

He Jia Gou Village Clinic - Dr. Ma Xuewu

Through this project, our partner, the Amity Foundation, is reaching out with a loving and helping hand to those in need, while simultaneously fulfilling another of its goals, that of making the presence and the caring of Chinese Christians for all people more widely know in Chinese society by working with people of many different backgrounds to bring concrete expressions of love that touch the deepest needs of others in tangible ways that make a difference in their lives. Through our help in the building of the village clinics and through our provision of some needed medicines, we American Baptists have also become a part of this ministry of love-in-action. Here is the story of He Jia Gou Village and of village doctor, Dr. Ma (Ma Xuewu).

He Jia Gou Village used to be located in a mountainous region of San Ying Township in the Yuan Zhou District toward the southern end of the Ningxia Autonomous Region of China, but in recent years the government has been asking people to move to the flatter lands at the base of the hills and to plant grasses and trees on the mountain slopes. So, most of the more than 1800 villagers, including 600 children, that make up the hundred plus families of this village now live at or near the foot of the hills.



A November view of some of the lower parts of He Jia Gou Village to the right of the path and the mid-level of the village to the left of the path.



This path with a steep 8-12 foot drop-off goes in to the mid-level of He Jia Gou Village, which is accessible on foot, by bicycle, or by motorcycle.



A June view of fields and an extended family compound and home with fence and walls made from mud



A June view of fields and homes below the path.



He Jia Gou Village homes near the clinic.



Overlooking an extended family compound

Dr. Ma Xuewu, a villager and farmer, graduated from Amity's one-and-a-half-year village doctor training program in 1999. Before that, his father had served as the village doctor for more than thirty years, originally going from home to home to treat villagers who were ill because he had place for them to come to. Eventually, the school allotted two small rooms that he could rent. Since 1999, in addition to farming, Dr Ma has been following in his father's footsteps and serving as the village doctor, making possible for villagers to continue to receive treatment right in their own village for the most common illness they face, while his father provides medical treatment for other villages which do not have their own doctor. Originally, Dr. Ma served his patients from the same two rooms of the school, but it was not so convenient, private or sanitary for examination and treatment.



Dr. Ma, who is 24 lives with his parents, his wife and three children, and his siblings and their families. His daughter is four years old and his twin sons are two. A brother who is 22 is studying cooking in a city.

With \$1000 in One Great Hour of Sharing funds contributed by American Baptists and sent through the Amity Foundation added to his own funds along with help from relatives and friends, Dr. Ma has been able to build a small clinic according to the specifications of Amity and the requirements of the Provincial Health Bureau.¹ The clinic has three rooms—a reception room, an examination and treatment room, and another room with a bed for patients who might need to stay at the clinic overnight.



The He Jia Gou villagers belong to the Hui Minority (one of 56 different ethnic groups that are recognized as vital parts of the population in China today). The Hui Minority people have Muslim roots and considered themselves ethnically Muslim.

Relatively poor mountain farmers, the villagers have faced a dilemma in recent years. Much of their land was on the hillsides, and in this area the government has asked them to stop farming and to plant trees and wild grasses to enhance the ecological protection of the area. Originally, each extended family had around 15 *mu* (or not quite 2½ acres) of land. Under the current plan, people are expected to return their land to the government; and, in return the government provides them with 100 kg (220 pounds) of food per *mu* of land. Of course, crops are still grown by families whose land was already in the flatter areas to which the villagers have moved.

The number of patients Dr. Ma sees each week depends a lot on the season. More become ill and seek the doctor's advice in the winter and spring than in the summer and fall. However, in general, he sees an average of 100 patients per week. In fact, this is one of the benefits of the new clinic. Villagers are more willing to go to the doctor when the first become ill, receiving earlier treatment. The main conditions he treats include colds and flu, other respiratory illnesses such as coughs, bronchitis and pneumonia; sore throats, ear aches, tonsillitis and fevers in children; and women's health issues. He also provides prenatal care and advice for pregnant women.



Several patients came in with pneumonia in November.



This boy has a sore throat.



The baby has a high fever.

Every year, Dr. Ma provides preventative medical care for his villagers as well, giving appropriate vaccinations for the children and offering lectures about a variety of topics such as the importance of vaccinations, drinking-water safety, appropriate nutrition during pregnancy and proper nutrition for children. In addition, he teaches villagers about issues of sanitation and of personal hygiene.



Dr. Yang (local Amity staff overseeing this project) explains the medicines that ABC International Ministries has donated for him to use when treating patients who cannot afford the medicine they need.



Dr. Ma unpacks the box of donated medicines.

Many times patients who come to see the doctor cannot pay for the small cost of the medicine they need, let alone any fee for the doctor. In this case, they usually sign some kind of I.O.U. These patients will always try to pay the doctor back gradually and will do their best to clear their debt at harvest time. Nonetheless, there are always some who are so poor that they cannot pay back what they owe and the doctor continues to pay for their treatment out of his own pocket even though the doctor and his family are also quite poor. This is true of Dr. Ma, as it is of other village doctors as well. To help mitigate this problem and enable village doctors to continue to serving the poorest of the poor in their villages and surrounding areas without totally draining their own resources dry, American Baptists, with the help of the Amity Foundation and the Ningxia Provincial Health and Sanitation Office have started to provide a supply of commonly needed medicines that these village doctors can use when treating those who cannot afford to pay for their care. ABWM is currently raising White Cross funds to help with this project.

Dr. Ma and other village doctors regularly attend additional training seminars held by the County Health and Sanitation Bureau in Guyuanguang. These include a one day meeting each month to update village doctors on pertinent health and hygiene information they need to share with their villagers, as well as important vaccination and treatment information relevant to diseases appearing in the area. Moreover, there are periodic three day seminars on specific issues such as important medical regulations that village doctors must comply with or appropriate use of various medicines.

When asked about the impact of new clinic, Dr. Ma said it has doubled the number coming to the doctor in a timely manner when ill, and it has helped him work with villagers to increase the level of nutrition and disease prevention, especially for women and children.

Thanks again for your part in this ministry of “love in action” in He Jia Gou Village and in nine other villages, also in the southern part of the Ningxia Autonomous Region in China.

¹ ABC International Ministries is interested in helping other similar villages with their medical needs in the same way. The \$1000 reflects what was needed for the construction and provide basic equipment for each clinic in 2004. As costs have been rising, any future clinics built will need \$1400 for construction and basic equipment.