

women's

# Vanuatu Outreach on Board Pacific Hope

By Revd Isabel Mordecai



#### Colossians 4:5

Conduct yourselves wisely toward outsiders, making the most of the time. Let your speech always be gracious, seasoned with salt, so that you may know how you ought to answer everyone.

This verse was quoted to us, at worship time on our final morning of our Vanuatu outreach, by Jim Orr. Jim was a Pastor and a crew member of the ship *Pacific Hope*. He was saying that it was not possible to share the whole experience with others – you had to be there. However, I will try......

On 26 August 2017, I flew from New Zealand to Port Vila for a 2 week visit as a Registered Nurse and Chaplain to Vanuatu. I was met by the crew of the *Pacific Hope*, a fully set up medical ship which has been visiting the Pacific Islands offering medical aid to the Islanders since 2013.

We sailed overnight from Port Vila for the largest Island in Vanuatu, Espiritu Santo and we moored off a large west coast village called Tasiriki. This village can only be reached by sea or 4 wheel drive vehicles, over dirt roads fording rivers on the way. Approximately 1,000 people live in the village or in the hills that surround it.

We were given the use of their medical centre where two local nurses work so we were able to set up a Primary Health Care Clinic, an Eye Clinic and a Pharmacy in these buildings.

I worked in the pharmacy giving out the prescribed medications to patients and praying with each patient as I did so.

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We had two Doctors and five other nurses in the team. One nurse in charge of registrations and four nurses were triaging patients. The clinics were very busy.

As there was a very large Presbyterian Synod happening in this village the same week, we had lots of patients from this Synod visiting. People had travelled from the many Islands of Vanuatu to attend Synod so it was a good opportunity for them to be checked out by either our Medical Clinic, the Ophthalmology Clinic or to be taken aboard the Chaplain who provided the Ship to the Dental Clinics.

Many patients walked sometimes up to 12 hours to visit our clinic, staying overnight in the village before making the

The village of Tasiriki and the medical centre buildings that the Pacific Hope medical team used during their visit for providing specialized clinical services. Right: Revd Isabel Mordecai, Registered Nurse & Pharmacy services on behalf of the team. Below Right: Sacks of Copra are ready for shipping to Luganville.

return trip home. We were lucky to also have a group of three occupational therapists and a physio therapist working with us. They did exercise classes, health education and home visits, fitting stroke patients to wheelchairs, providing walkers to help mobilise some of the elderly people who were otherwise restricted to their home surroundings.

The main income for this village comes from producing copra, from coconuts. The copra is shipped to Luganville, the largest city on Espiritu Santo, to be processed into coconut oil. Unsurprisingly, a lot of our patients were people with back and shoulder problems from lifting these heavy sacks of copra.

Copra is the processed dried kernel of the coconut utilised in the extraction of coconut oil and is used for a variety of purposes. One coconut palm nut can yield around 80-500g of copra. As a food as it an important source of nutrients including proteins, vitamins, and minerals. Hot pressing of the copra yields a low-melting oil having a melting point of just 23°C which can be used in cooking and as a raw material for preparing hair oils, shampoos, detergents, margarine, etc. The residual material, known as coconut cake, is a valuable concentrated feed for livestock.

Many people presented with diabetes, caused by their poor diet, e.g. having 6 teaspoons of sugar in their tea was common among the villagers. There were many skin conditions, such as impetigo and yaws and children with viral illnesses, asthma



trip to Luganville entailed a 3-4 hour dirt road trip, usually in a 4WD vehicle fording rivers on the way—no small feat so they are fortunate to have Toyota 4WD vehicles provided by UNESCO and other aid agencies.

We started our days in prayer at 7.45am before we left the Pacific Hope on the Rigid Inflatable Boat (RIB) which took us to the shore where our medical clinic was set up. We prayed again before we saw the first patients and we tried to make sure that each patient was prayed for, either by the doctors/ nurses or by myself as the pharmacist, as I gave them their



#### medications.

After dinner we would meet and share some of the stories and photos on the large screen about our day. We had the weekend off.

A highlight for me was a trip in the RIB tender to Wusi village. Wusi village is approximately 23km north of where we were moored at Tasariki village. This is a very small village, all the men were out working in the plantations on the hills and only the women and children were there when I visited.

This village is the only place that still makes earthenware pots. We met the women who make these pots and they invited us into their thatched hut. Here they mould the clay and bake the pots on an open fire as there is no kiln or furnace for them to use. They told us it takes a month to make one pot. I bought one for 400 Vatu, about NZ\$5.00.



We had a very rough long trip in the RIB back to the ship, unfortunately a sec-



The occupational and physio therapists were also busy leading exercise classes and teaching them about good lifting techniques and visiting less mobile people in their homes.

Again there were many children who presented with asthma, skin conditions or ear ache (called 'divers ear'). Since there were some sexually transmitted infections in this village, we reflected together that women's health and sex education needed to be addressed by health workers here. On the second day we had a record number of 90 patients through our

clinic.

We had two local Ni-Vanuatu people who were interpreters for us. They also were promoting Oral Health in the villages, so they gave out hundreds of packets of toothbrushes and toothpaste. Unfortu-



ond group booked for the afternoon trip couldn't go because of the weather and sea conditions.

On Sunday morning, the starting of the ship's motors woke us all at 5am. We were soon travelling north for three hours to the village of Tasmate where ap-

Left: Earthenware pots from Wusi. Centre: The team used the village communal eating hall as their medical clinic while in Tasmate. Right: The team gifted children balloons & toys.

proximately 100 people live in this village. We were welcomed by the Chief and Village Elders. We introduced ourselves, shook hands and prayers were said by our Medical Director. Its traditional to shake hands with every person you meet in the village - especially if you pray with them or give them medications.

We set up our clinic in a thatched roof building with a sand floor. As it is usually the village communal eating hall, we had frequent visits from the local chickens, pecking for scraps to eat!

We stayed in this village for three days and saw many patients.

nately, there were a couple of shops in the village

that also sold lollies which all the children seemed to love.

On our first day in Tasmate, the Occupational Therapy group discovered a young 9 year old boy with Cerebral Palsy. Kaitila could only drag himself along on his bottom through the dirt using his right arm. He spent his days sitting and watching the other children playing, without any expectation of playing with them, or going to school. He was well loved, but no one talked to him, and it seemed that most of the village folk assumed he could not speak. The team started with giving him a yellow ball to play with, they taught him how to throw the ball to them and how to catch the ball. They gave him a new wheelchair from "Wheelchairs for Kids" donated by *Joint Therapy Outreach* and Sam and Arvie, engineers from the *Pacific Hope*, and Heather an Occupational Therapist, set about modifying the chair for him to use. Kit (Physiotherapist), Robyn (OT) and Anthea (Speech Language Therapist) showed the family exercises and games they could encourage him to do, to improved his strength, so he could play with the other children. It was amazing to see how in such a short time, he really came alive and smiled, laughed and talked with the other children. The amazing team from *Pacific Hope* had given him dignity and hope, his life was transformed and the team also noticed that the attitude of the villages towards him was being



changed as well!

The people of this village were lovely generous happy people. They kept us supplied with oranges and grapefruit. And on our last day they provided Taro, sugar cane, bananas and fruit for our lunch.

Tasmate is a very poor village with many wearing ragged and soiled clothing. We left lots of clothes behind, including tee shirts, skirts and shirts. They were all so



thankful for our aid, not only the work done by the Primary Health Team, but also the glasses and eye tests provided by the optometrist group and the free dentistry provided by the dental team on board the Pacific Hope.

On the last day Dr Sace saw a baby who only weighed 2.6kg smaller than its birth weight. I found this upsetting to see such a small helpless malnourished infant unable to get any sustenance from her mother's breasts. The mother looked malnourished as well. Our Doctor and interpreters urged the mother to take the baby to hospital, in Luganville – a trip which the Ships Director said we could help with.

Dr Sace Buma tells the story in a recent email he sent to our team.

I received great news today. I got a text message from Honore, the father of little baby Lali, whom we rescued from certain death through malnutrition. She was only two months old and weighed just 2.6kg. As you will remember, the ship diverted to Tasiriki, so we could drop her and her mum off and so that they could get a truck the next day to Luganville.

Well, he messaged me that today she weighed in at 2.95kg and she was growing stronger. He thanked us for our prayers and help. This is such lovely news. Lovely to know that she actually did go to hospital, and did not just take the next boat back home with the money we gave her. Lovely that she is receiving the correct treatment in hospital and that her father is there with her. And above all that she is finally thriving, having put on nearly 400gm in just a week. Praise God for this little miracle. Without all of our help in getting her there, she would have almost certainly died. Thank you, Mike, for suggesting we could take her on the ship and drop her off at Tasiriki; and you, Dora, together with Anthea, for your gentle persuasion of the mother that finally helped convince her to come onto the ship and start the long trip to hospital. Please keep praying for her and her family.

Every patient we saw was registered in an excel spreadsheet

and all the statistics about their visit passed on to the Vanuatu Health Department.

A couple of nurses and myself reflected with Jim Orr, a crewman and pastor, about what was the best part of our outreach. We all had different experiences, I loved the rides on the RIB tender to the beach and back to the ship - it was inevitable that we would get wet - drenched in spray and sometimes wet skirts as we tried gracefully to jump out of the tender onto the shore. We soon dried however as it was around 35 degrees most days.

Dr Sace reflected with us about the calmness of the room in Tasmate where we were working as the Primary Health team. He said he looked around and everyone was talking quietly to patients, everyone was busy and happy. He felt the peace and love of God in the room.

I also observed this from my seat in the 'Pharmacy' corner. I thought how different this is to a Western Medical Clinic which has shiny floors with people rushing everywhere, the noise of equipment being trundled along and the noise of beepers and phones; it was quite a contrast.

I reflected that the mission has been full of hope, kindness and love, not only for the villagers we met, but we too had been blessed by the love that we were shown by others involved in the trip.

The crew looked after us very well. Jim said they were there to serve us, so we could serve the people in the villages. I never heard a bad word said. There was lots of fun and laughter shared and the crew all got on well together. The food was almost vegetarian and was made with love by the wonderful cooks we had.

We all had kitchen duties, such as clearing away and washing

the dishes but no one complained. We had great worship sessions, music and prayers and a funny talent quest one evening. A highlight was from the Captain of our ship - Captain Klaus - who had a little book of German tales. He also quoted a poem about "the road less travelled" by Robert Frost.

There were thirteen nationalities on board and we were asked to sing our National Anthem. Luckily I was among the 30 or so Kiwi's on board so New Zealand was well presented. Some of the other countries that people came from were, Malaysia, Iceland, USA, Canada, Switzerland, the Philippines, Australia, Brazil, Germany and more. I made friendships with other nurses and people from other countries, many of us expressed the hope that we could do another mission like this in the future.

The *Pacific Hope* is now bound for Panama to carry out missions to the people of that area. Hopefully there will be another ship found in the future to serve the Pacific once again.

#### 1 John 4:7-11

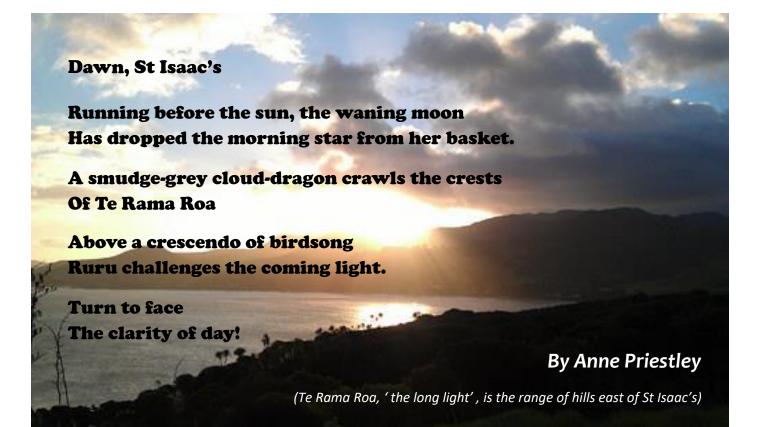
Beloved, let us love one another, because love is from God; everyone who loves is born of God and knows God. Whoever does not love does not know God, for God is Love.

> Donations can be sent to: <u>www.marinereach.com</u> email: <u>info@marinereach.com</u>



Above: Riding in the RIB was one of Isabel's favourite things to do while on the Pacific Hope. Right: On the final evening on-board ship, the crew went to great trouble to set up the dining & lounge area for a special celebration dinner.





# **Cold Showers, Warm Hearts:** The 2017 Mission to Fiji with the Golden Oldies



Avila (wearing finger-knitted necklace) and Norma after a long week at teaching at Holy Trinity

Golden Oldies visiting Fiji for the first time are known as "interns". However, I am a graduate of the Golden Oldies Mission and have recently returned from my fourth visit to Fiji with this group. Graeme Mitchell, our team leader from By Avila Allsop

Christchurch, took the notion to call me "Professor" throughout the trip. My friend, Norma Benton from New Plymouth, and a long-time member of AAW, has a similar record and he called her "Madam". Children at the school in Suva where we taught, call their teachers "Ma'am".

A church friend, Mary Davies, invited me to join her on the Golden Oldies' inaugural trip in 2012 and a team of around 25

people have gone back every year since then. Now the villagers look forward to our visits and the people know we are not fly-by-nights. They will even confide how we can best help them.



The new Diocesan building sits alongside St John the Baptist Theological College and the new carpark has been built in front of the original college building

The Golden Oldies came about when Graeme felt called to use the experience and wisdom of older people in mission work. Fiji was chosen because it is quite close to New Zealand, with no long flights for older people, and there is a pressing need for help in that country. Graeme soon established a close relationship with Revd Amy Chambers, Principal of the St John's Baptist Theological College in Suva. Many of you know her.

With the exception of last year, the team has stayed at the college. The kindness and welcome of everyone is heart-warming and I have made true friends there. It is simply won-derful to meet them again. Amy's daughter, Emily, works from dawn to long after dusk to provide delicious meals and all her helpers are equally willing to make our stay comfortable and enjoyable. It is Amy who is our rock. Our trips would not be possible without her.

Last year there were alterations to the original buildings and a whole new building for the diocesan staff was built. (That's why the Golden Oldies stayed at St Christopher's Orphanage last year). Norma and I were excited to see what changes had been made. Sleeping arrangements! Not a lot of difference instead of large dormitories with beds, we found ourselves in a smaller room with five bunks. As no one had to sleep on top so there was plenty of room for our gear. And then we found out...the showers are still COLD! The interns always get a shock when they learn this but there are never any complaints and soon they actually enjoy a cold shower. As there are only two showers, some of us even jumped in and out at the odd hour of 4.30am and then went back to sleep.

It's not only the people at the college who are warm-hearted. Every year the people we visit embrace us and embarrass us with their generosity. We are all brothers and sisters together and the songs of praise to God were so joyful that sometimes I thought my heart would burst. That may sound rather flowery but we all felt something very special.

To make us a part of the Fijian culture, we all wore sulus on every official occasion; that is whenever we visited a village, school or church; in other words, most of the time. On my first visit I wondered if the Fijians would think we were being patronising but on the contrary, they thanked us for wanting to be like them and not acting like tourists. As graduates we are expected to "work". For four days Wendy, our chaplain, Norma and I taught at the Holy Trinity Primary School. Wendy is a qualified secondary teacher, whereas Norma and I only have the experience of having brought up our children. We expected to be teacher-aides and were horrified to learn on our first day that four teachers were away. Therefore, we were taken to a classroom and left to be THE TEACHER. My daughter, who is a primary school teacher, couldn't believe two eighty-plus-year-olds were each thrust into a classroom with over forty children and left to get on with it. We spent four days relieving and survived. My secret weapon was that I'd learnt to finger-knit a few days before coming away. The children loved making bracelets and necklaces from brightly coloured wool. I also taught them "Pokarekare" and after reading a book "Grandma Joins the All Blacks", they enjoyed learning my version of the haka. I assure you they could jump much higher than I could.

The day after our teaching venture finished, the whole group went down the Rewa River to an isolated village where the usual kava ceremony was held to greet us, followed by a wonderful display of dancing from the school children. It was the Golden Oldies first visit there, so things were rather more formal than at the villages where we are well-known. Nevertheless, it was a lot a fun when everyone was invited on to the field to dance together. This village has a plan pinned up on their meeting hall showing their plans for the future. For instance, I noted that they need \$3,000 for a pharmacy. Like all schools, their supplies are inadequate and they were grateful for the boxes of school supplies we left with them.

Our time to leave Suva arrived all too quickly. On our last night we had a wonderful banquet held on the new carpark. Both the overhead stars and fireworks from a nearby Hindu wedding illuminated the scene. Every person, now a graduate, received a certificate; as though a piece of paper could capture the experience of being a Golden Oldie on the 2017 visit to Fiji.



The team leaders from the Golden Oldies alongside the Revd Amy Chambers and her grand-daughter Caroline Chambers

#### AWSC—Anglican Women's Studies Centre

# Anglican Women's Studies Centre (AWSC)

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The Centre for Anglican Women's Studies, commonly known as the Anglican Women's Studies Centre was set up to serve and to advance the interests and needs of the women of this Church particularly those undertaking Theological training.

The Link Representatives from each Diocese and Hui Amorangi have been chosen for their leadership ability to identify, gather, facilitate, resource and encourage women in their educational preparation for ministry whether lay or ordained. It is hoped that the Anglican Women's Studies Centre can continue to enjoy the support of each Diocese and Hui Amorangi in this endeavour.

The issue of increasing numbers of women in representative positions across the councils and committees of the Church is seen as a high priority and the practice of intentional mentoring by those already in national and international representative roles is seen as a good way to expose women of this Church to fulfil their potential as leaders.

Ensuring that women's voices and stories are heard now and in the future is also one of our continued aims whether it be by traditional methods of publication or using more contemporary technologies like web publication. We remain optimistic that through continued support, the needs of women throughout this Province will be valued and recognized.

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**EDITORIAL DISCLAIMER:** The Anglican Women's Studies Centre is committed to encouraging and enabling women's voices and perspectives from across the diversity of the Church to be shared more widely. We acknowledge that women's experiences of church differ considerably and that resultant theological perspectives also differ considerably. In general, the AWSC does not exercise editorial control, rather we welcome as many voices as are willing to contribute.

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