We at CEML are treated as a for-profit business. We are charged taxes, GST, and pay through the nose for medications and equipment as we are forced to use middle men, too many of whom are embedded within the past systems. Will our new mandate unlock these doors?

Some of the handcuffs have been of our own making. For example, distrust between denominations, competition for scarce resources and, at times, unwillingness to share ideas has too often been characteristic of our past. May God forgive us!

Will you pray for the work ahead? Our working group has the next ten days or so to generate a Vision Statement, Core Values, Problem Statements, and Expected Results. We will be needing an External Group of Consults to help us build the path towards vision implementation. We simply aren't sure how the President's Office functions as this is uncharted territory for us all.

May we be found faithful in lifting up the Name of Jesus above all else!      Stephen & Peggy Foster

## A MISSIONARY PHYSICIAN MADE A DIFFERENCE

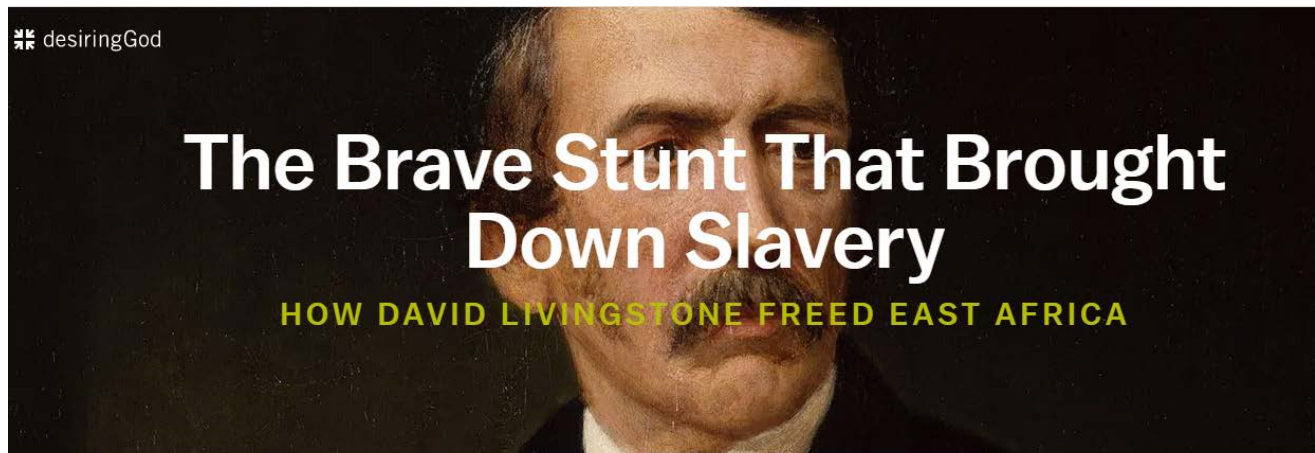
By John Piper

*Editor's note: In May 2020, John Piper, the renowned pastor and theologian, wrote this article entitled "The Brave Stunt That Brought Down Slavery: How David Livingstone Freed East Africa" which appeared on his website: <https://www.desiringgod.org/articles/the-brave-stunt-that-brought-down-slavery>. William Wilberforce, a major influence for abolition in England, died when Livingstone was 20 years old and his work certainly set the stage for the work of Livingstone. Here are some famous quotes from Livingstone, a Scottish physician and missionary:*

*I am prepared to go anywhere, provided it be forward.*

*If you have men who will only come if they know there is a good road, I don't want them. I want men who will come if there is no road at all.*

*Nothing earthly will make me give up my work in despair.*



Have you ever heard about the extraordinary effect that the life of David Livingstone (1813–1873) had on the East African slave trade? It received only a passing sentence in [an article](#) I wrote two years ago. Then that summer, another world opened to me. I read Jay Milbrandt's [The Daring Heart of David Livingstone: Exile, African Slavery, and the Publicity Stunt That Saved Millions](#). I would like to give you a window into that world.

Milbrandt's subtitle is not only provocative; it prepares you for what's coming. "Exile" refers to the long stretches of time Livingstone spent in the eastern interior of Africa, cut off from his homeland — sending, in one season, over forty letters, only to have one get through.

"African Slavery" refers to "the devilish traffic in human flesh" feeding not the American plantations from West Africa, but the plantations of Arabia, Persia, and India, especially via the routes through the island of Zanzibar off the eastern coast of today's Tanzania.

"The Publicity Stunt" refers to Livingstone's internationally hyped expedition to find the headwaters of the Nile. Milbrandt calls it a "stunt" because Livingstone's deeper motive was not the Nile. "Livingstone was no longer mounting a Nile expedition, but a grand publicity stunt. The Nile quest provided the platform he needed to campaign against the slave trade" (118).

The final phrase of the subtitle, "That Saved Millions," carries more than one meaning. Not only was slavery declared illegal in colonial East Africa 36 days after Livingstone's death, but his larger dream to see a "Christian



Africa” was in one sense realized 140 years later, because “as of 2012, a Pew Foundation study reported 63% of Sub-Saharan Africa as identifiably Christian” (247).

### Missionary, Doctor, Advocate

David Livingstone did not set out to be a global voice for the healing of the “open sore of the world” — the East African slave trade. He set out to heal the disease of sin with the gospel, and the diseases of the body with medical training — all the while believing the Africans were not subhuman.

As a young man, he heard Robert Moffat, a missionary to South Africa, say, “I had sometimes seen in the morning sun the smoke of a thousand villages where no missionary had ever been.” This image captured him. God’s call emerged as Moffat’s testimony mingled with Livingstone’s confidence that the word of God would do its saving work:

The Word written *shall* find its own mysterious tortuous way into every region, dialect, and language of the earth; and men *shall* be convinced of sin, as well as taught their need of a Saviour by its life-giving power. It *shall* whisper peace to the agitated conscience, and tell of the love of a Father reconciling the world to himself by the blood of his Son. ([Dr. Livingstone’s Cambridge Lectures](#), 179)

Then two more pieces of Livingstone’s calling were put in place. One was his conviction that medical training was crucial. Waiting to be sent by the London Missionary Society, Livingstone studied medicine at the Charing Cross Hospital Medical School. He said,

My great object was to be like Him, to imitate Him as far as He could be imitated. We have not the power of working miracles, but we can do a little in the way of healing the sick, and I sought medical education in order that I might be like Him. (*Daring Heart*, 21)

The other piece of his calling was the conviction that Africans were fully human — as he would discover, to his horror, the slave traders did not believe, with murderous results.

In answer to objectors, we would say, Were not the ancient Egyptians true Negroes? They were masters of the civilization of the world. When Greece was just emerging from the shades of barbarism, and before the *name* of Rome was known, the *negro-land* of Mizraim was proficient in science and art, and Thebes, the wonder city of the world. Solon, Plato, and a host of *our* Greek and Roman intellectual masters confess their obligation to the stupendous “learning of the Egyptians” in which Moses was so apt and able a scholar; notwithstanding, too often does the *white man* of the present day undervalue the humble descendant of that giant who helped to make him what *he* is! ([Dr. Livingstone’s Cambridge Lectures](#), 124)

The seeds were all sown for the fury and perseverance Livingstone would repeatedly experience in the years to come, as he came closer and closer to “the open sore of the world.”

### ‘Establishing Trade, Destroying Slavery’

At first, he was optimistic that legitimate commerce with East Africa would dry up the need for slave capturing and trading. “I believe we can by legitimate commerce, in the course of a few years, put an entire stop to the traffic of slaves over a large extent of territory” (*Daring Heart*, 23). He believed this would even have profound effects on West African slave trading with America:

England has, unfortunately, been compelled to obtain cotton and other raw material from the slave States, and has thus been the mainstay and support of slavery in America. Surely, then, it follows that if we can succeed in obtaining the raw material from other sources than from the slave States of America, we should strike a heavy blow at the system of slavery itself. (36)

Over time, Livingstone came to see that “establishing trade and destroying slavery,” though connected, would not be achieved without working to turn the hearts of the entire British establishment, at home and in the colonies, against a trade that they were almost totally ignorant of. Hence his “stunt.”

### Picking Up His Pen

At great cost to himself, Livingstone probed deeper and deeper into the darkness of the Arab and Portuguese slave trade, with indirect British support.

On humanitarian grounds, the expedition had also uncovered the immense and devastating Arab slave trade and its routes through the Nyassa region to Zanzibar. These findings were new, informing the world and the British foreign office of unresolved horrors. (104)

In 1864, he returned to England and took up his pen. In his earlier book *Missionary Travels*, he had written cautiously about the slave trade. But in recent years, in his travels along the Zambezi River, he had seen unspeakable cruelty. So in the preface to *A Narrative of an Expedition to the Zambezi and Its Tributaries*, he wrote, "It has been my object ... to bring before my countrymen, and all others interested in the cause of humanity, the misery entailed by the slave-trade in its inland phases" (110).

He had set his face to return to Africa and press on with his explorations and his exposure of the "gigantic evil" of the slave trade. "I am going out again.... It is only by holding on bulldog fashion one can succeed in doing anything against that gigantic evil, the slave trade" (121).

### 'Sick of Human Blood'

What he saw as the years went by got worse. He describes one experience in which four hundred villagers — men and women — were gunned down. A slave trader named Dugumbe wanted complete control of the area without competing traders. One village was complicit in trading with others. Violence broke out.

As the assailants continued their indiscriminate slaughter in the marketplace, an armed party near the Creek opened fire on those dashing toward the water. Even as the villagers, mostly unarmed women, attempted to flee across the nearby river, the attackers continued to fire on them. Aiming for their exposed heads, they shot those trying to swim to safety.... Dugumbe's men had gunned down 400 men and women, all unarmed, and even killed two of their own. Then they followed the people back to their homes. The warfare continued. Livingstone counted 12 burning villages. (174)

Livingstone wrote with great heaviness, "The prospects of getting slaves overpowers all else, and blood flows in horrid streams. I am heartsore, and sick of human blood" (172).

### Seeking the Nile, Finding a Mouth

In a letter to his brother, Livingstone reasserted the terms of the "stunt":

If the good Lord permits me to put a stop to the enormous evils of the inland slave-trade, I shall not grudge my hunger and toils. I shall bless His name with all my heart. The Nile sources are valuable to me only as a means of enabling me to open my mouth with power among men. (210)

In fact, the "stunt" worked. Both in England and America, Livingstone's "mouth" — that is, his correspondence — was being heard with power. The famous Henry Stanley ("Dr. Livingstone, I presume") had been sent by the American newspaper the *New York Herald* to find Livingstone after six years of being out of touch. He found him in November 1871, spent four months with him, came to love and admire him, and gave him a global voice by publishing his letters about the slave trade.

On July 2, 1872, Livingstone wrote in the *Herald*,

If my disclosures regarding the terrible Ujijian slavery should lead to the suppression of the east coast slave trade, I shall regard that as a greater matter by far than the discovery of all the Nile sources together. (201)

Stanley's book *How I Found Livingstone* was very popular both in America and England. It made Livingstone not just a British hero, but a transatlantic one. In another letter to the *Herald*, he repeated his life priorities:

It would be better to lessen this great human woe than to discover the sources of the Nile... May Heaven's rich blessing come down on everyone, American, English, or Turk, who will help to heal this open sore of the world. (207)

### The Awakening of Parliament

The effect of Livingstone's communications in Britain was more than popular. It was political. Livingstone was informed by the head of the Royal Geographic Society, H.C. Rawlinson, that British intervention in Zanzibar was imminent:

You will no doubt have heard of Sir Bartle Frere's deputation to Zanzibar long before you receive this, and you will have learned with heartfelt satisfaction that there is now a definite prospect of the infamous East African slave-trade being suppressed. For this great end, if it be achieved, we shall be mainly indebted to your recent letters, which have had a powerful effect on the public mind in England, and have thus stimulated the action of the government. (214)

The sultan of Zanzibar was given an ultimatum: "Consent immediately to the terms of the slave-trade-suppressing treaty, or face a blockade by British naval forces" (215). A little over a month after Livingstone's death, the Zanzibar slave market closed forever. Queen Victoria announced the success to parliament: "Treaties have been concluded with the Sultan of Zanzibar . . . which provide means for the more effectual repression of the slave trade on the east coast of Africa" (221).

### Entering Glory on His Knees

On May 1, 1873, David Livingstone was found dead, kneeling beside his bed with his face in his hands on the pillow. His longtime African servants and friends removed his vital organs in preparing the body for preservation and return to England. They buried his heart in a tin flour box under a mvula tree. Jacob Wainwright read Scripture and carved Livingstone's name into the tree (217).

After nine harrowing months of an extraordinary labor of love, Livingstone's body reached the coast of Africa. It arrived in England on April 15, 1874, to a national day of mourning. The April 18 funeral was paid for by the British government. Amid huge crowds, his body was laid to rest in Westminster Abbey. His epitaph reads, in part,

For 30 years his life was spent in an unwearied effort to evangelize the native races, to explore the undiscovered secrets, to abolish the desolating slave trade . . . this open sore of the world.

*Punch*, a London magazine, muted its satire to bid farewell to David Livingstone:

*He knew not that the trumpet he had blown  
Out of the darkness of that dismal land  
Had reached and roused an army of its own  
To strike the chains from the slaves fettered hand...*

*He needs no epitaph to guard a name  
Which men shall prize while worthy work is known  
He lived and died for good be that his fame  
Let marble crumble this is Living stone. (228)*

## NEWS SHORTS:

- **Loss of Infant Child:** It is with heavy heart that we announce the unexpected death of four-day-old Ian Sael, the first-born son of Galmi second-year resident Sadock Irankunda and his wife, Albine Nitbanyiha. The child had congenital heart disease and was buried 25 September in the Christian cemetery at the SIM-Galmi hospital. Please pray for the Irankundas and for the whole community for peace and comfort.
- **PAACS to Begin Anesthesia Training:** The need in Sub-Saharan Africa for anesthesiologists is even greater than the need for surgeons – and obviously surgery without good anesthesia is difficult. The first-ever PAACS training program in anesthesiology is slated to begin at AIC-Kijabe Hospital in January of 2021. It will be three years in length if the trainees have completed their internship but may be extended to four years in the future. They plan to begin with two residents and already have 7 complete and over 30 incomplete applications. For a variety of reasons, they are initially taking only candidates from Kenya in order to select candidates they can investigate fully and to avoid visa issues in this troubled time. They expect to make their selection by mid-October.

On September 16, the task force leader Dr. Elizabeth Drum reported to the PAACS Program Committee that progress was being made. They are on target with the necessary fund-raising and working with the Friends of Kijabe group to that end as well as exploring other possible grants. They are pursuing government recognition for the program.

Rodger Barnette, the likely Program Director, as well as Mark Newton are presently both in the US on home assignment. Barnette plans to return to Kenya in November and the date of the Newtons' return is still uncertain. Greg Sund, previously a missionary anesthesiologist at Kibuye Hospital in Burundi, moved to Kenya in order to participate in this program and arrived in mid-August. Matt Kynes is planning to join the faculty sometime in mid-2021.

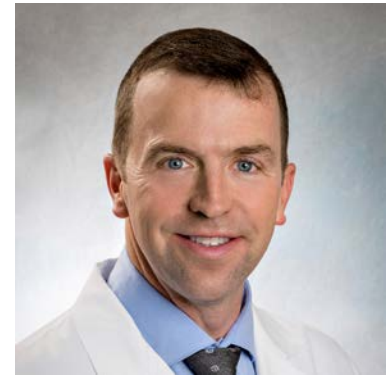
- **Update on Civil Unrest Around Soddo:** In last month's PAACS Bulletin, Tim Love told of the civil unrest which necessitated the relocation of the expatriates, both short- and long-term missionaries. In an e-mail dated 27 September, he wrote, "Things here in Soddo have calmed down. The previous government and community leaders have all been removed from office and replaced with new officials by the federal government. While there is still some tension in town, the new leaders are all local folks and so there haven't been any more public riots or violence. We got back to Soddo... just a few days ago and immediately started call to get Gezahegn out of town for a break with his family. ...David [Jeffcoach] is set to return with his family next weekend. We pray that after all the upheaval caused by the violence and by COVID we will be able to get back to a more normal rhythm with clinical work, elective cases, and resident activities very soon. We are still awaiting news of when our national election will take place and praying that some of the ethnic strife and upheaval that has been happening all over the country will continue on the downtrend until then."



- **Dr. Moselle Stark Receives Teaching Award:** Dr. Moselle Stark, an obstetrician-gynecologist, who will join the faculty at the start of the PAACS ob-gyn program at Tenwek in 2021, has received the 2020 National Faculty Award for Excellence in Resident Education award from the American College of Obstetricians and Gynecologists. She presently lives in Columbia, Missouri. Moselle Stark is the daughter of Dr. Joe Starke, the previous PAACS Program Director at Galmi and when she married Kevin Stark, her name didn't change – just the spelling. They have three children and will be going to Tenwek Hospital in Kenya under the aegis of the World Gospel Mission.

- **Robert Riviello Given ACS International Volunteerism Award.** The American College of Surgeons Board of Governors Surgical Volunteerism and Humanitarian Awards Workgroup has announced recipients of the 2020 ACS/Pfizer Surgical Humanitarian Awards and Surgical Volunteerism Awards.

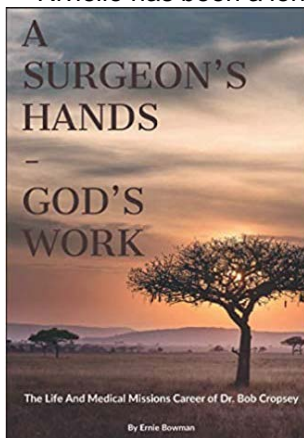
Robert Riviello, MD, MPH, FACS, a trauma, burn, and acute care surgeon in Boston, MA, will receive an International Surgical Volunteerism Award on 7 October for his work in improving access to medical care for populations in sub-Saharan Africa. Dr. Riviello, a surgeon at Brigham and Women's Hospital, and associate professor of surgery and of global health and social medicine at Harvard Medical School, began his career in global medical service as a Fulbright International Fellow in Global Surgery at Centro Evangelico de Medicina in Lubango, Angola, which is now a possible future PAACS training hospital. While there, he helped to open the hospital and provide broad-based general surgery services.



Subsequently, Dr. Riviello worked with Partners in Health in Rwanda, as well as local Rwandan medical organizations, to co-direct Harvard's engagement in the Rwanda Human Resources for Health Program, meant to increase local health provider skill and scale up services in the country.

These collaborative efforts revitalized training programs in general surgery, anesthesiology, and gynecology, and supported the launch of new University of Rwanda training programs in orthopaedics, urology, neurosurgery and, most recently, plastic surgery. During these years, Dr. Riviello also served as a faculty surgeon at the University Training Hospital in Kigali, Rwanda; associate to the head of the department of surgery of University of Rwanda; and surgery liaison for Partners in Health-Rwanda.

Riviello has been a long-time advocate and supporter of PAACS, has attended commission meetings and has published papers in conjunction with several of the PAACS faculty members. There is now a considerable tradition of surgeons associated with PAACS in some meaningful way who have won either the international volunteerism award or the international humanitarian award from the ACS-Pfizer program, part of Operation Giving Back.



- **Biography of Dr. Bob Cropsey Available:** The biography of Dr. Bob Cropsey, long-time surgeon in Togo and a member of the advisory and general surgery councils of PAACS, has been published. Written by his assistant pastor, "A Surgeon's Hands – God's Work" tells the story of a man used by God to help found two hospitals, plant numerous churches, raise a family, and save lives on the frontier of modern missions. The biography is available in both paperback and Kindle format from Amazon. [Click here.](#)



- **Spiritual Gift of Shopping:** If you want to exercise your spiritual gift of shopping and use Amazon (who doesn't?), you can both shop and help PAACS. Now that PAACS has become an independent ministry, we have been able to complete our registration as a charitable organization with the AmazonSmile Foundation. When you start your shopping through Smile.Amazon.com, Amazon will donate 0.5% of the price of your eligible purchases to PAACS. You'll find the exact same low prices, vast selection and convenient shopping experience as Amazon.com, with the added bonus that Amazon will donate a portion back to PAACS. Register your existing Amazon account to our charity link and start shopping today: <https://smile.amazon.com/ch/84-2569391>
- **Hospital Seeks PAACS graduate:** Compassion Evangelical Hospital in Mamou, Guinea (l'Hôpital Evangélique Compassion (HEC) de Mamou en Guinée Conakry), a 44-bed rapidly growing mission hospital in central Guinea which opened in 2011 is **seeking to hire a general surgeon who is a PAACS graduate** to join a general surgery residency trained Christian African missionary surgeon from Cote d'Ivoire, Dr. Paul Sidjani, and four Christian Guinean generalist physicians, including one with additional training in OB/GYN.

"Self-sustaining, African-led, whole person optimal health for Guineans" defines our long-term goal. The hospital operates according to our love-in-action mission statement, "Compassion Evangelical Hospital (CEH) shares the gospel of Jesus Christ while providing compassionate, quality, culturally appropriate healthcare and education."

Tens of thousands of Muslims have heard the gospel at CEH and hundreds have professed faith in Jesus Christ. A large number of Mayo Clinic surgical staff are involved with CEH with plans for regular short-term trips to CEH to teach, practice and facilitate research and to grow the surgical practice in the hopes of someday establishing a PAACS training site at CEH.

A Christian school beside the campus provides excellent grade school education through eighth grade; its graduates have scored among the highest test scores in the country. A number of young, vibrant churches have been planted in the area. CEH offers a good salary and benefits package. If interested, please contact M. Etienne Z. OUATTARA, MBA, MHA, PhD (candidate), Directeur de l'Hôpital Évangélique Compassion at [cehdirector@yahoo.fr](mailto:cehdirector@yahoo.fr) 00(224) 666 44 33 44/622 25 38 28 or BP 05 MAMOU/GUINEE

## ANNOUNCEMENTS:

- **2020-2021 Prayer Guide Available for Download:** The 25<sup>th</sup> special anniversary edition of the PAACS Daily Prayer Guide is available by [clicking here](#). This 80-page document is divided into suggested prayer topics for each of the 30 days each month. If you would like a printed copy mailed to you, please send an e-mail to [info@paacs.net](mailto:info@paacs.net).

The Daily Prayer Guide has been published in the fall of each year since the inaugural edition in 2009.



- **Dieudonné Lemfuka to Give Webinar:** Dieudonné Lemfuka (Bongolo 2019) is scheduled to be the speaker on October 14 at 12pm EST. The talk is entitled "Training Christian Surgeons: An Answer to the Surgical Need in Africa?" This is part of the monthly ongoing Samaritan's Purse International Health Forum held as a webinar. Participation grants one hour of continuing medical education grant. To sign up, go to <https://www.samaritanspurse.org/spihf-event-signup/>

- **Virtual Free ACS Clinical Congress.** The 2020 Clinical Congress of the American College of Surgeons is now open for registration and free to all surgeons. It will run from October 3-7. ACS members can register by [clicking here](#). Non-Members can register by [clicking here](#).

Although there is no registration fee, **all attendees must register online** to gain access to Clinical Congress sessions. Your registration will include access to the virtual Clinical Congress, including

- Named Lectures
- Panel Sessions
- Scientific Forum presentations
- Academy of Master Surgeon Educators Symposium and lunchtime sessions
- Video-Based Education Sessions
- Meet-the-Expert Sessions
- Resident Program
- Medical Student Program.

The aforementioned sessions will be presented during seven hours of programming each day, using multiple channels. Registration will also include on-demand access to this content through at least the end of the year. You can visit the [ACS Clinical Congress Interactive Program Planner](#) to look through all sessions and plan your virtual meeting! The entire program is now available! [Click here to view!](#)

- **Short-term and Long-term Surgeons Needed at Bongolo:** Drs. Zach and Jen O'Connor will begin their two-month home assignment in late September. There is a desperate need for coverage during that time. Also, the Bongolo Hospital general surgery residency program needs a general surgeon who is able to serve under a sending agency for at least 2 years starting in 2021. Please contact [bongolopd@gmail.com](mailto:bongolopd@gmail.com) if you are interested and able to serve in either time frame.
- **Short-term and Long-term Surgeons Needed at Harpur:** Dr. Sherif Hanna will be returning in September to Harpur Memorial Hospital in Egypt for several months before retiring. The PAACS program at Harpur Memorial Hospital in Menouf, Egypt needs a General Surgeon for long term (preferably) or short term (several months) service starting in April 2021. For further information please contact Sherif Hanna via email: [dr.sherif.hanna@gmail.com](mailto:dr.sherif.hanna@gmail.com)
- **New Address for Donations to PAACS:** All donations should be sent to:
 

PAACS  
PO Box 735262  
Dallas, TX 75373-5262
- **New websites:** PAACS has rolled out their newly revised website ([www.paacs.net](http://www.paacs.net)) and sometime in October, COSECSA is rolling out their revamped website. Visit the new PAACS site and keep an eye out for the announcement for the COSECSA website.
- **Interactive Session with Thelander:** MedicalMissions.com has just posted the audio recording for a session led by Keir Thelander on "Surgery and Missions" from the 2019 Global Missions Health Conference. [Click here](#) to hear the hour-long recording.
- **Mark your calendar** for the following events you may wish to attend or uphold in prayer:
  - **PAACS Global Day of Fasting and Prayer.** Two prayer Zoom calls will allow global participation. [Click here](#) to view the prayer requests and the information needed to register for the Zoom call for the PAACS Global Day of Fasting and Prayer.

- **PAACS Biannual Board Meetings**

- Fall 2020 PAACS Board of Directors Meeting Friday October 30 starting at 9:00 for the open session. You can register to attend via Zoom by [clicking here](#).
- Spring 2021 PAACS Board of Directors Meeting Friday and Saturday, April 23-24, 2021. The venue and nature of meeting (in-person or video conference) is still undetermined.

- **African Colleges Exams & Conferences:**

- COSECSA MCS and FCS oral exams in Zambia have been cancelled. The MCS will be in the first two weeks of December at multiple sites but the date and locations have not yet been set. The FCS oral exam will be delayed until sometime in the spring of 2021.

## **PRAYER REQUESTS:**

- Pray for PAACS resident Dr. Sadock Irankunda in the death of his 4-day old son Ian who was found to have a congenital heart problem.
- Pray that God will indeed “turn the heart of the King” in Angola and open up the country in such a way that the Christian hospitals and missionaries are more welcome and training can begin.
- Pray for healing and salvation for this world in the face of this pandemic.
- Pray for internal peace, in light of the pandemic, as the PAACS family faces the uncertainty of separation from family, of unknown medical demand, and limited medical resources.
- Pray for all the PAACS faculty members and the hospitals – for personal health and safety and for financial viability of the charity hospitals in this tough time.
- Pray for the faculty members and residents who may have contracted the virus, have quarantined, may already have positive testing. Pray for those who carry the clinical load while others are sick and/or quarantined.
- Pray that the international flights will re-open to allow two-way traffic to the hospitals so that both long-term and short-term faculty can travel safely and conveniently. Pray that God will make it possible for the short-term missionaries to return to service in the mission hospitals.
- Praise God for the good performance by PAACS residents on the COSECSA written exams. Pray for the MCS candidates as they study for their oral exams in December and the FCS oral exams in the spring of 2021.
- Peace and stability in the PAACS countries. Pray especially for the ongoing tribal unrest in Ethiopia and the recurrent of civil unrest in Cameroon.
- Pray for the Loves who have returned and the Jeffcoaches and Andersons who will soon return to service in Ethiopia. Pray for safety for all of the Soddo Christian Hospital personnel specifically Dr. Gezahegn who has been carrying a heavy load.
- Pray that PAACS will glorify God and be used to impact Africa for His Kingdom. Plead that many lives will be saved through surgery and many people will come to know the love of Jesus.



- Pray that God will provide the right applicants for PAACS for the 2021 training year and that the remaining programs who have still to complete their roster will make the right selections.
- Request strength, stamina, wisdom, and blessings upon the PAACS faculty as they seek to train and mentor PAACS residents. Pray that God will bring His chosen long and short-term missionary and national surgeons to help train African residents in the PAACS training programs.
- Pray for PAACS graduates that are serving God's people. Pray for God's grace, protection, provision, strength, and blessings to cover the PAACS graduates.
- Ask God for success and needed help for all of the 16 current PAACS programs. Pray that governmental approval of the plastic surgery program will come for the AIC Kijabe Hospital in Kenya and that COSECSA and the Kenyan government will approve the Surgical Endoscopy Fellowship at Tenwek Hospital.
- Pray for the programs hoping to open in January 2021: General Surgery at Kibuye Hope Hospital in Burundi, Plastic Surgery at Kijabe Hospital, Ob/Gyn at Tenwek Hospital, Neurosurgery and Surgical Endoscopy at Tenwek Hospital, and Anesthesiology training at Kijabe Hospital.
- Pray for the present manpower shortage at the mission hospitals.
- Pray for the ongoing need for general surgery faculty at Kijabe, which is most necessary between now and July 2021.
- Pray for the Harpur training program with the return of Sherif Hanna on September 29 and the arrival of Paul Lim and his family (plastic surgeon) on October 18. Pray for the Laverys as they have further language training in Cairo in the coming months. Pray for the pending transition of the leadership team over the next six months.
- Pray for the needs at Bongolo Hospital – during the O'Connor's home assignment in October and November and for a shipping container coordinator. Pray that God will provide both short-term and long-term faculty at the hospital.
- Pray for the Soddo-Cure Orthopedic Program in Ethiopia that has a great need for additional faculty members at Soddo Christian Hospital and pray for the Tenwek Orthopaedic Training Program which has an equally great need.
- Pray for those faculty members on home assignment – the Parkers, the Snells and soon, the O'Connors – for their rest, for the times of medical work and for the largely impossible task of meeting with their supporters and raising funds. Pray for the faculty members that must cover their absence.
- Pray for those surgeons who are planning to join PAACS in the next few years – as they complete their residencies or fellowships, as they find a sending agency, as they raise the necessary money and as they prepare for the major cultural shifts.

Editor: Bruce C. Steffes, MD