

## The Horizon International Medical Mission, U.S.A, Free Mission To Nigeria 2014

FOR four days – March 10 to 14, the people of Imo State enjoyed a massive health bonanza as a team of doctors, health experts and counsellors under the auspices of the Horizon International Medical Mission (HIMM), U.S.A visited the four towns of Ihiagwa, Ezianya, Obinze and Awaka for a free medical mission.

The mission was founded by Dr Kennedy Okere, a Nigerian doctor based in Georgia, USA, and provides free medical care to rural communities around the world. This was the 14th year of the mission which began in 2000.

About 880 patients were treated and attended to in the four towns during the mission. Ihiagwa was visited on the first day and the team was welcomed by the member representing Owerri-West in Imo State House of Assembly, Hon. Obulimba Innocent Eke, the Transitional Committee Chairman of Owerri-West, Lady Elizabeth Okere, and the Eze of Dindi Autonomous Community, HRH Kingsley Odu.

While the doctors and nurses attended to the medical needs of the patients, the counsellors prayed for and advised them. By the time the day ended, about 200 patients had been treated and given drugs. The session was held at Dr Okere's hospital which was in an advanced stage of completion.

The second day saw the team in Ezianya in Ngor Okpala L.G.A and the same sequence was repeated. They were welcomed by the Eze-Elect of the town, Mr Hyacinth Nwamadi and his cabinet. The day's mission was then carried out at Grace Hospital and 220 people were treated.

The third day saw the team in Obinze in Owerri-North L.G.A where they attended to patients at the Baptist High School. 240 people were treated.

On the final day at Awaka, HIMM was supported by the Willy-Esther Foundation (WEF) USA founded by



Woman with facial ulcerating mass for 4 years. HIMM is seeking funds to fly her overseas for operation.

Prof Alex Wozuzu-Acholonu (OON), and a number of government agencies like the National Agency for the Control of AIDS (NACA) and the State Agency for the Control of AIDS (SACA).

The HIMM team to Nigeria for the 2014 mission was made up of Dr Kennedy Okere, Dr Felix Acholonu,

Dr Uchenna Acholonu Jr., Lolo Leslie-Acholonu-Okere, Caroline Palmer, Dixie Barnes, Jonathan Barnes, Gary Strickland, Maia Strickland, Terri Rockwell, Theresa White and Melanie McGill. Here are excerpts of their interviews with Ikechukwu Eugene of *The Source*:

### “We Need Preventive Medicine More Than Cure”

—Dr Kennedy Okere, *Provenance: Savannah Georgia (from Ihiagwa, Owerri-West, Imo State), Occupation: Family Doctor*

**H**ow do you feel having carried out the free medical mission for fourteen years now?

It's a great feeling to have been in this service to the people for fourteen years. Sometimes it's encouraging and

sometimes it's kind of not encouraging. It's encouraging when you look at the people you have treated and when they come back to tell you how good they feel, you are encouraged. It's a little bit discouraging when you look at it

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that it's tiring, it drains you financially, it drains your energy and you don't see that much government support for the people.

**What would you need from the government to help make future missions successful?**

Give us accommodation; give us transportation; give us security; feed the missionaries that I'm bringing. We are not saying give us money, we are saying just accommodate your visitors, give them transportation to move them from point A to point B because we go to different villages and that's all we need. We are not asking for medication because we come with enough of those but the government can't even provide these things, so it's sad.

**In the years you have carried out this mission, what would you say are some of the most basic needs of the people?**

The needs of the people are quite diverse. In terms of healthcare they need good rural health centres. I understand that the Imo State government is trying to build at least one General Hospital in each local government. That's a good effort but the question is not just setting up a structure, the issue is how to sustain the medical care system to work.

We already have dilapidated



Dr. Okere.

structures everywhere called Healthcare Centres. Some of them sheep and goat go there to defecate and come back. They shouldn't even be called healthcare centres, they should be called zoological centres because the only things you see there are sheep, goats and dogs that run into those centres and run out.

So our problem is not setting up physical structures, our problem is how do we staff them? How do we equip these structures and how do we sustain it to work. The second thing is that we have not really realised that our problem is preventive medicine. We have been thinking about setting up a tertiary care centre, let's setup a complex

hospital that can take care of people with heart attacks, people with respiratory failure, these are all great. But do you ever ask yourself how do people end up having respiratory failure, how do they end up having heart attacks, how do they end up having stroke. It's just because the risk factors for these diseases are not taken care of.

High Blood Pressure is very common, a silent killer. We don't do anything about it, we don't teach people about it; we don't have the medication available that people can access but everyday it's killing people. Our emphasis has been fighting HIV, fight AIDS. Right now I don't think that is the issue again. People are aware, they know what they are doing and the medication is available. We have probably gone a step forward in that area. But preventive medicine, people with diabetes how can we prevent it; what can we teach them, what is the education behind it; how can we make it available for them to get eye tests once a year; how can we test their cholesterol at least once a year; how can we check their haemoglobin and make all these things available for them so that they do not develop stroke, they do not develop heart attack. I think that's our problem. So rural health development should be a top priority.

## “The People Of Nigeria Showed God’s Love To Me”

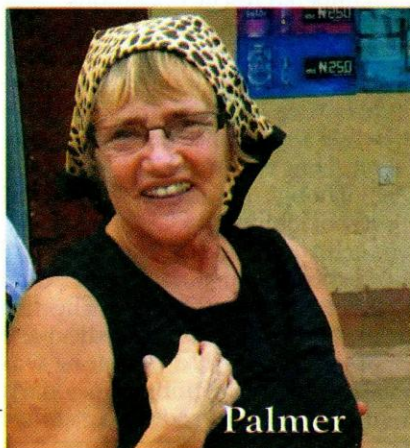
—Caroline Palmer, *Provenance: Pittsburgh Pennsylvania Occupation: Nurse for 45 years (Retired Hospice Nurse)*

CAROLINE'S husband died in December 2013 and she felt God need her to heal by serving others. She followed her daughter, Terri.

**Why did you come to Nigeria?**

“I came down to be God’s hands in Nigeria and he has allowed that to happen. I met amazing beautiful people and it was a good experience. I will be back.

**What’s your impression of the**



Palmer

**Nigerian people?**

The people of Nigeria are beautiful, humble, and very happy. They love me; they showed God’s love to me. It was just a wonderful experience.

I’m overwhelmed at how much love is shown to me and the other members of the team. I am very impressed.

Not one person refused the opportunity to have me pray with them and that was a beautiful thing and my daughter and I could just go around and pray with everyone. They are very faithful people, they believe, they have God in their heart and spirit and that, I believe, is what gives them their hope.

Caroline advised people to eat more natural foods and avoid canned and processed foods and salt—fresh fruits, fresh vegetables and not a lot of salts. “If the food comes from mother earth, it’s good,” she said.

## “Nigerian People Have A Sweet Spirit”

—Dixie Barnes, *Provenance: Savannah Georgia*,  
*Occupation: Nursing Assistant*

**D**IXIE said she anticipated her retirement and took nursing classes and now works as a Nursing Assistant and a companion to elderly persons.

Why did you come to Nigeria?

She came to Nigeria because her two sons, Jonathan and James had been on many mission trips and told her exciting tales of the things they did. She said their eagerness to do more made her want to be a part of the mission.

Dr Kennedy was a member of their church (Sycamore Network) and she volunteered when the call was made for the next mission to Africa.

“I was reared in a Baptist church and I was taught the importance of missions all my life. I was drawn with the desire to do missions but



Barnes

my children led the way for many years but this has been my dream for about 40 years. So coming here, fulfilled that dream.

“When I was 19, I went to church and I participated in a mission-based program called, ‘Girls Auxiliary’. And God touched my heart to come and to do missions, so I do a good bit of things at home. I work in the homeless shelter and I prepare sewing kits and felt like God was still leaning me in the direction of going to a foreign country to help people there because we as Americans, we have so much and I wanted to help those who are less fortunate.

Dixie said she saw that the people of Nigeria had a very sweet spirit and they wanted to be helped. “They care about their health and they have a humble and appreciative spirit.” The most common sicknesses she met in the people were malaria, typhoid, hepatitis, arthritis and issues associated with pregnancy and childbirth.

She said the people needed more health education and that more missions would also help. ■

**I**T was Gary’s third time in Nigeria. He first came in 2009 after Dr Kennedy made a presentation at their church about the mission. He came again in 2011 and this time around he came with his daughter, Maia.

He said: “The Lord spoke to me during the presentation that I was going to Nigeria for the next trip and I came.”

Gary said that he loved Nigerians. “They are very warm, very welcoming, very sweet, gentle people. I haven’t met anyone yet in my three visits that was anything other than hospital, nice and wonderful to get know.

“It feels like coming home because I met people I first met in 2011 and 2009 again; it’s like seeing old friends whose names I cannot pronounce. It feels more like home for me this time because one of my four daughters is with and I can’t wait to come back.”

Gary said he loved Mr Biggs foods and wished that they had one of them in the U.S. The only Nigerian food he didn’t like was ‘fufu’ but the

## “It Felt Like Coming Home”

— Gary Strickland, *Provenance: Savannah Georgia*,  
*Occupation: Facility Director in a College (used to be a professional clown)*



Strickland

chicken, rice and other foods were good with him.

As part of the mission, he ministered to the people while the doctors and nurses worked. He came with his guitar and trumpets. Most of the times, he sang with his daughter or played the instruments while she sang. But his main job was as the videographer and photographer.

Advice to Nigerians: “I see a lot of western influences but don’t lose your culture and your identity by absorbing too much of the west. What we have great but what you have over here is really nice. ■

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# “We Saw God Work In Many Ways”

—Melanie McGill, *Provenance: Savannah, Georgia, Occupation: A sales assistant at the airport and a shuttle driver*

“The Lord spoke to me when I was nine years old and told me that I will be a missionary and I am a missionary at home and I have been to Honduras and this is my second trip as a missionary overseas. I love God’s people and I want everybody to know about Jesus Christ the son of God.

“It’s been a blessed mission. We have seen God work in many ways. When we ask, He answers in his time depending on His plans for that person. We’ve had several healings



McGill

all along. The people of Nigeria are beautiful; they are hard-working; they are very lean; they are not lazy; they are very smart in their work and a people

after my own heart because I love hardworking people.

I will absolutely love to come back. I will be honoured to come back. ■

# “I’m Inspired By The People Of Nigeria”

—Terri Rockwell, *State: Georgia, Occupation: A French and Dance teacher*

TERRI engaged the kids in dances and songs while their parents or grandparents were getting treatment.

“I’ve always dreamed of coming to Africa since I was 19 and when I met Dr Kennedy and he invited us to come, I knew it was time to fulfil that dream.

This was Terri’s first time of coming to Africa and she would love to bring her son along when next she comes.

“Nigerian people are so loving. Americans, I think, are friendly but there’s more of a warmth, more of a heart here. The people here are so welcoming of us and I don’t know if Americans are a little more suspicious, but the people here have such a great faith. In America, there’s so much wealth and it’s easy for people to depend on wealth instead of depending on God and that’s a big problem.

“But here, when the people come for prayers, I feel they believe that



Rockwell

God is going to answer their prayers right there and then. Seems like a lot of times we pray in America, we pray and we

think maybe he will answer it down on the road somewhere later, but here they are praying and they are believing that they are receiving that answer right there and I’m just very inspired by the people of Nigeria.

“I’m so impressed by how the families stick together and come to pray for each other. I don’t know if the people of Nigeria would love more electronics or technology, but I can tell you that I have rejoiced to get away from America and all that technology.” ■

# “My Heart Remains In Africa”

—Maia Strickland, *Provenance: Savannah Georgia, Occupation: High School graduate (works at the YMCA)*



Strickland.

AN 18-year-old High School graduate waiting for college but currently works at the YMCA in Georgia.

Maia said she came because God told her to come and she feels the people of Nigeria are nice and happy. On getting back to the U.S, Maia updated her Facebook status to read: “Back in the States but my heart is still in Africa.”

She heard nice tales about the country from her dad who had come twice before 2014 and was happy to come along with him.

Maia played the guitar and sang to kids. She also handed out a lot of presents to the kids who always besieged her wherever she went and took pictures with her.

Maia said she would love to be a missionary and wouldn’t mind marrying a Nigerian one day. ■

## “I’ll Return With My Son”

—Theresa White, *Provenance: Georgia, Occupation:*

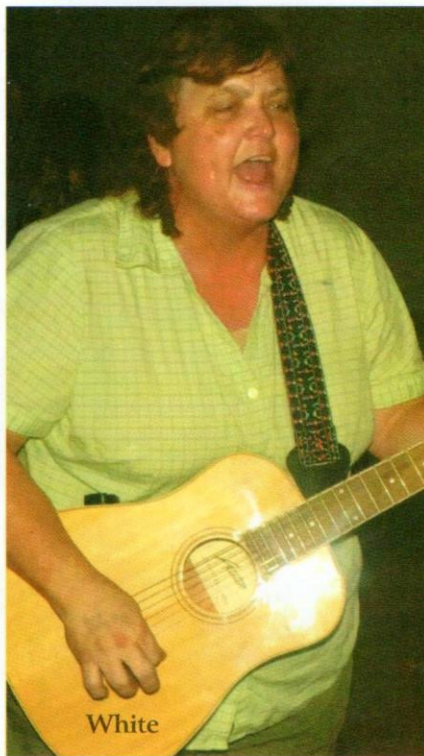
*A Minister and a farmer*

**T**HERESA and her husband and farmers and she also has a ministry of prayer and deliverance. She lived in the Middle East for a couple of years and has also been to Egypt.

She came to Nigeria because the Lord put it in her heart four years ago to come and the he would use her to minister to the people of Nigeria and that she would learn more about herself.

“He told me that there are things I would only find out about myself when I got to Nigeria. In 2004, the Lord told me out of Isaiah 61 that he had anointed me to preach the good news, to bind the broken hearted and to give sight to the blind, to set the captives free and to be a relief to those who are oppressed. And to me that means that that was exactly what I needed to do.

But in America there’s no much faith. Some people have faith but they don’t have faith that God can still do miracles; just few people



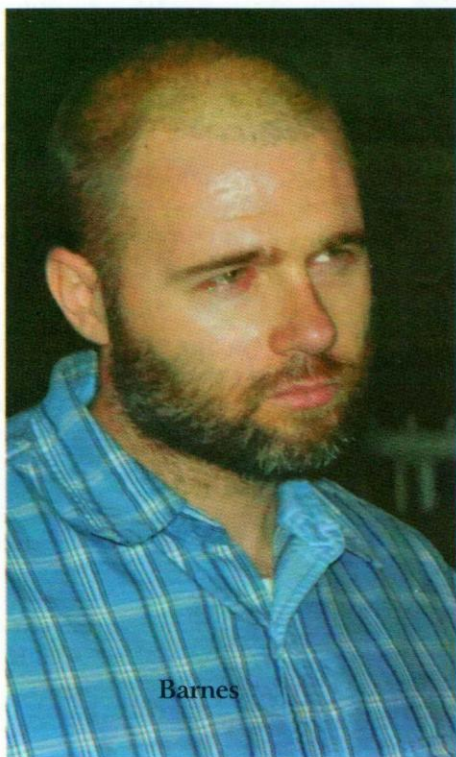
have faith that God can still do miracles in America. But it’s in my heart because I’ve seen him do miracles. The level of faith here is very high.

I came because the Lord let me know in my spirit that the people of Nigeria have faith and so I came because I wanted God to work through me to be the hands and feet of Jesus to people who would like to receive from Jesus.

Theresa said she saw a lot of faith because when she prayed for people, she saw God move in miraculous ways. Many who came in stooped and limping with swollen feet and arthritis went out walking easily.

“One woman was almost bent over. She came in almost walking on all fours and she stood up straight after prayer and that’s faith in action.

“I think the people of Nigeria are some of the kindest, most mannerly and gentle people I’ve ever met. Everybody I have met has been kind and gentle and mannerly; genuinely welcoming and it has been a blessing to me. I’m going to come back and when I come back, I’m going to bring my son with me because he will love it here. He’s 21 and he’s an evangelist.” ■



## “We Are One Human Race”

—Jonathan Barnes, *Provenance: Savannah Georgia, Occupation: High School Teacher*

**T**HIS was Jonathan’s fourth time in Africa and his second time in Nigeria. He came with his mother, Dixie. On his first visit, he came with his brother and hopes to bring along another family member on his next mission.

“I am very grateful to the Igbo people because about 12 years ago, God called me specifically to come to Africa. Where I teach we have students from all over the world including Nigerian students, some Yoruba and some Igbo but I can tell you this that God’s heart is breaking for

Africa and he’s broken my heart for Africa over and over again.

“It’s a heart that breaks because of the needs and the sufferings but in the broken-heartedness there’s a hope. It’s awesome to work with African students in the United States but it’s even better to come here.

“Sometimes we think there’s Africa in the United States; there’s Nigeria in the United States; there’s us and them but the truth of the matter is, there is no them. There’s only us; all of us; one human race.”

Jonathan says because he does whatever work the team needs him to do for the day, that he’s a hustler. He says he would tell his students when he got back that he was a hustler in Africa. ■

# “God Keeps Us Moving on”

— Lolo Leslie Acholonu-Okere, *Provenance: Savannah, Georgia, Occupation: IT Service Delivery Manager*

AS the wife of the founder of the mission, Leslie, would have felt that a lot of the success of the mission depended on her as much as her husband and she virtually almost ran herself aground in the days of the mission. She also made her childrentake active part in the proceedings.

Leslie told of how she met her husband a few weeks before his first mission in 2000, picking him up from the airport on his return and getting married a few months later. In that time, she came to be a part of the mission and completely bought into her husband's dreams. She calls the 14th anniversary of the mission a milestone for her marriage.

There had been challenges all along like the airline rejecting their luggage of medicine; uncertainty about where the medication will come from; not having enough missionaries sign up, and being heavily overworked. There had been financial constraints and loss of very strong supporters and workers like the Red Cross Commandant, Mr Ezem Nzenwa of

Ihiagwa and the former VC of the Federal University of Technology Owerri, Prof CEO Onwuliri. “But through it all God has been faithful and encouraged us by giving us what we need when we need it,” she said.

Leslie said she feared losing her

husband because of all the kidnapping and killing during the early 2000. Then from mission 2000 – 2004 she did not travel with him because their kids were still very little.

“Now we both sacrifice our finances. To travel, we take off from work, income is reduced, but we still have our American bills to pay upon our return. We do not receive much donations anymore because of financial uncertainty in the United States. But, as I said, through it all God keeps us moving on.”

She said this year's mission was the first where she functioned as the Mission Coordinator, so she was more actively involved. She felt the impatience of the people while trying to see the doctors and how they pushed in the queues first and is going to put that experience to good use in subsequent mission for better coordination.

“Despite the challenges, I believe we saw the highest number of patients this year. We saw 800+ patients in 4 days,” she says. ■



Acholonu-Okere

# “This Is Home”

—Dr Uchenna Acholonu Jr., *Provenance: New York (from Awaka, Imo State), Occupation: Obstetrician and Gynaecologist*

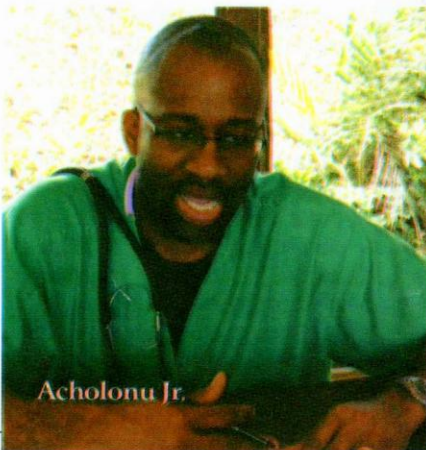
UCHENNA is one of the new generations of Nigerians born and bred in the U.S and have spent all their lives there. He had only been home once before now when he was much younger but as a doctor, he came this time because “it's home and it was an opportunity to come and try to help with his people.”

He said he hadn't come home more often because he doesn't have time and wouldn't be able to see most of his family if he came for a very short

period. Uchenna said the people of Nigeria were ‘as advertised’ with good hearts and a strong belief in God. He noticed that most of what was taken for granted back in the United States like the Blood Pressure checks, diabetes, general dental care were big issues that the people needed help with.

Speaking on the peculiar health issues of the people, he said: “And it's not always bout medicine, it's about lifestyle. Avoid fried food if you can, avoid salt if you can, try to avoid some starches and add more vegetables and fruits to your food, then a lot of these health issues would be taken care of.

“If you take the average person walking around in New York, somebody who has a high blood sugar would have 200 or 220 but here we saw 350 and 400 and if



Acholonu Jr.



HIMM team with Owerri-West govt officials.

these people had come in to see me in New York, I would have admitted them, give them IV medicine and keep them in check for a few days to get their sugar levels under control.

“Same thing with Blood Pressure. When I say I have High Blood Pressure, it would mean that I have 140 over 90. Some people I saw here have 220 over 110 or 115 and that’s really bad.

“I think it’s about access. To have people to come and see a doctor not once every three years or when you

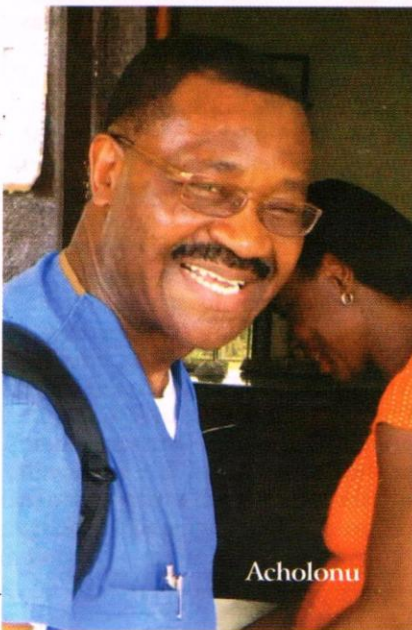
are sick, but see a doctor once a year or even more times, but from what I’ve seen, that’s not easy or feasible here.

He wants the authorities at home to help with the follow-up after they have left. He would also want to have the medical records of the patients they see if that would be possible.

“I would be back. You affect people and if you come with a nice team, then you can give total care. Even though I was educated on medicines, the spiritual part is also very

necessary. The body is not ordinary. It is very complicated and cannot be separated from the spirit.

Uchenna feels that he won’t need to convince anybody to come down to Nigeria because they wouldn’t need to be convinced. “I would just tell them; I would just show them what we saw and explain the facts to them and I guarantee you people are going to sign up. People have busy lives, but there are people who would be glad to make out time to contribute to this. ■



## “There’s Need For More Health Education”

—Dr Felix Acholonu, Provenance: Jacksonville, Florida (from Awaka, Imo State), Occupation: Gynaecologist and Obstetrician

**F**ELIX rates heart disease and issues around diabetes that the number one killer among the people. “If you can control both and the Blood Pressure, then you can avoid stroke,” he says. He also noticed that the people mostly had problems of headache, sight, kidney and sugar level.

“There’s a need for education because you can have more effect by if you teach people and

help them see what is the right thing to do,” he says.

Felix says he would love to have an operating room where he could help people with fibroid, pelvic pain or big cyst. But he thinks that the majority of the people just need a conversation and encouragement to make them do the right thing.

He wants the authorities at home to help with the follow-up after they have left. He would also want to have the medical records of the patients they see if that would be possible. ■