

Jesus brought healing to those who were powerless in the face of disease. He tackled stigma and fear amongst those unable to comprehend the afflictions of their neighbours. His followers pooled their resources to care for orphans and widows. The Church went on to create the first hostels for medical care, and pioneered health systems for the good of all.



Jesus' call to tend the sick and promote health is at the heart of the gospel. Christian disciples continue to this day to follow that call both within the oversight of the Church's mission and out in the secular structures of health care systems. Bringing health is no less a need and no less a calling than when Jesus' loving touch brought new life to those who had no hope.

The Coordinating Board of the Anglican Health Network is committed to support this calling amongst Anglicans and is pleased to present its plans for 2011-14.

Brief history

The proposal to form an Anglican Health Network emerged during the Lambeth Conference 2008 at two self-select sessions organised by Revd Paul Holley. In January 2009 Bishop Rayford High invited a range of participants to the St. Luke's Episcopal Health System conference centre in Houston to explore the interests of health care providers in the Anglican Church. Paul Holley and Lee Hogan developed a concept for the network and made presentations to the Anglican Consultative Council meeting in Kingston, Jamaica, in May 2009. The Council passed a resolution to welcome an Anglican Health Network formally into the structures of the Communion.

AHN held its inaugural meeting in Geneva in June 2009. This brought together 14 representatives from around the Anglican Communion to consider the extent and nature of the church's health care ministry. Sessions were held at the World Health Organization and the World Council of Churches. Following this meeting, the representatives agreed a mission statement for AHN and established a Swiss association to host a coordinating board that would resource the activities of the network. Lee Hogan secured development funding from St. Luke's Episcopal Health System, Houston, St. Luke's Episcopal Health System, Puerto Rico and the Medical Trust of the Church Pension Fund. Paul Holley became the full time network coordinator from July 2010.



The inaugural meeting of AHN at the headquarters of the World Health Organization in Geneva, June 2009.

The advisory council met in Nyon Switzerland in October 2010



The AHN Team



Rev Paul Holley, co-chair and network coordinator

Paul is an Anglican priest from the Church of England with 16 years parish experience in Manchester and Geneva. He has a background in the personal finance industry and a Master of Public Administration from Warwick Business School. Paul proposed and co-founded the Anglican Health Network following research assignments he conducted for the World Health Organization on faith based health care.



Lee Hogan, co-chair and Health Microinsurance programme coordinator

Lee is an engineer with a Harvard MBA and has experience in both government and business. He was the founding CEO of the Greater Houston Partnership and went on to serve in senior positions in the energy industry, ultimately as vice chair of Reliant Energy. Lee served on the board of St. Luke's Episcopal Health System Houston for 16 years, with 7 years as executive chair. He is co-founder of AHN.



Japhet Makau, AHN Tanzania programme manager

Japhet Makau is a finance specialist and entrepreneur with a background in banking and microfinance. He is owner-director of two schools and a board member of the Mama Bahati Foundation. A member of the Anglican Church of Tanzania, he serves on their investment committee.



Bishop Rayford High, board member (pastoral and spiritual)

Rayford served as suffragan bishop in the Diocese of Texas for 7 years before his retirement in April 2011. He has extensive parish experience and was Canon for Pastoral Ministry before becoming bishop. He served on the board of St. Luke's Episcopal Health System Houston and was responsible for hosting the first conference for Anglican health care institutions in January 2009, which led to the forming of AHN.



Geoff Senogles, board member (finance)

Geoff is a Chartered accountant (FCA) from Wales who has lived and worked in Switzerland since 2000. As partner in a specialist forensic accounting practice, running the Swiss office of a Canadian firm, his principal work is acting as expert witness in international arbitrations. Previously, he worked in the United Nations Compensation Commission, Geneva and prior to that was in private practice in Great Britain.



Allison Gamble Kelley, board member (health economics consultant)

Allison is a health economist trained at Johns Hopkins School of Advanced International Studies with 16 years experience working on health financing, economic and policy analysis, public-private partnerships, and health system strengthening in the developing world, with a special focus on Africa. Based close to Geneva, she acts as consultant for a range of health programmes.



Bishop Mwita Akiri, Board member AHN Tanzania

Mwita has been Bishop of Tarime since July 2010. Previously he was General Secretary of the Anglican Province of Tanzania. He has academic interests and lectures for two months each year on church history in Toronto. He has been active in the Churches Social Services Commission in Tanzania and is a member of the Anglican Consultative Council.

The coordinating group convenes an annual **advisory council** meeting that seeks to be representative of the interests of Anglican health care providers in different parts of the Anglican Communion:

Dr. Bennet Abraham Medical Director of the Diocese of South Kerala, Church of South India

Dr. Maria Akrofi Province of West Africa and CAPA coordinator for the development of issues related to women.

Bishop David Alvarez Bishop of Puerto Rico

Bishop Mouneer Anis Presiding Bishop of Jerusalem and the Middle East and Bishop of Egypt

Dr. Alan Crouch Anglican Church of Australia

Matthew Ellis Executive Director, National Episcopal Health Ministries and National Episcopal AIDS Coalition, United States Canon Desmond Lambrechts Anglican Church of Southern Africa

Dr. Hisham Nassar Medical Director of the Diocese of Jerusalem

Dr. Ernest Nwaigbo Medical Director for the Diocese of Owerri, Nigeria

In addition, the following partners collaborate on behalf of structures within the Anglican Communion:

Revd Rachel Carnegie Secretary for International Development for the Archbishop of Canterbury

Emmanuel Olatunji of the Council of Anglican Provinces of Africa (CAPA)

Revd Terrie Robinson Network Coordinator for the Anglican Communion Office

AHN work plan 2011 - 2014

The Anglican Health Network is designed to be an interactive forum that adds value to Anglican health mission. Its operational premise assumes that extra energies and resources can be released when colleagues and institutions from different parts of the communion work together. Its methodology also benefits from leveraging resources and ideas from external partners. As a result, Anglican health mission is being reinvigorated. AHN brings focus, mutual support and entrepreneurial energy to this key area of mission.

The following outcomes and objectives have arisen from deliberations at the inaugural meeting of AHN and the advisory council meeting. Tasks have been identified as opportunities have emerged. The following framework is a work in progress that can engage additional tasks to meet the objectives. Rather than set up an independent management and administrative capacity, the coordinating board is shaping its activity so that members of the network are empowered to share in meeting the tasks.

Most of these tasks are now in the early stages of operation and making encouraging progress. For further information or to get involved, contact Paul Holley or Lee Hogan.

Outcome 1: Making Anglican health mission visible, coherent and collaborative

Objective Task

Visibility: Make use of communications tools, networking structures and data management systems to put health mission on the map and on the agenda.

Maintain and develop communications and tools for networking, including website, newsletters and Facebook pages

Establish provincial, national or regional sub structures through which networking activity can be stimulated and structured. Pilot in the Episcopal Church, the Anglican Church of Tanzania and the provinces of the United Kingdom.

Develop a method for mapping and data management of Anglican health facilities and programmes. Implement pilot projects in the United Kingdom and Tanzania utilising the data systems of St. Luke's Episcopal Health Charities, Houston.

Coherence: Harness and stimulate the theology and practice of health mission in Anglicanism.

Lead a review of health mission in the United Kingdom and plan a concluding conference in 2013

Plan a global conference for 2014 that will bring network participants together to share practise and to stimulate further collaboration.

Collaboration: Draw together those parishes, dioceses and agencies that have intersecting aims in specific health projects to test the utility of pooling their interests and resources so that their relative impact is increased.

Projects: Test the value in facilitating collaboration amongst diocesan and parish links in health projects. Implement a pilot programme in a selected diocese.

Themes: Propose and promote a partnership with the Anglican Indigenous Network to test the value of collaborative thinking about health in indigenous communities.



Outcome 2: Making Anglican health mission sustainable

Objective	Task
Leadership: Strengthen capacity to plan and manage institutions and programmes	Develop an Anglican Master of Public Health programme with People's University that can be adopted throughout the communion. Pilot in the Diocese of South Kerala.
	Establish a 'leadership academy' that will nurture the skills of health programme leaders and facility managers.
Equipment supply: Leverage the resources of Anglican facilities in the developed world to provide Anglican facilities in the developing world with more opportunities to source medical equipment.	Establish a system for the Episcopal Church health systems and hospitals to transfer medical equipment and supplies.
	Establish a system for the transfer of medical equipment from health systems and suppliers in Asia and the Pacific.
Clinical training: Facilitate the sharing of medical skills and training resources in order that Anglican health facilities may expand and deepen their range of competencies.	Establish a communion wide exchange facility for offers of clinical training.
Capital Investment: Seek ideas and opportunities from the banking and investment sector to open new opportunities to access investment finance.	Develop a model to channel funds for investment to Anglican health facilities that at present have inadequate access.

Outcome 3: Making health care more available	
Objective	Task
Health Microinsurance programme: Test the potential of the parish and health facility infrastructure of the Anglican Church to develop a market for health microinsurance.	Implement and evaluate the second phase of the pilot programme in Dar es Salaam.
	Monitor the second phase of the associated pilot programme operated by the Church of South India.
Maternal and New Born Mhealth programme: Develop models and partnerships that can be adopted by Anglicans throughout the developing world to address the current underperformance to meet MDGs 4 and 5.	Establish a pilot programme in the Diocese of Accra to build on their training of birth attendants in 2 government districts.
	Explore partnerships for an additional pilot project in a second country.
	Engage with the wider maternal and child health initiatives for access to resources and advocacy opportunities.



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