

# **Dunedin Methodist Parish**

Finding Good in everyone Finding God in everyone

www.dunedinmethodist.org.nz

Find us on Facebook: Dunedin Methodist Parish

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# **PARISH BULLETIN**

15th September 2019

#### **WORSHIP FOR SUNDAY 22<sup>nd</sup> September 2019**

9.30 am Mornington D Phillipps

10.00 am Mosgiel M Hardy

11.00 am Glenaven D Phillipps

1.00 pm St Kilda TBA

#### **DATES TO REMEMBER**

Today 2.30 pm Musical Society recital

18<sup>th</sup> September 7.30 pm Opening the Archives, Mornington Church

25<sup>th</sup> September 2.00 pm Mornington MWF, Church Lounge

29<sup>th</sup> September 6.30 Mornington Combined churches meet

11 Nov – 14 Dec Pre-Christmas Summer School

#### **DAVID'S LONG SERVICE LEAVE**

David Poultney is on long service leave and will be back at work on 25<sup>th</sup> October. In his absence the Rev Dr Rod Mitchell is available for funerals and to deal with any pressing pastoral situation specifically requiring the input of a presbyter.

**MUSICAL SOCIETY RECITAL** 2.30pm today at Mornington Methodist church. Come and hear some beautiful music. Adults \$2 children free. All welcome.



#### **OPEN EDUCATION: OPENING THE ARCHIVES**

What treasures and what mysteries lurk in our Methodist Church's national archives? Don't miss chief archivist Joe Smith on Wednesday September 18 telling us some of the fascinating stories to be found in the large body of historic documents, diaries and letters under her charge. Join us at the usual time and place—Mornington Methodist Church, Galloway Street, at 7.30pm (koha \$5). Preceded by a fine meal provided by Judy Russell at 6pm (\$15, sign in for your place, or ring 455 3727). In August we had a superb address by Professor Alison Phipps of Glasgow University on the refugee crisis. Here is another high-standard presentation coming our way.

# MORNINGTON METHODIST WOMEN'S FELLOWSHIP Wednesday 25<sup>th</sup> September at 2pm in the Church Lounge.

Kristen Weston is our guest speaker and will tell us of her experiences at the 63<sup>rd</sup> session for the Commission for Status of Women at the United Nations in March 2019. The CSW 63 is the largest group of women world wide given a voice at an International Conference. Nine thousand women attended this year.

All men and women are welcome to join us for this interesting session with Kristen followed by afternoon tea and discussion. Please remember the Fellowship of the least coin collection.

**PLEASE REMEMBER** the 5th Sunday combined churches of Mornington will meet at the Catholic Church at 6:30 on the 29th Sept.

WE HAVE WATCHED WITH HORROR scenes of carnage left behind on the islands of Grand Bahama and Abaco in the wake of category 5 HURRICANE DORIAN. News coverage confirms that devastation is almost complete, and the people for whom those islands are home have virtually nothing left. ACT Alliance local partners are responding.

The International Federation of the Red Cross and Red Crescent Societies report that more than 13,000 houses have been severely damaged or destroyed – about 45 per cent of all homes on the two worst affected islands. Abaco Islands are the most severely affected with thousands of houses levelled, telecommunications towers down, water wells and roads damaged, very limited or no water, electricity and sanitation wiped out, and most of the harbour infrastructure is damaged. In Grand Bahama, the eastern part is the most affected, with homes damaged between Freetown and Deep Water Cay.

Across Abaco Islands and Grand Bahama, airports and seaports are increasingly becoming operational, allowing humanitarian assistance to be delivered. However, access to affected people, particularly in the Abaco Islands, remains challenging mainly due to damaged roads and infrastructure. Assessments are underway conducted by the Caribbean Disaster Emergency Management Agency, National Emergency Management Agency, UN agencies and NGOs to determine the scope of needs.

ACT Alliance (a global alliance of more than 145 churches and related organisations, of which Christian World Service NZ is a partner) is deploying a Rapid Assessment Team to be led by the Servicio Social de Iglesias Dominicanas (SSID) in the Dominican Republic, on behalf of the Caribbean Sub-regional ACT forum. The assessment will identify the

needs of the affected population, assess local capacities to respond including those of churches, and provide recommendations for a speedy ACT Response..

Ways to Help Through Christian World Service

By post: Box 22.652 Christchurch

Online: <a href="mailto:CWS@cws.org.nz">CWS@cws.org.nz</a>

Via the parish Sunday offering marked "Bahamas"

Please note - all proceeds from Wednesday's Church Dinner and Open Education programme will be devoted to the Bahamas Appeal

#### PRE-CHRISTMAS SUMMER SCHOOL PAPER:

## Theology and the Environment (CHTH224/324).

In light of climate change, ocean acidification, and our over-use of plastics, to name a few ecological issues, this timely course investigates what Christian theology has to say about care for the environment. The course invites students to look at how theology can speak to these pressing issues. The will taught by Dr. Andrew Shepherd.

Find out more here:

https://www.otago.ac.nz/summerschool/study/otago714604.html

Each Course costs \$20. Please register online at www.otago.ac.nz/continuingeducation

# STORY FROM THE MISSION STEM Kids



#### For children from low income backgrounds

The kids were "wowed" by the opportunity to code Spheros – a robotic ball that they could control remotely, through iPad. Using their imaginations and ingenuity they designed and negotiated their Spheros around objects, through a forest of legs and up and over cushions, even a version of ten pin bowling.

Following a floor plan developed their understanding of using binary operations to sort numbers, letters of the alphabet and animals of different sizes, and then the progression was made to coding individual digital animations.

The "mine field" activity reinforced the need for clear, concise communication between givers and receivers for the desired outcome to be achieved, with the opportunity to guide a couple of gullible student teachers to their "deaths" proving too tempting for one group!

The children are really enjoying the opportunities that the programme offers. The Museum trips are a real highlight and the variety of activities available to choose from is really appreciated. They are becoming more aware of the challenges of the 21st century and the steps we can all take to care for people and planet.

The enthusiastic support of the group of student teachers at the School has been a plus for everyone, allowing the children to have in depth support in all activities, and they have loved engaging with them.

If you would like to support the Mission's work with a donation, please visit <a href="www.givealittle.co.nz">www.givealittle.co.nz</a> and search for The Methodist Mission



#### THE HEALTH OF THE PEOPLE

Compassion, where one feels the suffering of others and is compelled to

act as if the suffering was one's own, lies near the heart of Methodism and John Wesley exemplified a concern for the sick. In 1760, he published *The desideratum, or electricity made plain and useful by a lover of mankind and of common sense* based on his use of electricity in free medical clinics which he had established for the poor in Bristol and London a decade earlier. He noted that many of those who were helped were of the "nervous kind" but did not include among his reports on the persons he treated any with the "English malady" of depression.

In a 143-page book published this year, The health of the people, David Skegg has described how public health in New Zealand has been compromised by a lack of central leadership and commitment. He notes that three main factors determine our risk of disease: (i) our genes, (ii) our environment including our lifestyle, and (iii) chance, with a reference to Ecclesiastes 9:11 ("Again I saw that under the sun the race is not to the swift, nor the battle to the strong, nor bread to the wise, nor riches to the intelligent, nor favour the skillful; but time and chance happen to them all."). Skegg observes that although we can try to adopt a healthy lifestyle by avoiding smoking and excessive alcohol consumption, choosing a sensible diet and taking regular exercise, we cannot control either our genes or the play of chance. Even the most ardent nonsmoking, vegetarian joggers cannot assume any guarantee of health and may be stopped in their tracks by psychotic depression, multiple sclerosis, breast cancer, a premature heart attack or a host of other distressing illnesses. Some exposure to harmful environmental factors is involuntary such as occurred with the residents of Havelock North in August 2016 when 40% were struck down by campylobacter infection after the water supply became contaminated with sheep faeces. Fortyfive people were admitted to hospital, at least three people died, and many others were left with chronic health problems. Similarly, some householders inhaled asbestos when hasty repairs were made after the Canterbury earthquakes and some develop foetal alcohol syndrome after intrauterine exposure to alcohol.

Tackling many contemporary health challenges, including obesity, type 2 diabetes, road carnage and malignancies such as melanoma, requires collective action with decisions being made by central government rather than the provision of personal health services. The book author considers that, for citizens in an open society, decisions about public health should be based on the best available information and that the trade-offs between health and other social objectives should always be transparent.

Internationally our record is not great. New Zealand has lagged behind Singapore in improving health. Infant mortality rates are regarded as being a good measure of health in a community. In 1950–1954 the infant mortality in Singapore (61.0 deaths per 1,000 live births) was worse than that for NZ (26.8 deaths per 1,000 live births) but by 2010–2014 the situation had reversed with Singapore at 1.8 deaths per 1,000 live births and NZ at 4.3 deaths per 1,000 live births. Similarly, in 2012, NZ girls and boys were twice and three times, respectively, as likely to die before the age of 15 years as their counterparts in Singapore.

Similarly, NZ has been tardy in regulating the use of asbestos which may cause asbestosis (a diffuse fibrosis leading to scarring of the lungs), lung cancer and malignant mesothelioma. Mesothelioma is newly diagnosed in NZ in 100 people each year and in 2015 the deaths from mesothelioma (107) were twice those for cervical cancer. The United Kingdom (UK) introduced its first Asbestos Industry Regulations in 1931. NZ's regulations appeared 47 years later in 1978 at which stage it had already been used as a building material in the Dunedin Hospital Clinical Services Building and Ward Block. In the ODT on 30 August 2017 it was reported that the cost of dealing with asbestos at Dunedin Hospital had reached almost \$5.5 million and that an internal report revealed it took at least 10 days to change a light fitting. A World Health Organization recommendation that the importation of asbestos-containing material should be banned was implemented in the UK in 1999 and Australia in 2003. NZ's ban did not occur until 2016 after it was recommended in an independent report from the Royal Society Te Aparangi and the Prime Minister's Chief Science Advisor.

In his concluding chapter, Skegg laments that his hope and expectation that the Havelock North Drinking Water Inquiry would waken us from our national public health slumber had not been realized. He noted that in the continual, but appropriate, debate about the provision of personal health and disability services, the perilous fragility of our public health capacity had been overlooked. He stated that there is no longer a critical mass of public health expertise in the Ministry of Health and that this

vacuum of leadership must be addressed without delay. New Zealand needs to learn from the experience of other nations, such as Canada, the Nordic countries and the United Kingdom, which have established central agencies for public health.

A Public Health Commission (PHC), a Crown Entity, was established in NZ in 1992 and published 24 main policy advice papers before it was announced by the Prime Minister Jenny Shipley that it would be disestablished on 1 July 1995. In a dissertation on *The rise and fall of a Crown Entity*, Todd Krieble attributed the demise of the PHC to "a combination, for very different reasons, of bureaucratic rivalry, tobacco, alcohol and some food interests, and ministerial preferences."

Skegg observes that one of the lessons to be learnt from the abolition of the PHC is that there is an inevitable contest between those working to improve health and others who have a legitimate right to sell their products, even though these may be harmful to health. Another lesson is that improving and protecting health normally requires political will. The book finishes with a quote from a German pathologist Rudolf Virchow (1821–1902) who pointed to the inseparability of health and politics by commenting "Medicine is a social science, and politics is nothing more than medicine on a grand scale." My interpretation of this rather enigmatic statement is that just as it is necessary for a good doctor to consider all the relevant biological, psychological, social and spiritual factors in order to arrive at an appropriate diagnosis and treatment plan for an individual patient, so too a good politician has to consider all of these same factors when drafting appropriate regulations and laws to enhance the wellbeing of a nation. One can speculate that, If John Wesley was alive today, he would be putting energy into the health of the people.

### **Bruce Spittle**