

## Greetings Prayer Partners!

One of our most powerful and long-ranging activities is to help existing churches and ministries stay anchored in the message of God's salvation by grace and provide them with teaching and discipling systems as a legacy they may use for generations. One essential is that these materials are in the language of the heart, the one they learned from mom and dad and grew up using.

With this in mind we have completed the Kirundi translation and proof-reading of the thirty-five Bible Correspondence Fellowship (BCF)/PMA lessons. While doing that we gained insight into a few more improvements to the International English (IE) version which is the basis for all future translations into any language. Translations are in progress for Swahili-Tanzania, French and Bemba in Zambia.

Thank you all for your prayers for the translation team these past months. Most of our team members attend Grace Bible Church-Burundi, one of our partner ministries. They work well together proofreading and reviewing one another's translations before a final editing session with Tom. Since there are nuances in any language, they are at their best when working together to make lessons understandable.

We're close enough to the Democratic Republic of the Congo (DRC) for it to be a hazardous but manageable day or two trip to get to Bujumbura from Bukavu. Former colleagues can cross the border for a fraction of what visas would cost us. They also come for healthcare and as we've all aged, their needs have increased. They are greatly encouraged to get the teaching tools of BCF. They have done their own adaptations in delivery to repurpose these lessons that were originally designed for isolated study by individuals in prison. We have benefitted from copying their teaching methods to apply in Burundi. The Congo team also put our Afya Yetu (Our Health) programs on air in Bukavu, Kindu and Kama, DRC. We have been invited to visit Bukavu to help with BCF promotion and advise on revisions to the church constitution. One of the issues they're contending with is the cultural tendency to treat church leadership positions as lifetime appointments. Please pray for a possible visit in July or August.

Healthcare is a way of showing God's very personal love that goes hand-in-hand with teaching ministry. He is the God who sees and cares in the here and now. Entering the Burundian dry season, we are seeing the disastrous effects of the extra-heavy rainy season on the local economy and the well-being of our neighbors. Lake Tanganyika rose over the banks into the shoreline neighborhoods. We live less than a kilometer from the lake. Businesses along the shore had to close due to flooding. Homes on the ground floor near the shore could not get their toilets to flush, among other hazards.







The domino effect from the once in a generation high-water has created swampy areas and stagnant water that is increasing the mosquito population and resulting in a sharp rise in malaria cases. Tom has treated many who are infected with two or more types of malaria which previously had been an unusual finding. There have also been reports of cholera trying to get established.

Every day those who need care show up at our front door around 7am, and others in the early evening. The usual stuff of viruses, skin infections, backaches, parasites, infected wounds, and a few fresher gashes that require stitches are what keep us busy. Not much diabetes and hypertension among thin, hard-working poor folks. The availability of free care is a welcome safety-net for the dayworkers looking to earn something on a day-by-day basis by loading or unloading (sacs of cement, re-bar, hardware and building supplies) to earn 3 to \$5 a day on a good day. There are also days when there is no work.

Word of free care to the poor has been passed to friends and relatives living in neighborhoods throughout the city and the distant surrounding hills. They have heard 'The Muzungu (light-skinned foreigner) doctor/'pastor' and his wife living in the Asian Quarter (inhabited by people from the Middle-East/Pakistan/India) will see you, give you the medicines and explain it all to you.' As a bonus, the Muzungu wife provides tea, porridge, potato pastry (sambusas), an avocado and sometimes cookies to a fair number of emaciated patients as they wait in the hallway to be seen. Sometimes she mixes bottles of home-made rehydration drink for the sick who are often dehydrated in this extremely steady 82 to 90°F outside environment, who also may be suffering from a fever, nausea, or diarrhea.

One early morning front door 'regular,' is a neighborhood muzee (m-zay, light on the "u" sound, if at all = a respectful term for "old man" that can be translated "elder"), who earns his living sleeping on sheets of cardboard in front of the doorway of a hardware store on our street as a night security 'guard'. At 80+ years old, under 5ft tall, about 60 pounds soaking wet, sawed-off fingers (birth defect or leprosy in his past?), and only 3 remaining front teeth, we nicknamed him "Stubby." He earns about 0.30 to 0.50 cents per day, so his job is one of the few signs of charity in a neighborhood where the predominant religion believes giving to the poor is a pillar of their faith. Having a job that he takes seriously gives him a sense of dignity.

We're in the final stretch of the semester preparing for final exams at our other partner, Hope Africa University. Michelle instructs a cohort of English majors who will go on to teach in secondary schools upon graduation next year. She hopes to stay with this same cohort which she has gotten to know well this past semester. Tom's master's students in nursing are learning pharmacology. French language videos made by fellow health professionals have been a great help in this resource poor environment where everyone has access to the internet by phone or laptop.

Thank you all so much for your prayers and support that allow us to be your hands in this ripe for harvest field, **John. 4:35!**Blessings and Love,

## Tom & Michelle

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