

We want to thank all of you for being faithful partners in the ministry of Frontier Labourers for Christ (FLC). The following are a few highlights accomplished through God's power and your prayers.

## **BAREFOOT DOCTORS SCHOOL REPORT**

Jung Dangshing

### **A Brief History and the Current Situation of Myanmar**

Burma has often been called the "Golden Land", a name used to describe this South-East Asian paradise, as it is rich in many natural resources and its land is of great beauty. It is populated by people from many different ethnic groups, each with its own individual culture and language. However, the country has been troubled for many years, since the beginning of military rule. It has gone from being the highest rice producer in the 1930's to the status of least developed country over the last three decades.

In the past 45 years, there has been immense civil unrest and political turmoil, which has left thousands dead and hundreds of thousands displaced across the country. The military government then State Peace and Development Council (SPDC), is one of the most brutal, corrupt and repressive regimes in the world. They use murder, torture, rape, political imprisonment, landmines, land confiscation, and forced labor as some practices for ruling the citizens of Burma, while continually violating their human rights. Freedom of expression and freedom of association are non-existent and Burmese citizens are denied any say in the shaping of their future.

Living standards have deteriorated steadily during the 45 years of military rule. Conditions are generally worse in the seven states where the majority of the ethnic minorities reside. There are not sufficient funds for basic health and education services because of persistent government refusal to allocate any part of its budget to a non-military sector. Over 60 per cent is spent on military, in comparison to less than eight per cent of the budget being spent on education by the government.

The country is recently opened up to Western eyes emerging from its isolation, still suffers from political turmoil and uncertainties, decades-long war between rebel armies and government, and has very limited medical facilities in remote regions of the country. With such conditions, the Barefoot Doctors, who have been trained medically and spiritually, are often times become doctors for entire communities in remote areas.

In a war torn country like Myanmar, outsiders are forbidden to travel into certain areas such as where rebel armies control and government restricted areas. However, through the local people's invitations, the barefoot doctors are allowed to travel into sensitive areas and are able to treat the sick. They are given the opportunity to share the Gospel message. This is the value of the barefoot doctors.

The barefoot doctors are hand-picked by the church and community leaders in Myanmar and travel hundreds of miles to Chiang Mai, Thailand where FLC train them. They are all pastors, evangelists, community leaders and teachers in their respective areas/churches. This training means so much to them and to us because they are getting outside of their country for training they could never have it in Myanmar, their country. They feel very hour to be able to come. After they completed their training they become community health workers/providers and medical evangelists.

## Barefoot Doctors - Class of 2016



### Barefoot Doctors – Class of 2016

Eighteen Barefoot Doctors (7 women and 11 men) from Myanmar have completed 450 hours of basic health care training, 90 hours of community development training and 120 hours of Bible studies on February 27<sup>th</sup>, 2016. Three students were not able to return to finish the training. Eight students have college degree and the rest completed high school education. The students represent eight language groups from Myanmar (Lahu, Akha, Wa, Mro, Ngo-Chang, Karen, Pa Oo and Rawang). They all speak Burmese fluently and a few speak some English.

There were eight singles as of March 2016. The most senior student was in late 50s and the youngest was 23. 27 children and two grandchildren from married students. There are six Sunday School teachers and the rest are church youth leaders, evangelists, pastors and community leaders in their areas. Most of them are actively serving the Lord in the areas least touched by the Gospel in Myanmar and least accessible to the government health stations. Number of days students stayed at the KLC was approximately 140 days.

The barefoot doctors have seen 2262 patients in 2014 after they completed the first year training and 5731 patients in 2015. Most medical problems they have seen are commonly seen in the developing countries such as malaria, watery diarrhea and dysentery, intestinal worms, malnutrition, dermatological problem, anemia, war and non-war related injuries, eye problem, dental and stomach problem. Looking at the cases the barefoot doctors presented one can say that despite all the progress and promise of modern medicine, most of the world is still struggling to get the fundamentals of medical care: simple diagnostic tests, affordable medicines, and efficient supply distribution.

They are very talented and servant minded barefoot doctors. Their eagerness to learn was exhibited in their concentration and attentiveness. Their final test scores were impressive. Some students scored 100% and many have earned 80%. Sending community leaders and church leaders have sent us very encouraging recommendation letters regarding their barefoot doctors.

**Class of 2016**

 RamTang	 Chan Peram	 Yawhan	 Hkaw Taik
 Minram	 Elizabeth	 Khin Sein	 Malong Bolu
 Thanzaw Oo	 Nang Hkam	 Ninsungbra	 Ma Ma Naing
 Ramsar Dee	 San San Win	 Tun Myaing	 Nilar
 Saw L Warr	 Ram Bo Kin		

The volunteer teaching staff consisted of 20 medical instructors (12 from the US, seven from Canada and one from India), two CHE facilitators (Thailand based missionaries) and nine Bible teachers (three from the UK, five from the States and Beverly from Thailand).

In 2014, the medical instructors used a book called *'Where There Is No Doctor'* as the primary teaching guideline for the training. The second year in 2015, *'The Burmese Border Guidelines'* which is specifically designed to assist community health workers practicing in remote regions of Myanmar as primary textbook to training the barefoot doctors. In 2016, in addition to the textbooks mentioned above, the lessons were uniquely designed based on medical problems the students encountered in the field. The medical course includes curative as well as preventative medicine.

The barefoot doctors are taught by the best medical professionals and therefore our barefoot doctors are well trained community health workers/health providers.

**Medical Instructors (2014-2016):**

1. Bjorn Nilson, MD, MPH (Pediatrics and HIV specialist, Global Medicine Specialist)
2. Charles Steinberg, MD (Internal Medicine, HIV Specialist)
3. David Brumwell, MD
4. Cyril Thomas, PA
5. Joseph Nawrocki, MD (Medical Director of Rock's Medical Outreach (RMO))
6. Jim Buie, MD (Internal Medicine)
7. Gayle Buie, RN (Research Coordinator in Cardiology)
8. Rick Astone, PT
9. Alice Astone, DPT
10. Susan McDowell, MD (Orthopedic Surgeon)
11. Susan Parker, MD (Family Medicine)
12. Jove Graham, MD (Emergency Medicine)
13. Jeff Kornelsen, MD (Family Physician)
14. Lynda Audia, RN (Public Health Nurse)
15. Janet Warren, MD (Family Physician)
16. Anita Terry, RN
17. The mPower (Dental)
18. Holly Phillips, RN
19. Betty Reide-White, RN
20. Dawngliana Zogte (Malaria Expert & Educator, Naga Land, India)

**CHE Facilitators:**

1. David Crist (Missionary, Thailand)
2. Joana Geiger (Missionary, Thailand)

**Bible Teachers:**

1. Pastor Jon Ulm (New Hope Christian Church, Manassas, Virginia, US)
2. Pastor Simon Percy (Pastor Training International (PTI), Woodford Evangelical Church, England)
3. Pastor Bob Johnson (Grace Point Church, San Diego, California, US)
4. Pastor Jim Winter (Author, International Lecturer, England)
5. Beverley Kalnin (Frontier Labourers for Christ, Thailand)
6. Pastor Paul Bergquam (Sanger Community Church, Fresno, California, US)
7. Jodi Pyles (Creswell Youth for Christ, Creswell, Oregon, US)
8. Pastor Rich Peterson (Bear Valley Church, Denver, US)
9. Pastor Ian Rees (Salway Evangelical Church, England)

Some of the topics bible teachers taught are: Servant Leadership, the Parables of Jesus, Bible Overview, Exegesis, Preaching from the Book of Mark, etc. Topical subjects taught were *The Barefoot Doctor Model for Ministry* based from Luke 9:6, 23-4 where Jesus sent out the 12 to (1) preach the Gospel and (2) heal the sick the model the barefoot doctors school follows and also focuses on what a true disciple of Jesus is and what it costs to follow Jesus wherever He leads us, *Staying Close to God, Becoming All Things to All Men* based on I Corinthians 9:19-23 focuses on cross-cultural evangelism, *Loving Our Enemies – Those Who are Difficult to Love* – prepare the barefoot doctors to cross over the boundaries that usually keep people apart and show compassion to sinful people and people they are uncomfortable being around, without judging them. There were a few more topical lessons not mentioned here.

The graduation ceremony was held on Saturday, February 27<sup>th</sup>, 2016. Pastor Jon Ulm shared the message. His message focuses on using the medical knowledge as a tool to spread the Gospel. The Akha barefoot doctors from Thailand came for the graduation. Frank and Tina Johns from the US board attended the ceremony. They presented new watches to the barefoot doctors as the graduation gifts from the FLC US board. Thanks to Mary Lois for getting the watches for the barefoot doctors.

Abraham and Timothy translated most classes and Sarep Pung helped translated some sessions. They did an outstanding job. Pungsar and kitchen staff had prepared over 400 delicious and nutritious meals for the students and instructors. The barefoot doctors were requested to cook on Saturdays and Sundays to give Pungsar a break. The barefoot doctors helped washed dishes, cleaned the kitchen and the dining area, and took care of the KLC grounds and cleaned the Rennert Building after study hours every day. San San Win and Elizabeth, our barefoot doctors, arranged flowers for every Sunday service.

### **Dental Training**

The dental training was not able to include in 2016 as anticipated. We hope to have volunteer dentists and funds to include the very necessary dental training in the future.

The total dollar invested for the Class of 2016 was 94,670.94 USD. This includes the expenses for the barefoot doctors passports and visas, their travels, food and lodging in Myanmar and Thailand, teaching materials and supplies, operating the school, dental training in 2015 and for medicines etc.,



The barefoot doctors left for Myanmar on Monday March 7<sup>th</sup> with a medical team sent by the International Medical Relief (IMR). The barefoot doctors have two days of opportunity to work with the IMR team in Tachilek, Myanmar. They have seen 86 patients mostly came from villages near by Tachilek. The

barefoot doctors expressed that the two days working with the IMR team was a tremendous opportunity for them to employ the medical skills they acquired from the school. They also said that they gained more confidence from the two days working with the IMR team under the leadership of Dr. Maricar Santos, IMR medical team leader.



The barefoot doctors were divided to five stations: Registration, Vital signs, Pharmacy, Providers and Community Education Stations. The IMR team graciously let the barefoot doctors lead the clinic and they acted as supervisors.

The barefoot doctors lamented that the two days were not enough for them to work with Dr. Maricar Santos, IMR medical team leader, and team members. They felt very comfortable working with Dr. Santos and the team.

### **Conclusion**

The FLC staff received many blessings from the program, too. Everyone was busy with taking care of meals and housing guest and doctors, to checking on the barefoot doctors and their needs, getting teaching supplies, translating teaching materials, etc. It was a tremendous task and everyone was needed to make it all run smoothly. The Kalnin Leadership Center (KLC) was buzzing with

activity. I am very thankful for our dedicated staff and helpers who pitched in to make it a great success.

The main purpose of this program and training these men and women is to share the Gospel through medicine – evangelism through medicine. Evangelism through medicine over the past 20 plus years has become the cornerstone of seeing many people received needed medical care and make new decisions for Christ. Therefore, the barefoot doctors program is one of the most crucial and life-saving ministries FLC is running. New churches have been established by the barefoot doctors and many new ministry opportunities are opening up because of these dedicated men and women.

I want to thank, first of all, to God for allowing us to be a part of His Kingdom Service. Thanks to Daniel and Beverley for starting this wonderful, amazing and rewarding ministry. My special thanks go to all the medical instructors especially to Rick and Dr. Alice Astone, Dr. Bjorn Nilson, Dr. Jim and Gayle Buie, Dr. Susan Parker, Lynda Audia, Dr. Susan McDowell, Dr. Jeff Kornelsen for returning many years imparting their knowledge to the students, and for their passion, dedication, commitment for this ministry and for their tremendous contributions towards this program.

Words failed to express our appreciations to the Bible teachers Jon Ulm, Paul Bergquam, Rich Peterson, Simon Percy, Ian Rees, Bob Johnson, Jim Winter, Jodi Pyles and Beverley Kalnin for teaching and training our barefoot doctors to become better equipped soul winners.

Thanks to the translators, FLC staff and people behind the scene for their hard labor to make this training possible. We are thankful that Frank and Tina Johns from the FLC US board can be with us to congratulate the barefoot doctors and to support our medical instructors. I want to express our heartfelt appreciation to the FLC board, supporters, prayer partners, and friends for their faithful support. Putting this program on is a team effort and it would not be successful without all those who support it locally and globally.

Please pray for the success of the barefoot doctors in the field as they treat the villagers with love and healing in Jesus' name. Thank you all for your support in so many different ways and may God Bless you.



Dr. Jim and Gayle Buie

Words cannot express the blessing and joy that has been ours by serving at the Barefoot Doctor School.

This year, in particular, we were filled with anticipation and eagerness to return to the students that we respect and love deeply.

We felt a little like returning home to live and work alongside Jung and Nangsar and their staff. Our appreciation and admiration of them continues to grow. From the physical comforts and cleanliness, to well-planned and delicious meals, to the more important kindness and gentleness of each, we were blessed.

The third year proved to be all we hoped for. The students had indeed retained the knowledge imparted to them over the first two years. And they had excelled in their care and treatment of their patients.

Hearing their case reports and adding correction or teaching where it was needed, occupied much of our time. Knowing that they had collectively seen over 5000 patients was impressive

One very fun task before us this year was the calculating, ordering and preparing for the medications the students would take home. It turns out there were about 1,233,600 pills that were counted and distributed. Wow! That they were bought and paid for by the donors was another blessing to behold.

And, of course, the graduation of these well deserved students was a highlight. Sending them out to serve creates in us a deep joy. Just to have a small part in their training and a bigger part of their lives is an incredible experience we hope will continue with more physicians and nurses over the years to come. The program is certainly ordained by the Lord. We trust Him to preserve, protect and perfect it.

Thank you for allowing us to be a part,  
In His Name for His Glory,  
Jim and Gayle Buie



I've been here at the Kalinin Leadership center for the last four weeks helping Dr. Bjorn Nilson put on this iteration of the Barefoot Doctors Course, so I wanted to write to give the people who follow and support this program a taste of what the experience of teaching here has been. Arriving in Chiang Mai, I knew that this class of Barefoot Doctors had been through the two six week blocks of instruction over the last two years, so I expected some knowledge base, but I also knew that they were coming into that instruction with almost no medical background. Consequently, I'd say that the most difficult part of this whole educational endeavor has been trying to sort out what they know and don't know – a task made more difficult by linguistic and cultural differences. For instance, our Burmese students seem to have a highly developed deference to authority, as well as an aversion to asking questions that might reveal a gap in their knowledge. People who are more familiar with the Burmese education system than I say this is a product of years of rote memorization as the staple of their education. Fortunately, these folks have been through Bjorn's ringer two times

already, so they are getting the hang of telling us what they think. Still, we try to make most of the instruction case based. After all they have had two years of seeing patients. This strategy lets us probe them on what they know, and as a hidden bonus lets us get a better handle on their lives.

A good example is a case of an 18-month-old boy with pneumonia that one of the students – Kaw Taik – presented to the class. Kaw Taik comes from a fairly remote village. While not the most remote of this year's class, he still lives over twenty miles from the nearest hospital or pharmacy, and the picture that he brought of the kid matched up with the description of his village. The child, now recovered, appears happy, standing on a log bridge over a small creek, smiling at the camera. While Kaw Taik most likely knew the kid before he became sick, since there are around 500 people in his village, the child came to his attention because of fever and cough for almost a week, as well as increasing weakness to the point where he really didn't want to leave the bed. Kaw Taik quickly went from that problem to his thought the child had pneumonia – a reasonable guess based on the history – but also an opportunity to delve deeper into their knowledge. What other diagnoses had he considered in this child with weakness, fever and cough? Had he looked for physical signs of other diseases? What associated symptoms had he asked about? Did he look for other illness in the family? Why wasn't this tuberculosis or asthma? Did he think of other reasons this child might be weak. Between the Kaw Taik and the other members of the class, they were able to build a differential diagnosis and then tailor questions and their hypothetical exam to prioritize this list. Ultimately, it seemed clear that indeed the child had pneumonia, but the class president later told us that one of the best things that they are getting out of the class this year is thinking more deeply about problems than they might otherwise have done.

Indeed, looking in more detail at the picture that Kaw Taik had presented, you could see the child had small arms and a slightly distended abdomen, as well as thin, crinkly hair, showing signs of moderately advanced protein malnutrition that likely contributed to his pneumonia. Kaw Taik had treated the child appropriately with antibiotics that he had received last year, the child improved, and we pivoted the discussion to their role as leaders in the community and what could be done to improve the nutritional status of the village children.

While less exciting than Kaw Taik's life saving antibiotics, we have also gotten a lot of mileage out of our audience response system. It's basically a clicker device that allows – or forces depending on your perspective - the students to anonymously answer questions that the teachers have made either

the night before as part of the days topic, or spontaneously to answer a question that has come up in our mind. This technology has been enormously useful in finding deficits in the classes knowledge. When we had used the simple hand raise / voice response, we would typically get answers from the most engaged students, or students who were confident that they had the right answer, thereby overestimating our skill as instructors as well as the class's knowledge base.

Through case presentations, games, small group sessions and the audience response system, we think we've been pretty successful in tailoring this third six week course to the needs of the Barefoot Doctors. Its been a great experience getting to know them as people, and has been a challenge helping them come up with the best solution for cases where they have incredibly limited resources compared to the environment I work in.

We've got one more week of class before the big graduation ceremony, and although we've covered a lot of ground, I'm sure Friday will come with the feeling that we could have taught them more. However, I'm confident that they return to their villages and make them safer and healthier than if they had not had this opportunity.

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I have now spent two weeks, one each in 2015 and 2016, with the Barefoot Doctors in training and I am thoroughly impressed with the program as a medical training and outreach program. What an awesome gift to give the Burmese people and what a huge sacrifice for their communities these Doctors make.

As a guest at the center, the accommodations are clean and comfortable and the food is delicious!!

Thanks to generous friends back home, I came with a Bible teaching tool to share with the Barefoot Doctors. Each doctor received a set of cards with pictures on them that tell the story of God's plan to redeem humanity and we spent a couple of devotion sessions going over the cards and helping them take notes that would potentially enable them to teach the story themselves.

I consider it a great privilege to have been a small part of what goes on at the Kalnin Leadership Center and I would love to get to come back again in future years.

Jodi Pyles  
Creswell Youth for Christ, Creswell, Oregon, US