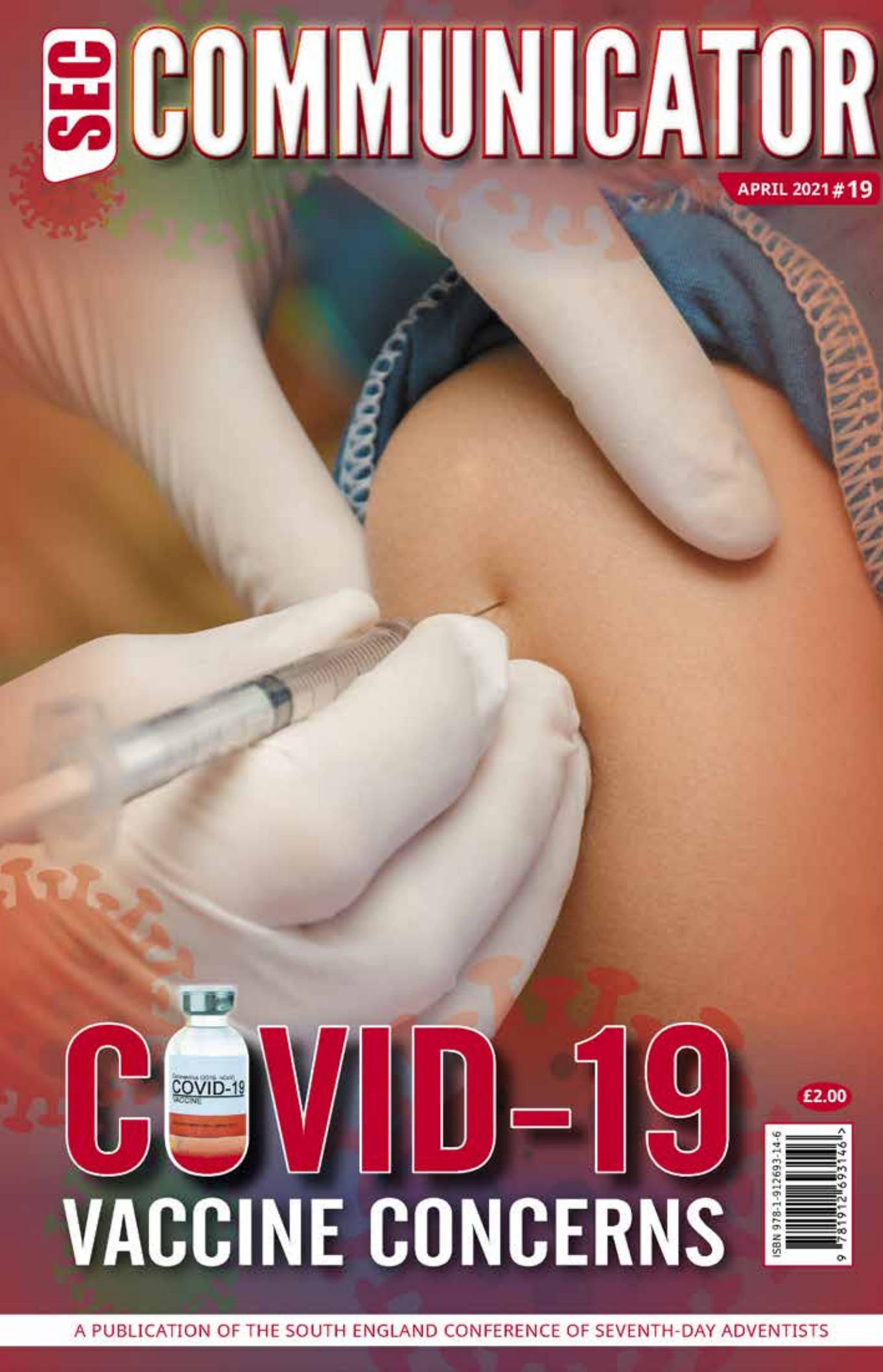


SEC

COMMUNICATOR

APRIL 2021 #19



COVID-19 VACCINE CONCERNS



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A PUBLICATION OF THE SOUTH ENGLAND CONFERENCE OF SEVENTH-DAY ADVENTISTS



CONTENTS

**COVID-19 VACCINE:
LIBERTY OF CONSCIENCE
AND THE LAW**



**VACCINE CONCERNS:
UNDERSTANDING, OUR
RESPONSE**



**"MARK OF THE BEAST," "666"
AND THE COVID-19 VACCINE**



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03 EDITORIAL

05 FROM THE PRESIDENT'S DESK

06 COVID-19 VACCINE: LIBERTY OF CONSCIENCE AND THE LAW – DR BRIGHTON KAVALOH

09 VACCINE CONCERNS: UNDERSTANDING, OUR RESPONSE – DR CHIDI NGWABA

10 ANOTHER LOOK AT THE CORONAVIRUS VACCINES – DR ERIC WALSH

11 COVID-19 VACCINE HESITANCY? – DR VIV LINDO

12 LONG COVID – SHARON PLATT – MCDONALD

14 COVID-19 IN CHILDREN: WHAT YOU NEED TO KNOW – DR JUDITH ANTWI, DR NOMSA MAPHANGO AND DR DESALINE JOSEPH

15 COVID-19: THE IMPACT ON MENTAL HEALTH – CHAPLAIN GREG DAVIS

16 "MARK OF THE BEAST," "666" AND THE COVID-19 VACCINE – DR LASZLO GALLUSZ

18 COVID-19: THE IMPACT ON CHILDREN – JUDY CLEMENTS, OBE

20 TRIBUTES: PASTORS PATRICK BOYLE & JAMES PHILLIP

24 ADRA – CATHERINE ANTHONY BOLDEAU

26 COMMUNITY PARENT STARTS FUNDING INITIATIVE FOR SDA SCHOOL – ANDREW PUCKERING

30 DEPARTMENTAL REPORTS

36 NEWS & CHURCH SPOTLIGHT – DON ROBERTS

40 POEM – ANNICE THOMAS

41 DEVOTIONAL – NERINE BARRETT

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Editorial

COVID-19 continues to dominate the news headlines. Since the announcement of the Pfizer-Biontech vaccine breakthrough followed by the AstraZeneca vaccine, concerns about the virus have broadened and the focus has shifted to issues about the vaccines. Should we or should we not allow ourselves to be vaccinated?

Concerns have been raised by many about the short time it has taken to produce the vaccine. Given that developing a vaccine usually takes many years, the relatively short time it took to produce the COVID-19 vaccine has created anxiety in many people. Some have expressed misgivings about what it might contain and potentially harmful side effects which, in addition to a host of conspiracy theories, has led some people to be hesitant about being vaccinated. Sadly, many have died because of COVID and the global death toll is now over 2 million and rising.

Worldwide, many countries have now rolled out a mass vaccination programme for their citizens, and millions have been vaccinated. As we go to press, some European Union countries have halted their vaccination roll-out because of alleged links to blood clots associated with the AstraZeneca vaccine. The



UK government has been quick to counteract such reports and reassure the public that the vaccine is safe.

When it comes to conspiracy theories, some are alleging that the vaccine is linked to the "mark of the beast" or "666" and therefore must be avoided. Some faith communities are hesitant for various other reasons.

At the South England Conference, we asked our congregations to share their concerns, and many did. These concerns informed the subsequent online presentation and Q&A on 30th January. The seminar was not meant to tell the audience what they must do but was intended to respond to their concerns.

In this edition our authors have endeavoured to cover some of the misapprehensions associated with the COVID-19 vaccine. There are legal considerations regarding the mass roll-out that we must be aware of, including our legal rights and our liberty of conscience. The efficacy of the vaccine is also explained.

Coronavirus has far-reaching consequences. As well as the tragic deaths the debilitating effects include "long COVID." Bear in mind also the impact on mental health, the economic impact, children's educational difficulties, and the religious associations being attached to it by some people. This pandemic is having a significant effect on all of us in one way or another.

We all do have a responsibility for combating this dreadful virus by following government guidelines and being mindful about our impact on the virus's spreading or stifling. As you read, our prayer is that it will make a difference for you in the fight against the virus.

OUR COVER



SAM O. DAVIES
Editor

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NICOLE GOODEN



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Thank you to all who have contributed to this essential funding, I can't stress the relief it's brought to my life.

SAMUEL SEMAKULA

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the President's Desk

DR EMMANUEL OSEI



As a Conference we believe we are here to serve our members and those within our community. And so, issues that confront society are relevant to us and need to be addressed.

The current topic on the list of most governments and people in our communities is the Covid Vaccines. Should we vaccinate or not? I am so thankful that this is not a question of salvation. In other words, whether one chooses to vaccinate or not will not determine their eternal destination. I have listened to both sides of the argument. There are strong proponents for vaccination among our membership. They even give moral and biblical reasons why one should receive the vaccine. On the other hand, there are those who are against taking the vaccine.

When it comes to vaccination, we as a conference hold to the position of the world church, which states:

“The Seventh-day Adventist Church places strong emphasis on health and well-being. The Adventist health emphasis is based on biblical revelation, the inspired writing of E.G. White (co-founder of the Church) and on peer-reviewed scientific literature. As such, we encourage responsible immunization/ vaccination, and have no religious or faith-based reason not to encourage our adherents to responsibly participate in protective and preventive immunization programmes. We value the health and safety of the population, which includes the maintenance of “herd immunity.””

What we have sought to do as a conference is to share as much information as we have with church members regarding the facts of the vaccines; and through the Health Ministries, Public Affairs and Religious Liberty



departments, answer questions on this subject. We have been very careful not to allow our own biases to interfere with the facts as presented. Everyone has to make an informed decision whether to be vaccinated or not.

We have had well-meaning members from the medical profession who have argued that we should use our office to encourage all members to be vaccinated. We have also had other medical professionals who have argued for us to discourage members from being vaccinated. However, we have maintained the following position:

“We are not the conscience of the individual church member and recognize individual choices. These are exercised by the individual. The choice not to be immunized is not and should not be seen as the dogma neither the doctrine of the Seventh-day Adventist Church.”

As a conference, we reject the conspiracy theories that say the vaccines will change one's DNA. The notion that there is a tracking device in the vaccine, to keep an eye on us, is also a conspiracy theory that we reject. Some have erroneously linked the vaccine to the Mark of the Beast of Revelation 13. This is also rejected by the South England Conference.

It is particularly interesting to know that during Ellen White's day, where smallpox was at epidemic levels, we read from her book Selected Messages Bk 2, p303:

“You will be interested to know, however, that at a time when there was an epidemic of smallpox in the vicinity, she herself was vaccinated and urged her helpers, those connected with her, to be vaccinated. In taking this step, Sister White recognized the fact that it has been proven that vaccination either renders one immune from smallpox or greatly lightens its effects if one does come down with it. She also recognized the danger of their exposing others if they failed to take this precaution. [Signed] D. E. Robinson”

It is my hope that we will prayerfully consider this matter seriously and, with the guidance of our health practitioners, exercise our freedom of choice.

COVID-19: LIBERTY OF CONSCIENCE AND THE LAW



On 21 May 2020, at the No. 10 Downing Street press briefing, a member of the public (Finlay from Ardrossan) asked: “If a vaccine is developed, will it be mandatory? If not, how will you bridge the difference in opinion between those who believe it necessary and those who do not?”¹ In essence, this was a profound question as the UK was emerging out of the first lockdown. The reply from the Honourable Matt Hancock MP, Secretary of State for Health and Social Care, was inconclusive. He said: “The question of whether it’s mandatory is not one we have addressed yet.”² However, Professor John Newton, a British epidemiologist and Public Health expert, responded that “vaccine programmes are more successful by consent”,³ and this echoed Lord Donaldson’s dictum: “An adult patient who . . . suffers from no mental incapacity has an absolute right to choose whether to consent to medical treatment. . . . This right of choice is not limited to decisions which others might regard as sensible.”⁴ And this includes vaccination.

A year on, and, in the process of coming out of the third lockdown, the UK now has vaccines being rolled out and approximately over 20 million people inoculated. However, Finlay’s question has yet to be fully addressed. There are currently British companies that are seriously considering ‘no jab, no job’ contracts to require new and existing staff to vaccinate. However, other sectors express concern that such measures may lead to implications in the short and long term on employment law.

UK COVID-19 ‘Status Certificate’ Review in Context

Nadhim Zahawi, the Vaccine Minister, initially warned that the use of domestic vaccine passports would be

wrong and ‘discriminatory’. Subsequently, however, he acknowledged that some “companies might press ahead with their own schemes”.⁵ The Prime Minister, Boris Johnson, expressed reservations about introducing domestic passports, arguing that the idea raised “moral and legal issues”.⁶ but then he seemed to change his mind, citing the international community of nations that had already embraced the idea, but also at the domestic level he believed that “COVID-19 Status Certificates”⁷ could enable the kick-starting of business. However, some government ministers were deeply uneasy that such documents could “lead to discrimination against people who cannot, or will not, receive the COVID-19 jab . . . a prospect that may end up being tested in courts”.⁸ Boris Johnson acknowledges there are “deep and complex” issues⁹ with using vaccine passports or certificates to attest an individual’s COVID-19 status. Hence the Prime Minister has appointed the Cabinet Office Minister, Michael Gove, to lead the review over the matter.

Legal Implications

Barrister Louise Hooper of Garden Court Chambers observes, “It is clear that mandatory medical treatment and vaccination are explicitly prohibited by the Act [Coronavirus Act 2020].”¹⁰ To compel someone in the UK to be vaccinated would require a change in the law (primary legislation). It is worth noting that Louise Hooper adds: “There is, however, potential for abuse to infringement of civil liberties and human rights unless the powers contained in the Coronavirus Act are exercised lawfully.”¹¹ On the other hand, an individual’s human rights may be curtailed through regulatory powers¹² given to the Secretary of State to deal with an emergency for the

shortest time possible: for example, an order to self-isolate, etc. In such circumstances, the exercise of such powers must be “reasonable, proportionate and necessary”.

Bridging the Difference

The ethical dilemma surrounding the COVID-19 vaccination issue is this: on one hand, going unvaccinated exposes others to risk, and this violates their rights. And, on the other hand, the curtailment of one’s principle of consent inevitably infringes on their liberty of conscience. The answer is not a simple one. It demands that a delicate balance be struck between the two competing interests in the face of an ongoing and ever-evolving COVID-19 pandemic. Hence Finlay’s implied axiom, “Bridge the difference in opinion,” must not be lost sight of. The balancing of the two competing interests in vaccination acceptance or refusal is crucial. Use the skills of persuasion, and not draconian measures for both sides to comply, to minimise the ‘disadvantage’ – in this case, the spread of infection and subsequent deaths. The means used to achieve the goal must not be only one-sided: for, if challenged in the courts, it will be for the service provider or employer to justify its practice. The question of whether the implementation provides a proportionate means of achieving a legitimate aim may be approached by the courts in two stages:¹³

Is the aim of the practice or measure taken legal and non-discriminatory, and one that represents a real, objective consideration?

If the aim is legitimate, is the means of achieving it proportionate – that is, appropriate, reasonable and necessary in the circumstances?

Conclusion

We are living in challenging times, albeit couched with opportunities to witness for God. Let us seize these moments during the COVID-19 pandemic pandemonium to “courteously and respectfully”¹⁴ endeavour “to preserve liberty of conscience”¹⁵ and thus be agents of change to “bridge the difference”.



- 1 <https://www.youtube.com/watch?v=WE6aDXWUy7s>
- 2 Ibid.
- 3 Ibid.
- 4 Court of Appeal, Civil Division – Lord Donaldson, Re T (Adult) [1992] 4 All ER 649 at 653
- 5 Financial Times, 16 February 2021
- 6 Ibid.
- 7 Evening Standard, 22 February 2021
- 8 Financial Times, 16 February 2021
- 9 Evening Standard, 22 February 2021
- 10 Barrister Louise Hooper, “Coronavirus Act 2020: Does It Permit Mandatory Vaccinations?” Friday, 1 May, 2020
- 11 Ibid.
- 12 Health Protection (Coronavirus) Regulations 2020
- 13 Equality Act 2020 Code of Practice – Services, Public Functions And Associations
- 14 1 Peter 3:15
- 15 Testimonies for the Church, Vol. 5, pp. 713, 714



DR BRIGHTON KAVALOH

Public Affairs and Religious Liberty Director

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VACCINE CONCERNS

Understanding, Our Response

As we reflect on the past year, and how the pandemic has affected our lives, we remember the precious lives lost and those who are still living with the health issues caused by Covid19. We remember the livelihoods lost, businesses closed, jobs furloughed or forgotten. We remember families and relationships put under unprecedented strain —marriages, children and friendships all suffering —as we seek to find a way through this global crisis. Indeed, we seem to be in an era where:

“Men’s hearts fail them from fear and the expectation of those things which are coming on the earth...” (Luke 21:26)

In such an era of anxiety, worry and stress, it is all too easy to fall into certain destructive mindsets. Anger, blaming, criticism and arguments have been on the increase during this period, encouraged by certain groups and sections of the media. People are taking their “positions” on issues, such as the lockdown, mask-wearing, vaccines and the government’s response to the crisis. These are legitimate topics about which to have an opinion, even a strong opinion.

Where this becomes destructive is when we seek to portray anyone with an opposing view as somewhat less than us, as people not deserving our respect or attention. “We don’t need to listen to them because they are...” (you can fill in the insulting blank). Families are so divided that people stop talking to each other. It’s as if this issue is more important than our family ties.

The politicians have managed to turn this into a tribal issue too. Left-wing politicians believe one thing, while the right-wingers believe another. One might have thought that, at this time, the country could unite to help defeat a common enemy. Instead, we use that common enemy to divide us even further. This division goes beyond geographical borders to pit country against country for PPE, vaccines and death rates. We have competition rather than cooperation, resulting in prolonged suffering for all.

In the midst of all of this, I am reminded of the words of Jesus:

“Blessed are the peacemakers for they shall be called the children of God.” Matt 5:9

During this time the world is crying out for peacemakers, as there is so little peace on show. The world needs men and women, boys and girls, to halt this decline into tribalism where “we hate you and you hate us.” Being a peacemaker is not an easy, or even peaceful, job. It requires resilience, patience and strength, as well as love and understanding. In his classic book, “The 7 Habits of Highly Effective People”, Stephen Covey, in habit 5, gives us the key to peacemaking:

“First seek to understand, then to be understood”.

That person you are angry with, do you understand what her concerns are? Do you understand what in her life may have brought her to this position? Can you understand how she feels? If the answer is “No”, then how do you expect her to listen to or understand you? A lot of peace comes from understanding and forgiveness. That peace leads to a healthier life, as it is the opposite of stress, a major cause of sickness.

As we continue to navigate our way through this difficult time, let us seek to do it with love, forgiveness and understanding.



DR. CHIDI NGWABA

Health Ministries Director

ANOTHER LOOK AT THE CORONAVIRUS VACCINES

There's been a lot of fear and anxiety around the coronavirus pandemic. Not surprisingly, there's also been increased concern over the vaccines that were relatively quickly formulated for this novel virus. There has been much misinformation on the internet and social media. It is important to recognize the contributions vaccines have made to safety in the modern world. It was not that long ago that diseases like polio and smallpox gripped the world with even more fear than the current coronavirus pandemic. Many children were paralyzed around the world from the scourge that was polio. Smallpox cost the lives of millions and it was not until vaccines were created for these diseases that we came to a place where we no longer even think much of either disease.

Misconceptions around the coronavirus include saying that it contains pork products or fetal/embryonic tissue. Neither of these are true. In fact, there's not even coronavirus in the vaccine. The vaccine (Moderna and Pfizer) uses a messenger RNA housed in a lipid nanoparticle to deliver the mRNA into the cytoplasm of the cell. AstraZeneca delivers the mRNA into the nucleus of the cell. None of these systems have the actual virus, but the messenger RNA is used to create the spike protein via the cells or machinery so that antibodies can be made to the spike proteins. The spike proteins are how the virus actually attaches to receptors in the lungs and causes infection. There is no genetic modification of the person (host) with the vaccine, just as there is no genetic modification of the host with the actual virus infection. The Coronavirus, when it infects a host, also hijacks the normal cells' machinery to produce more virus. The lipid nanoparticles are not robotic. Some have even said that the vaccine carries a chip or would make us robots. Again, none of this is true.

Millions have not received these vaccines and, overall, it is much safer to get the vaccine than it is to get the actual coronavirus. Here in the United States, African-Americans are dying disproportionately to everyone else from the coronavirus; yet African Americans, due in part to distrust of the medical system, are much slower getting the vaccine. There is fear that African-Americans might have a pandemic long after the rest of the world has developed immunity.



DR ERIC WALSH

A practicing physician and health care administrator. He was HIV/AIDS advisor to two US Presidents, (George W Bush and Barak Obama). A graduate of the university of Miami school of medicine, Loma Linda university school of public health.

Some have even said that Ellen White was against vaccines or that her son had a problem due to being vaccinated. However, it is important to remember that Ellen White died before modern vaccines came on the scene in the late 1920s. So talk of her son having lifelong problems due to vaccines is not feasible; at least not as it pertains to vaccines manufactured and produced as they are today. In fact, one of Sister White's secretaries stated (June 12, 1931) that Ellen White did take a preliminary form of the vaccine against smallpox when there was an outbreak (See Selected Messages Book 2, page 303).

For us in America, it is reassuring to know that African-American Dr. Kizzmekia Corbett, an immunologist at the National Institutes of Health, helped lead Moderna's design and development of its coronavirus vaccine. Dr. Corbett has earned praise by Dr. Anthony Fauci for her research and work. Her research is instrumental in fighting COVID-19, and yet there is skepticism about the vaccine within the African American community. The vaccine is not mandatory and, based on the 95% effectiveness, may never need to be. Even with new concerns based on emerging variants of the coronavirus, those at greatest risk should strongly consider being vaccinated.

Dr. Walsh is a graduate of the university of Miami school of medicine, Loma Linda university school of public health where he received his masters and doctorate in public health. His most important educational experience was his time at Oakwood University. He has served 2 US presidents (George W Bush and Barak Obama) as an advisor on HIV/AIDS. He has served at several churches as an associate Pastor.

He is now a practicing physician and health care administrator. He travels the globe speaking on many subjects. His wife Jacqueline is his partner in ministry and his best friend.

COVID-19 VACCINE HESITANCY?

There are few people who would dispute that vaccines save lives; yet vaccine hesitancy is commonplace, particularly within the Afro-Caribbean community. The current COVID-19 pandemic has only served to highlight this fact.

COVID-19 is a highly transmissible viral infection caused by SARS CoV-2, a Coronavirus. Coronaviruses are not new in terms of human infectivity. There was previously SARS-CoV and MERS-CoV, both within the last 20 years.

In order to minimise the risk of serious illness or death from an infection such as COVID-19, the body needs to be able to defend against these viral attacks. This usually occurs as a result of catching the infection. The respiratory virus gains entry to the body, usually through the nose or mouth, and invades the target organ, for example, lung cells, and hijacks the protein-making machinery the cell uses to repair itself and grow. The cells are then re-programmed to make multiple copies of the virus, SARS-CoV-2, which then escape from the cell and go on to infect other neighbouring cells. It's a supremely efficient process and highly destructive to any tissue that the virus invades. The good thing is that, once the body has been invaded by a virus, it sets about building a defence by activating specific blood cells in preparedness for any future attack. If the subject survives that first viral attack (a significant "if" with some diseases) it will be in a much stronger position to protect against a future attack of the same virus type. In other words, you have some immunity to the infection.

But how can you gain immunity to an infection without risking death or serious illness from contracting the disease? Smallpox was a deadly disease that killed 300 million people worldwide before it was eradicated by vaccination. In 1796 Dr Edward Jenner observed that milk maids who caught cowpox didn't contract smallpox. Cowpox caused some blistering of the cows' udders, but very mild symptoms when caught by the milk maids. This cowpox infection seemed to transfer immunity to smallpox infection. Dr Jenner injected blister fluid from an infected cow to a healthy person and showed it could prevent them contracting smallpox.

The principle is sound! Expose the body to an agent that resembles the virus but that is unable to make you very sick. The body then mounts a defence which stays in place in the event of infection by the target virus.

Technology for vaccine development has moved on significantly, with advances in science aimed at reducing the risk of any infection whilst priming the body to build a virus defence. The strategy now is to identify the regions of the virus most important for its activity. In the case of SARS-CoV-2, a surface protein called the Spike protein is the "key" which the virus uses to gain entry into body cells. If you can block the "key", you significantly reduce the ability of the virus to infect



cells and cause disease. In short, you don't need to administer viruses to healthy people to get immunity, when you can administer just the part that matters – the key!

More recent advances in vaccine technology capitalise on the body's ability to make proteins. If you can get the human body cells to make the Spike protein, you'll build immunity to SARS-CoV-2 in a similar way to being infected with the virus – or stronger – without any risk of COVID-19 infection. This is the basis of the currently licensed vaccines which use mRNA or DNA technology to make Spike protein in the body. These vaccines have been shown to be highly effective at preventing hospitalisation and deaths due to COVID-19 infection.

Having stated this, no one should be forced to take a vaccination and, after all is said, you may still have vaccine hesitancy. So, it's worth carefully researching to understand the driver for this hesitancy, and whether you're in possession of all the correct facts. It's a personal choice!

There are those who will remain risk-averse; but even actions such as crossing the road carry risks. We don't all live our lives on one side of the road, fearing to cross, because the benefits of crossing the road significantly outweigh any risks in most cases.

COVID-19 vaccination should be considered in that context and with the faith that we hold as Christians, that "Jesus will make a way out of every darkness". After all, Naaman asked the Prophet Elisha for a cure to his leprosy. When God sent him to the Jordan River, he didn't like it either— even though that was to be the cure for his leprosy.



VIV LINDO PHD

Analytical Biochemist

LONG COVID



SHARON PLATT-MCDONALD

BUC Director for Health, Women's Ministries & Adventist Community Services

At the peak of the first wave of the pandemic in April 2020, I observed an increasing number of discharged patients encountering various ongoing health challenges. This negatively impacted their return home, and many struggled to care adequately for themselves. Others who were not hospitalised, but who tested positive for the virus, also struggled to recover.

Among the reported symptoms were continued breathlessness, extreme fatigue, low moods and feelings of depression, all of which they had not experienced previously. This prevented them getting out to shop for essential household items. They also had no energy even to prepare substantial meals for themselves. This was a huge burden, especially for those living alone.

Subsequently, I launched the BUC Restoration Convalescence Project to assist individuals struggling with, what was to become known as, Post-COVID Syndrome (long COVID). Under the project segments — Revive, Renew & Restore — we provided different resources to meet physical, emotional, spiritual, relational and social needs in practical ways. This entailed daily hot meals, weekly shopping, relevant publications on various aspects of holistic wellbeing and counselling support.

What is Long COVID?

The term Post-COVID Syndrome and long COVID are used interchangeably.

In their guidance document, The National Institute of Clinical Excellence (NICE) defines Long COVID as: “*signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks, and are not explained by an alternative diagnosis*”.

A full explanation of the guidelines on the management of long-term COVID-19 can be found at the following NICE website¹: <https://www.nice.org.uk/news/article/nice-sign-and-rcgp-set-out-further-details-about-the-uk-guideline-on-management-of-the-long-term-effects-of-covid-19>

Symptoms of Long COVID

On the NHS website,² a list of some of the common long COVID symptoms include the following:

- extreme tiredness (fatigue)
- shortness of breath
- chest pain or tightness
- problems with memory and concentration (“brain fog”)

- difficulty sleeping (insomnia)
- heart palpitations
- dizziness
- pins and needles
- joint pain
- depression and anxiety
- tinnitus, earaches
- feeling sick, diarrhoea, stomach aches, loss of appetite
- a high temperature, cough, headaches, sore throat, changes to sense of smell or taste
- rashes

The NHS advises that if you are experiencing the above symptoms for more than 4 weeks after contracting COVID-19, you should contact your GP.

Indicators for Long COVID

Research undertaken by Cambridge University sought to uncover some of the indicators for long COVID. Their research findings were published in an article on 18 January 2021, under the caption: *‘Likelihood of Severe and Long COVID may be established very early on following infection.’*³

Some key findings were:

- Individuals who have asymptomatic or mild disease show a robust immune response early on during infection.
- Patients requiring admission to hospital have impaired immune responses and systemic inflammation (that is, chronic inflammation that may affect several organs) from the time of symptom onset.
- Persistent abnormalities in immune cells and a change in the body’s inflammatory response may contribute to long COVID.

The report goes on to highlight the complexity of the immune response associated with COVID-19. The report states: *“Most people who get infected by SARS-CoV-2 mount a successful antiviral response, resulting in few, if any, symptoms. In a minority of patients, however, there is evidence that the immune system over-reacts, leading to a flood of immune cells (a ‘cytokine storm’) and to chronic inflammation and damage to multiple organs, often resulting in death.”*

Research and Funding

A recent press release on the www.GOV.UK website read: *“£18.5 million to tackle long COVID through research.”*⁴ Published

on 18 February from the Department of Health and Social Care, the research project highlights its aims to help better understand the causes, symptoms and treatment which will be beneficial to individuals experiencing longer-term effects of COVID.

The press release included the following notification:

- 4 research studies funded to better understand and address the longer-term effects of COVID on physical and mental health;
- Approximately 1 in 10 people with COVID-19 continue to experience symptoms beyond 12 weeks;
- Government funding for the projects approved in partnership with the National Institute for Health Research (NIHR) and UK Research and Innovation (UKRI)

With the suggested percentage of 1 in 10 people experiencing impaired quality of life beyond 12 weeks, this funding is welcome news.

Health and Social Care Secretary, Matt Hancock said: *“I am acutely aware of the lasting and debilitating impact long COVID can have on people of all ages, irrespective of the extent of the initial symptoms.”*

Fatigue, headaches and breathlessness can affect people for months after their COVID-19 infection regardless of whether they required hospital admission initially.

In order to effectively help these individuals, we need to better understand long COVID and identify therapeutics that can help recovery. This funding will kick-start 4 ambitious projects to do just that.” (<https://www.gov.uk/government/news/185-million-to-tackle-long-covid-through-research>)

The above website briefing also states: *“There is also emerging evidence that some people experience organ damage.”*

Whole person approach

On their website, the British Herbal Medicine Association (BHMA) outlines lifestyle changes, herbal remedies and supplements that build the immune system and help to combat the inflammatory response associated with COVID-19.⁵

Their suggested kitchen remedies for COVID symptoms includes:

- Garlic and onions which are anti-viral and helps coughs
- Thyme for cough relief
- Ginger and turmeric which are anti-inflammatory and may help with muscles aches and fever
- Chili pepper for flu-like symptoms
- Fermented foods like sauerkraut and kimchi to boost the immune system and gut health
- Herbal teas to aid hydration.
- Diaphoretic herbs like peppermint, chamomile, lemon balm and ginger to help with fever

Listing essential lifestyle habits to maintain wellbeing the BHMA encourages the following:

- Reduce stress
- Enjoy the outdoors
- Eat whole foods
- Engage in regular physical activity
- Play more
- Connect with family and friends
- Ensure adequate sleep
- Express gratitude
- Laugh more
- Slow down

Spiritual focus

Prayer support and embracing healing scriptures, like Psalm 107:20 and Jeremiah 17:14, helps sustain faith when struggling with illness.

For more information about recovery from COVID-19, please visit the following website: <https://www.yourcovidrecovery.nhs.uk/>

1 <https://www.unaids.org/en/resources/fact-sheet>
1 *1 <https://www.nice.org.uk/guidance/ng188/history>
2 <https://www.nhs.uk/conditions/coronavirus-covid-19/long-term-effects-of-coronavirus-long-covid/>
3 <https://www.cam.ac.uk/research/news/likelihood-of-severe-and-long-covid-may-be-established-very-early-on-following-infection>
4 <https://www.gov.uk/government/news/185-million-to-tackle-long-covid-through-research>
5 <https://bhma.org/covid-19/>

COVID-19 IN CHILDREN: WHAT YOU NEED TO KNOW



Dr Desaline Joseph (Paediatrician), Dr Nomsa Maphango (GP), and Dr Judith Antwi (Paediatrician), Members of Adventist Doctors Support Network - info.adsn20@gmail.com

Covid-19 is the name of the disease caused by the Corona Virus SARS-Cov-2 (Severe Acute Respiratory Syndrome Corona Virus 2). Its spread around the globe prompted the World Health Organisation (WHO) to declare a pandemic in March 2020. Covid-19 spreads if an infected person coughs, sneezes or speaks to another person and is within 6 feet. Virus particles can also remain on inanimate objects. If touched and then contact is made with the eyes, nose or mouth, this can also promote spread. Someone can have the virus but not show symptoms (for up to 14 days) or be symptomatic.

Most severe cases and deaths from the disease have been in the adult population. Children have lower infection rates and lower rates of severe disease in terms of Covid-19. The risk of severe disease increases if a child has an underlying condition. The evidence suggests that most children who are affected (90%), catch the virus from an adult in their own household. It is uncommon for children (with symptoms) to spread the disease outside the home. Washing hands, maintaining a safe distance (1-2 feet) and wearing a mask (in the over 12s) is important for adults and children, as well as following government advice. Those eligible should consider getting the vaccine (only adults are being offered it at present).

In May 2020, several children presented with a new condition called Paediatric Inflammatory Multisystem Syndrome – Temporally Associated with SRAS-CoV-2). The symptoms develop normally, 4-6 weeks after a child has either been exposed to Covid-19 and has been asymptomatic or had a mild version of the illness themselves. It is thought to be a rare complication of the disease, but serious, in particular because of

inflammation to internal organs (heart, lungs and brain). Its symptoms overlap with a condition called Kawasaki Disease and with toxic shock syndrome. There has been a predominance of cases in Afro-Caribbean heritage children. Some children have had heart (cardiac) complications, and some patients have required intensive care.

These are the signs/symptoms to look for in a child (that may indicate PIMS-TS):

- 4 to 6 days of fever
- Abdominal pain (which mimics appendicitis)
- Vomiting and diarrhoea
- Rash
- Red eyes (conjunctivitis)
- Breathing difficulties (but these are often absent)
- Confusion (this is always a sign of serious disease), headache and lethargy.

If a parent is concerned that their child is unwell, medical advice should be sought as usual. General practice surgeries and hospitals are open, and paediatricians are keen for parents to avoid delays in seeking help. The NHS.UK website contains many guidelines that parents can use to manage minor illnesses and injuries. Children are also welcomed for assessment for minor illness and injury at local walk-in Urgent Treatment Centres. However, when unsure, parents should call the GP surgery for guidance during office hours or 111. Where a child is very unwell or seriously injured then call 999. This is often safer than attempting to transport a child to the emergency department yourself.

Children and young people may have not only been affected by physical illness, but many have had their education disrupted and may be suffering from psychological effects of living in a pandemic. Most schools in England have school nurses and psychologists or counsellors who also work closely with the Child and Adolescent Mental Health Services. Parents may approach schoolteachers to request support from these individuals. In some areas, children and their parents can approach the mental health services directly without a need for referral. Again, your GP would be able to signpost you to these or assign a social prescriber to help you find the best services for your child at the time. Local council websites will also have details of DBS-checked charities that provide support for children and young people.

NHS advice – How to assess for fever in children: <https://www.nhs.uk/conditions/fever-in-children/>

NHS advice – How to look after a child's mental health: <https://www.nhs.uk/oneyou/every-mind-matters/childrens-mental-health>



COVID-19: THE IMPACT ON MENTAL HEALTH

On Friday, February 27, 2021, Sky News' Parmenter reported that, while coronavirus emergency calls are going down, there has been a drastic increase in ambulance calls related to mental health issues since winter. The prolonged travel restrictions, ban on family and home visitations, social isolations, physical distancing, closed places of worship, etc. have adversely affected people's mental health.

Several mental health service providers have reported a dramatic increase in depressive symptoms, such as feeling sad, anxious and guilty; low energy, tiredness or fatigue; poor concentration; loss of interest in hobbies, family or social life; aches and pains with no physical basis. Other symptoms may include crying, loss of interest in living and suicidal thoughts.

High levels of uncertainty from job insecurity, decreased financial security, fear of infection or illness of oneself or ones family members, especially for those living overseas, have resulted in anxiety, with symptoms like insomnia, lethargy, irritability, headaches, digestive problems irregular heartbeat and hyperventilation.

Laughter is Medicine

Thankfully, simple behavioural and attitudinal changes can greatly help reduce and prevent mental health problems. Firstly, laughter is a natural healer and a relaxant that calms and improves the mood and boosts the immune system. When we laugh the brain releases serotonin and dopamine which improves mood, lowers stress, and improves our immune system. Moreover, it has no side effects. So go easy on yourself. Learn to laugh every day. Be serious about not taking yourself too seriously. Laugh with others. Laugh at yourself, even if it means goofing around at home with your family, or making faces at yourself in the mirror until you laugh. Try it.

Healthy Lifestyle

Healthy eating, 7 to 8 hours of quality sleep (preferably starting from the first 2 hours before midnight), daily exercise, abstinence from alcohol and other harmful substances don't only benefit your physical but mental health as well. Having a daily routine and schedule for each day, reducing screen time, taking up a new hobby (learning to bake banana or sourdough bread, or learning to prepare new dishes) can greatly improve your mental health and wellbeing.

Nature is God's Physician

Have you ever wondered why Jesus went to the Garden of Gethsemane in the hours before suffering, and not to the temple? Ninety minutes in the woods can significantly reduce blood pressure, symptoms of anxiety and depression, and improve diabetes, mental illness, stress and heart disease. Without a doubt, taking a daily walk into the woods not only "increases happiness, but it reduces aggression, ADHD symptoms, improves pain control, and boosts the immune system" (Fleischer 2018), (Livini, 2017). If Jesus took a retreat during the most stress-provoking moments in His life on earth, why not you?

"Nature is God's physician. The pure air, the glad sunshine, the beautiful flowers and trees, the orchards and vineyards, and outdoor exercise amid these surroundings, are health-giving—the elixir of life. Outdoor life is the only medicine that many invalids need. Its influence is powerful to heal sickness caused by fashionable life, a life that weakens and destroys the physical, mental, and spiritual powers. White, Counsel on Health, p.170)

Psychosocial Support

The prolonged social isolation in the past several months has resulted in chronic loneliness and depression. Loneliness is as lethal as smoking 15 cigarettes a day, contributing to 14% of deaths (Morin, 2018) and currently rivalling both obesity and smoking as health risks in the US (Tate, 2018). I define loneliness as the longing to belong and to be emotionally connected to others. To overcome loneliness, invest in our most important relationships, that is, God, family, friends. The benefits of strong social and emotional connections include improved mental health, physical health and wellbeing, better resilience to stress, improved self-esteem, and a sense of security.

Acceptance & Vulnerability

Reach out and talk to family, a trusted friend, pastor, GP, or mental health professional. You would be amazed at how much care, understanding and support are available to you. Jesus acknowledged his struggle, reached out and poured out his inner feelings to the three disciples closest to him (Mark 14:34). Always remember, asking for help is a sign of courage and bravery. Remember this: *"I concealed my troubled feelings from my family and friends, fearing that they could not understand me. This was a mistaken course. Had I opened my mind to my mother, she might have instructed, soothed, and encouraged me."* (White p. 135).

Spiritual Support

Prayer works, because God answers prayers. A Harvard study of 5000 teens indicated that regular prayer and participation in weekly religious services, "can powerfully affect their [young people's] health behaviours, mental health, and overall happiness and well-being." (Harvard Health, 2018).

When anxiety or depression goes up, everything around us can appear gloomy. Keeping a daily gratitude journal, even the tiny ones, will not only surprise you what the Lord has done, but it will boost your mood, remind you of how great you're doing, and encourage you to continue to trust in God and keep forging ahead. Lastly, be forgiving, compassionate and gentle with yourself and others. Keep a positive outlook on life. *"We have nothing to fear for the future except as we shall forget the way the Lord has led us"*.

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CHAPLAIN GREG DAVIS

Mental health clinician and certified University Chaplain

“MARK OF THE BEAST,” “666” AND THE COVID-19 VACCINE



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While preparing to write this article, I received an e-mail from a respected head elder who, from time to time, shares his burdens with me. This time he claimed that the issue of the Mark of the Beast was currently stirring up a lot of dust in his church congregation. He asked me for a balanced, biblical perspective on this issue. Clearly, ‘how one reads, teaches and preaches Revelation can have a powerful impact on one’s own — and other people’s— emotional, spiritual, and even physical and economic well-being.’¹ So, interpreting Revelation is a serious responsibility which is not to be entered into without careful consideration.

Adventism and Apocalyptic Fervour

Apocalyptic fervour was, from the very beginning, the driving force of Adventism. The prophecies of Daniel and of Revelation defined the core of Adventist identity. Moreover, the sense of the approaching end, and the conviction of the critical role of Adventism in preparing the world for the return of Jesus, supplied a strong motivation for a worldwide mission.

A strong, unbalanced apocalyptic sense, however, can bring a lot of frustration as well. Whenever the latest world crisis or disaster is seen as a ‘sign’ that the end of the world is at hand, disillusionment is only a step away. Such a fervour often defines one’s hermeneutics: how one approaches the Scriptures. Without giving the biblical text the detailed attention which it deserves, often surface parallels are identified between some current events and the text. Instead of allowing the Scripture to be its own interpreter (*Sacra Scriptura Sui Ipsius Interpres*), ideas are read into the biblical text with an intention of generating apocalyptic excitement.

Such apocalyptic parallelomania is well attested in the history of Adventism. A good example is when the Second Coming was expected in 1964, based of Jesus’s statement, ‘For the coming of the Son of Man will be just like the days of Noah’ (Matt 24:37 NAS). It has been claimed on the basis of this text that as Noah preached for 120 years, so will last the preaching of the eschatological message to our world

(1844+120=1964). No question, the story of the flood has an eschatological relevance, as Jesus clearly pointed out; but its limits, so we the parallels should not press too far.

The Mark of The Beast

Probably the most fruitful chapters for apocalyptic parallelomania in Adventist circles are Revelation 13 and 17, chapters which have intrigued many for a long time. The Mark of the Beast was, from the time of the early church, a matter of particular importance. Many throughout history read into it their own time and place. Among them was even Martin Luther, who identifies the Mark of the Beast with the Turks when they knocked on the door of Vienna and threatened to extend their empire to western Europe. Recently, a number of Christians have seen the Covid-19 vaccine as the Mark of the Beast. Such an interpretation, however, can be seen as a serious distortion of the Scripture on hermeneutical and exegetical grounds.

First of all, Revelation is to be understood in light of the Old Testament, not in light of the daily news or different conspiracy theories. Namely, the basic background of Revelation 13 is Daniel 3 and 7. Not only verbal, but also thematic and structural parallels can be established between these contexts. According to Revelation 13, the scenario of demanding universal idolatry (Daniel 3) will be repeated at the end-time. The height of the golden statue, set up on the plain of Dura in Babylon, was sixty cubits, and its width was six cubits (Daniel 3:1). Its length might also have been six cubits. It is well-known that Babylonian arithmetic was based on a sexagesimal system with 6 and 60 as the basic counting units. Six is thus the number of Babylon which stands in contrast with seven as the number of God (a symbolism rooted in Genesis 1). It is said of 666 that it is a human number (*arithmos anthrōpou*; Rev 13:18). It designates a Babylonian, human-centred, quasi-sovereign system which refuses to acknowledge the creator God as the sole authority in the universe (Revelation 14:7).

Also, the Mark of the Beast is to be understood as a diabolic counterpart of the seal of God in Revelation (7:1-8; 14:1-5) and not as a specific human initiative of global character. These are competing ‘marks’ which have a representing function: they ‘represent the name of the reality to which they point.’² They are not visible manifestations of a certain sign on the forehead (or the right hand), but they signify

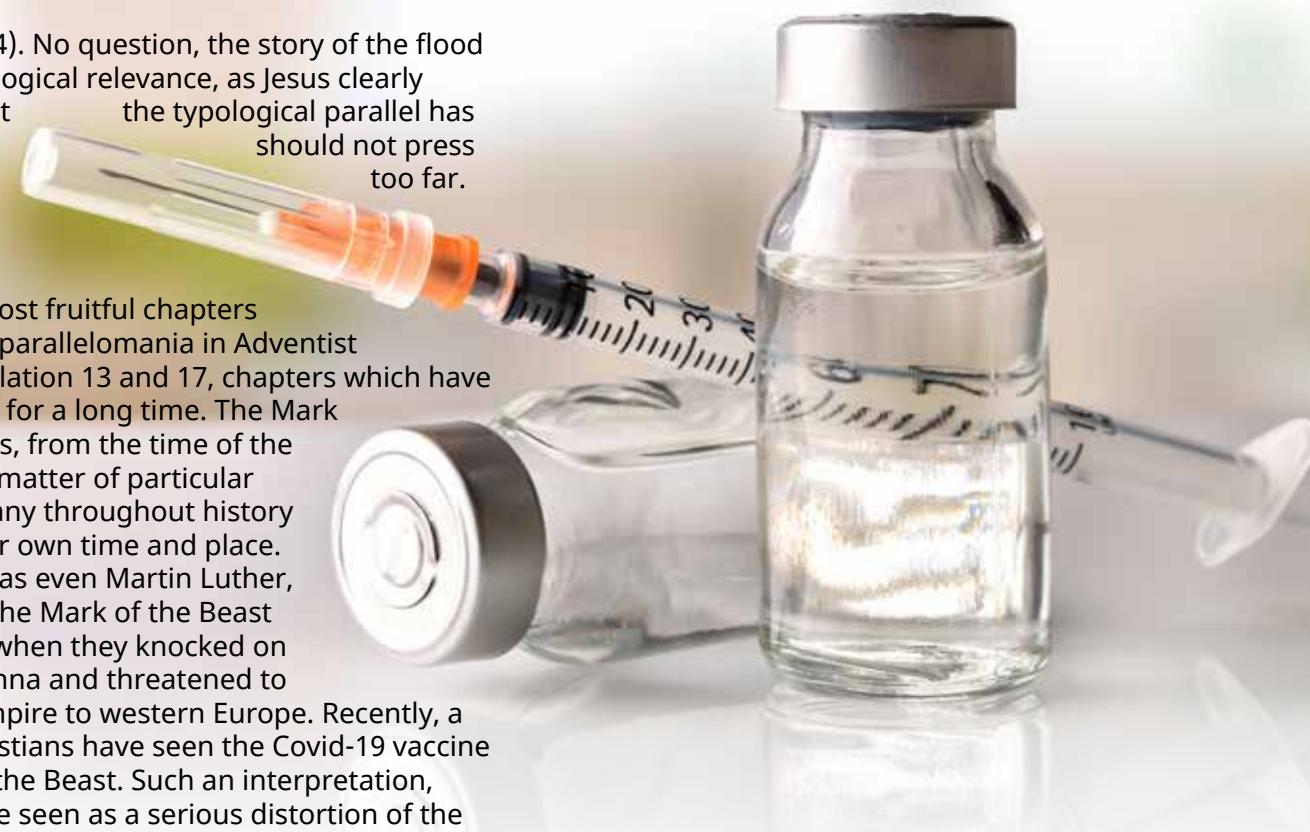
belonging. The fact that vaccination is a global initiative does not qualify it as the Mark of the Beast, since the cardinal issue in Revelation 13 is not vaccination, but worship. We can sympathise with the unease of many believing Christians about taking the Covid vaccine, but this dilemma has not much to do with the eschatological dilemma delineated in Revelation 13. As slaves, soldiers or the devotees of a particular deity were tattooed in the ancient world, signifying their allegiance, so will human beings need to make choice in the eschatological scenario about their adherence either to Babylon or to New Jerusalem. Generating eschatological excitement by making superficial links between the Mark of the Beast and vaccination misrepresents what Adventism stand for at its core: devotion to responsible reading and application of the Scriptures.

Conclusion

Biblical discipleship is not based on apocalyptic excitement, but it is rooted in a conviction about God’s faithfulness. Advent hope is an essential component of trusting in God’s faithfulness. It is not a euphoria; and it is definitely not an irresponsible sense of imminence which utilizes false hermeneutics to stir up emotions. It is a conviction that Jesus is on the way to restore his world, and his kingdom will come in its fulness soon. No question, Advent hope has an element of eagerness, but that eagerness is intelligent, since it is complemented by patience which gives durability to the hope.

¹ Michael J. Gorman, *Reading Revelation Responsibly* (Eugene, OR: Cascade Books, 2011), xiii.

² Sigve K. Tonstad, *Revelation, Paideia* (Grand Rapids, MI: Baker Academic, 2019), 196.



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COVID-19: THE IMPACT ON CHILDREN

I interviewed over twenty children, aged six to fourteen years, parents, and some Adventist headteachers about the impact of Covid - 19 on different aspects of their lives. Hearing directly from the voices of children and those who teach them brought heartfelt insight to the real impact of prolonged home confinement.

Impact on school life: - For some children, home schooling delivered online meant more testing, additional time to complete work and extended lunch breaks. Others said it was harder working from home because teachers shortened their lessons, leaving insufficient time to discuss their work.

Perspectives from Headteachers: - During the first lockdown, where schools had no take-up from children of key workers, staff had time to prepare lessons and talk to parents. Schools made up learning packs for the pupils; and in one area, the children dropped off their work on Sundays. Another school invited Year Six pupils into school at the end of the first lockdown, in July 2020, and hosted a graduation ceremony to recognise their achievements.

September 2020: - Most children were excited about returning to school. Some had to be re-taught how to socially interact with their peers and be reminded about the application of school values. A noticeable impact of lockdown was regression in the academic

progress of some pupils. Schools conducted assessments, implemented recovery curricula and delivered daily intervention plans for students to reach the required attainment levels, whilst many other pupils excelled. Autumn term activities were celebrated virtually, including Harvest Festival, fundraising, Black History Month, Remembrance Service, Week of Prayer, Anti-bullying week, Book Fare and end of year seasonal festivities.

Lockdown, from January to March 2021, was harder for some schools, because 50% of pupils were physically in school and the remainder were taught remotely at the same time from home. Some staff found the experience distracting. During this current term, Chinese New Year was celebrated virtually in one school, with parents demonstrating Chinese cuisine and arts & crafts. Staff and children joined in from home and school.

Impact on Mental Well-being: - COVID-19 continues to have a profound adverse impact on the mental well-being of children and young people.

This varies from anxiety to self-harm. Schools are proactive in supporting the mental well-being of their pupils.

One school monitors the mental well-being of the whole school, using three flash cards — red, orange and green — issued to each child. These cards represent their daily feelings (red for a bad day; green a good day). Each day, time is set aside for children to discuss the card that reflects their feelings for the day. Some schools offered virtual activities, like fence painting, growing vegetables and encouraging parents to spend time with their children.

All schools maintained the strong spiritual ethos synonymous with Adventist educational institutions. Assemblies are held regularly where children are reassured of God's presence and protection, and student faith ambassadors appointed.



Some schools have designated thematic days like "Thankful Tuesday" to talk about things, they are grateful for (despite the pandemic); or Wellness Wednesday where the whole school community receives a blog to do an activity, such as walking, for example.

Impact on Social life: - All children commented on the lack of social interaction and missing their friends. A number of children spoke about how their schools helped to address this issue by setting designated supervised time to allow pupils to talk to each other online each week; another school hosts a weekly Microsoft quiz as a fun way for pupils to interact with each other. Some older children established a WhatsApp support group to help each other with homework and discuss concerns.

Impact on Family life: - Some children said they thought it was easier for parents, who were spared travelling to do the school pick up and could now rely on older siblings to look after the younger ones whilst the family were confined to home. Other children reported enjoying family trips to the park to play basketball or football, and online exercise classes done by one of their Sabbath School teachers.

Impact on Church life: - Some children preferred online church because the flexible time conditions enabled them to focus on their lessons and achieve more. A poll of children interviewed for this article revealed 83% of children preferred to return to church.

Sabbath School teachers enjoyed online teaching because it meant no travel and more time to prepare lessons. Nevertheless, they missed face-to-face interaction with children. Sabbath School teachers were mindful of the impact of COVID-19 on the

social and mental wellbeing of some teenagers who have disengaged from church. This is evidenced by limited active engagement in online church, where those zooming into classes switched off their screen cameras and did not respond when called to participate. Anxious teachers reached out to other young adults to act as a conduit to speak to those who had raised concerns about their well-being.

Losing a Loved One: - Experience of losing a loved one or knowing someone who had been extremely ill from Covid -19 left a deep sense of uncertainty and fear about the future amongst children and young people. At school, children were able to speak openly about this in assemblies or during specially allocated circle times. School chaplains, well-being teams and the Cornerstone Counselling Service are readily accessible to the whole SDA school community.

I would like to thank all the children, Sabbath School teachers and headteachers who enabled this article to be written by participating in interviews and sharing their experiences of coping with the pandemic. May God continue to bless you all in your studies and ministry.



JUDY CLEMENTS OBE

Children's Ministries Director

TRIBUTE: PASTOR PATRICK BOYLE



Pastor Patrick Boyle died on the morning of 29th December 2020. As many know Patrick had been ill for some months and was glad to be able to spend his last months at home. Many will remember that Patrick was the second pastor asked to be Chaplain for the BUC Retirees (Martin Bell was the first) and I count it a privilege to be continuing the work that he so ably carried for some years. It was Patrick who turned an occasional "In touch" newsletter into the regular monthly *Pilgrim*. Paddy will be missed by his family and by so many who were his friends and colleagues. We remember Rosemary and his family in our prayers and thoughts.

By Paul Lockham

Those who have lost loved ones know that there is nothing which can replace the absence of someone dear to us. It is therefore with heavy hearts that we share the news that Pastor Patrick Boyle passed to his rest on the morning of 29th December 2020.

'Paddy,' as he was affectionately known was a larger-than-life character whose sense of humour and love of life will be greatly missed by all who knew him. Always positive, Patrick was a people person who could be relied upon to attend church services and events and to mix and chat with friends and visitors alike. He went out of his way to 'make friends for Jesus' – and that I believe is what Patrick would want as his legacy. He always, but always, uplifted the name of Jesus in his inspirational preaching and teaching and talked freely of his faith. As a retiree, he continued to support church programmes and always made sure he greeted visitors in church. He accepted that his illness was terminal and looked forward calmly and with anticipation to meeting his Saviour and the Lord of his life.

Patrick adored his family and had a special bond

with his granddaughter Alexandra. He and Rosemary worked closely together throughout his ministry and they supported each other always. They were a team. He was

a loving and proud father of his daughters, Audrey and Amy, and a friend to his son-in-law John, and although small in number, theirs was a very close-knit family. It goes without saying that his passing will leave a very big hole in their lives; one which will never be filled until the day when separation will be no more.

Patrick will also be mourned by many in his homeland of Ireland, in the UK, Canada, Pakistan and other parts of the world where his ministry, and the many seminars he conducted, was appreciated.

His legacy of love for his Saviour should inspire all of us to 'enter each new day with a generous heart' until the time when death, the last enemy, will be conquered forever. Even so, 'Come, Lord Jesus.'

*By Audrey Balderstone
(Adapted and used by permission)*

TRIBUTE: PASTOR JAMES PHILLIP



Pastor James Phillip, fondly nicknamed 'Shy John Morris', was born in the Caribbean island of St Kitts in the late 1940s.

The Morris/Phillip family consisted of seven boys and two girls. James helped his father farm acres of land in Molyneux, attended school during the week and was an altar boy in the Catholic church.

In his teens he went to live with an influential cousin in St Croix who introduced him to the Seventh-day Adventist faith which he joined.

After his conversion, he moved from St Croix to University of the Southern Caribbean, formerly Caribbean Union College (CUC), in Trinidad, West Indies. He worked in a bakery and travelled across the Caribbean region, selling literature to pay for his college tuition.

As a student at CUC, he forged lifetime friendships that included meeting his wife-to-be Anne Pilgrim, a Maths teacher. Completing his studies in 1973, he got married and began his ministry that year as the Youth, Health and Temperance Director of the Eastern Caribbean Conference in St Lucia. In his first term of office, his eldest daughter Shanda was born. Moving from there to Barbados for his second term of office, his second daughter Anna-Lee was born.

In this role, he was required to travel across the Eastern Caribbean islands. He created mentoring opportunities. One of his key messages was

Philippians 4:13, "I can do all things through Christ Who strengthens me".

He then returned to CUC as Dean of Men in the 80s, where those at Cedar Hall Dorm (aka Spartans) formed great memories under their beloved 'Round One'. He was a prolific table tennis player, as well as playing dominoes and basketball. He also taught the 'Christian Beliefs' class, the first course all students had to complete.

In 1986, he accepted a call to minister in South East London, and he and his family came to England.

During ministry in the South England Conference, he led the following churches: Downham, Sydenham, Nottingham, Eltham, Lewisham, Balham, Brixton; and he was also an Area Co-ordinator. While there were opportunities for him to hold office roles at conference level, he purposed in his heart to be a local church pastor.

He is well remembered for trailblazing renovations and improvements to church buildings and services which can still be seen at Balham, Lewisham and Brixton.

In 2014, he received a Stewardship Leader of the Year award and, for his family, this reflected his mental mathematical computations that were faster than typing into a calculator!

He officially retired from ministry in 2015, but his heart remained that of a pastor. He was bishop, father, dean, gardener, tent-builder, mentor, cook

extraordinaire (juice and salt-fish patties), carpenter, driver, comedian. He was also a 'no nonsense' individual who disliked church politics, preferring to be a friend to all mankind.

After 47 years of service and marriage, James has left a legacy of love, growth and dedication.

Sadly, Pastor James Phillip passed away peacefully in hospital as a result of chronic illness, with no Covid-19 related complications, on Thursday, 4 March 2021.

He will be truly missed. Funeral details will be shared at a later time.

He sleeps now, awaiting our Lord's return who is "true and faithful".





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SEC Children's Ministries Department



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Record your child showcasing their talents in singing / playing Easter songs, reciting poems and monologues linked to the events told from the Gospel of Mark, Chapters 11-16, the start of Jesus' journey into Jerusalem through to HIS crucifixion and resurrection.

Please send your recordings to:

cmd@secadventist.org.uk or contact Craige on 07866437262 by Sunday 21st March 2021 latest.

The programme will be aired at 11:30am on Saturday 3rd April 2021 on SEC Media, www.brixkidz.org, Brixkidz Social Media and Adventist Radio London (ARL) at 4:00pm.





WE'RE ALL IN THIS TOGETHER!!!

ADRA-UK will launch its Annual Appeal on 27th March with a special YouTube broadcast at 3pm (link: <https://youtu.be/swUj1DbOJBs>)

Together, the theme of this year's Appeal, invites volunteers, funders and potential donors, to journey with ADRA during 2021. As we seek to manage development projects, support local community grassroots hubs, and provide immediate assistance in disaster zones, we encourage you to raise funds on behalf of ADRA-UK to help the world's most vulnerable people.

The *Together* campaign will start on the 27th March and run throughout 2021. In place of our usual door-to-door 'ingathering' that lasted for two weeks (three in Greater London), we are inviting you to see involvement with ADRA-UK as an ongoing commitment and not just a one-off event.

Humanitarian crisis, the fallout of COVID-19 in the UK, and natural disasters have long-term consequences and require impactful sustainable solutions for the affected communities. ADRA works with

governments, other charitable organisations as well as those with lived experience to ensure that they create appropriate, timely and well-managed projects and programmes where they are most needed.

Being 'my brother/sister's keeper' means that I have a responsibility to care for those in need. As Christians,

Jesus says to us that, 'as much you have done to the least of these, you have done it onto me'.

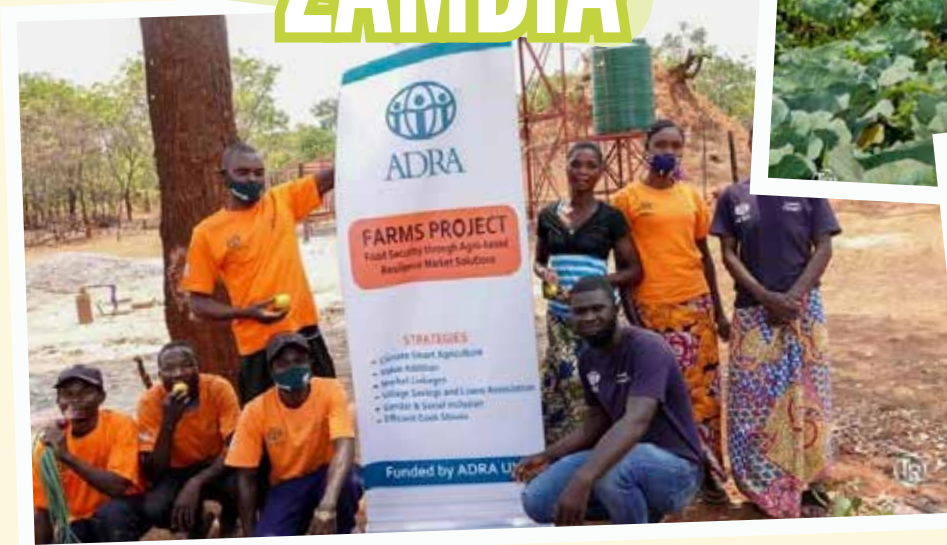
Together, we can help to alleviate the suffering through ongoing justice, love and compassion. *Together*, we can create a better world. We're all in this *Together*!



If you would like to know more about the work of ADRA-UK, please go to www.adra.org.uk



together in ZAMBIA



In Zambia, there are communities who have worked in farming all of their lives. But they need help to explore and try new ways of farming.

Without water, farmers are unable to water their crops to grow healthy food. We teach farmers new farming methods, so they can collect more healthy food from their seeds. We also provide farmers with water systems near their land, so that they don't have to fetch water from far away. Now, the farmers are collecting a bigger harvest from their land. They can feed their families and sell their left-over foods, so that they have money to buy needed supplies to support their livelihoods.



together in MYANMAR



In Myanmar, there are many children who do not attend school. There are many in-country wars in Myanmar between different ethnic groups.

Many parents keep their children at home because it is not always safe for children to attend school. We want schools to be a safe place where children can enjoy learning in a secure environment. We train teachers, who are passionate about education, to set up and run schools in rural communities where there are no schools. The teachers reports tell us that the children are very happy to attend school and learn in their local language.





COMMUNITY PARENT STARTS FUNDING INITIATIVE FOR SDA SCHOOL

Dudley House School, the Seventh-day Adventist school in Grantham, is amazingly blessed with parents who truly believe in the education the school offers. When, during a parents' evening, it was revealed to parents that the school's low enrolment had been exacerbated by COVID-19, worsening their financial situation, the earnest desire to help the school survive and thrive was evident on all faces – and especially among non-Adventists, who have seen the difference that this Seventh-day Adventist school is making in their children's lives. Rather than withdraw their children and save themselves the school fees by sending them to a state school instead, these parents decided to help the school in any way they could; and one of them – Katie, a local Grantham resident, whose daughter attends the school and has benefited tremendously from attending it – created a GoFundMe page for Dudley House.

Grantham church members and the headteacher, Jenny Johnson, are all tremendously encouraged by these parents' desire to help fund the school for their children's education, and we hope and pray that God will continue to bless Dudley House School as a shining beacon of light for Adventist and community children in Grantham for many years to come!

If you would like to help support this Seventh-day Adventist school, Katie's GoFundMe page and the story of how Dudley House School helped her daughter can be found at:
<https://gofund.me/48de429a>

Why not enrol your own children at Dudley House School and see for yourselves the difference this Adventist school is making in the lives of its children? Contact Jenny Johnson, the headteacher, for further details:

Tel: 01476 400184
Mobile: 07483 455997
Email: headteacher@dudleyhouseschool.co.uk

Visit the school's website here:
<http://dudleyhouseschool.co.uk/>

Photo Credit: *Grantham Journal*, article: 'Grantham School Praised by Ofsted in Latest Inspection', 21 March 2019

By Andrew Puckering

EGAC PROJECT GIVE FIVE (PG5) LAUNCH

“FAST, PRAY, GIVE...”



This was the rallying call at the Euro Ghanaian Adventist Congregations (EGAC) Project Give Five (PG5) virtual launch on Saturday, 27th February 2021.

Project Give Five is an initiative by the Ghanaian Adventist Congregations in Europe/UK to raise funds to support evangelism, infrastructural projects in Ghana and members in need. The event which was held on zoom and streamed on YouTube and Facebook was very well attended.

The project is expected to raise a minimum of £/€720,000.00 in 5 years, from the 4000 plus EGAC members, who were encouraged to set aside one day in the month to fast and pray for the world church, EGAC, the members and their needs, and donate the lunch money of £/€5.00 for the day to the project. This is particularly remarkable, as the aim is to ensure contributions do not affect donors' budgets, their families, their local churches and Conferences.

The congregation was also inspired by the spiritual benefits of fasting and praying for their church family. The funds are earmarked for:

- Supporting evangelism across the whole Europe/UK, by establishing new congregations and support already existing congregations of spiritual needs and membership drive.
- Supporting Valley View University, Ghana in the provision of infrastructure and establishment of an Adventist private medical school.
- Supporting Adventist Health facilities in Ghana in the provision of medical equipment to boost their operations.
- Supporting our members and others in dire need, in some cases helping them to recover from tragedies.

For more information on the project or to join the scheme, please contact:-

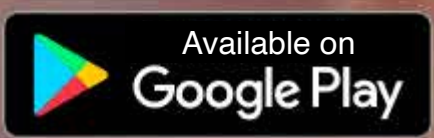
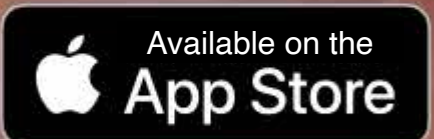
Eld Samuel Adjei-Owusu (PG5 Chairman): +44 7957 454 150 / adjeios3@aol.com
 Eld Collins Amofah (Secretary): +44 7984 393 320 / egaccompastor@gmail.com
 Bro Isaac Asare (Treasurer): +44 7930 633 257 / ikeasare10@yahoo.co.uk

But Jesus looked at them and said to them, "With men this is impossible, but with God all things are possible." Matthew 19: 26

"The task ahead is great indeed, and heavy is the responsibility; and yet it is a noble and glorious challenge. A challenge which calls for the courage to dream, the courage to believe, the courage to dare..." Osagyefo Dr Kwame Nkrumah, Ghana's First President.



AVAILABLE 25-03-2021



ADVENTIST CHURCH RELEASES NEW BIBLE TRIVIA GAME APP

A brand-new digital evangelism tool aimed at reaching the world's 2.7 billion gamers

Heroes 2: The Bible Trivia Game is a free app developed by Hope Channel to share the Three Angels' Message with gamers and young people around the world. The app will be available on March 25th for Android and iOS on popular app stores.

Players start their journey with Adam and Eve in Genesis—the first heroes—and end in Revelation with John, the Son of Thunder. As these heroes ask factual questions about their lives, 12 per round, players accumulate "experience points". The more experience points a player has; the more heroes are unlocked. The questions increase in difficulty as the game progresses and players can challenge their family and friends simply sharing a link at the end of each round.

Pastor Sam Neves, the project's director, believes that videogames are a great tool to creatively communicate the Gospel with technology; a well-thought-out strategy to reach young people in a secularised culture. "The real challenge is that young people today know more about the comics stories than the Bible stories. Therefore, Heroes was born, to encourage them to familiarise

themselves with the fascinating stories of the Bible, and to discover they are called to be God's heroes today, to become Christ's witnesses."

"From David, the giant slayer, John, the son of thunder, Samson, the legend, to Joseph, the dreamer; these characters introduced in the game are examples of courage and biblical masculinity. And Esther, the queen of courage, Ruth, the wise widow, and Mary Magdalene, nicknamed 'Tomb Raider', are our 'wonder women' and they teach important lessons to girls," says Sam Neves.

The game will be released in English, Spanish, Portuguese and French, and more languages will be added shortly. However, the game can be pre-ordered already on the **Apple App Store** and the **Google Play Store**. Those who wish to start playing right now, can join the beta testing team, registering here: [heroesbibletrivia.org](https://www.heroesbibletrivia.org).

A rising market

The online gaming market grew considerably during the pandemic of Covid19, reaching 2.7 billion global users

by the end of 2021. Among different game genres, Bible trivia games are getting more attention, like *Heroes the Game*, launched in 2013 as a pioneer Cristian game, that paved the way for many other projects and developments. From the date it was released, the game generated over 10,000 minutes of interaction with its users. It is expected that *Heroes 2: The Bible Trivia Game*, will carry the torch!

Summary

- Heroes 2: The Bible Trivia Game
- Release Date: 3/25/2021
- A smartphone Bible trivia game app aimed at reaching gamers and young people
- Completely FREE!
- Languages: English, Spanish, Portuguese, and French.
- You can pre-order it here: **Apple App Store** and **Google Play Store**
- To start playing now, join the Beta tester team, registering here: <https://www.heroesbibletrivia.org/>
- For more information email us at contact@heroesbibletrivia.org



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SEC DEPARTMENTS

Reports & Articles



Imagine you have spent 20 minutes with your GP. There is one thing you can do to improve several aspects of your health: Walk 10,000 to 15,000 steps a day (6-8km or 3 ½ - 5 miles). It's a big number. Far more than you normally take. Possibly triple your usual step count! How long would it take to walk that many steps? Answer: About 2.5 hours, depending on your walking speed and general fitness.

And all of a sudden you realise that getting 2.5 hours of fast walking into your life—as it is—simply will not fit! You could try parking the car further away and walking the extra distance. Or you could walk to the local shops, buy fewer groceries and walk home again. You could take up rambling; but one thing is certain: it is going to take some reorganising to fit 15,000 steps into your life. Quite possibly, you will have to change some things—remove some activities; get up earlier or watch less media content—in order to have the time and energy to walk intentionally, not merely intermittently.

And that is why most of us (who can) don't walk 15,000 steps a day. Our lives are not currently set up to include 15,000 steps, and we can't imagine not doing any of the things that currently fill our waking moments. And so we don't walk. Not because we fundamentally disagree with the concept of walking; nor because we have moral objections to the activity. We don't walk that kind of distance at that kind of speed because it doesn't fit into our lives.

To make the change requires a different approach. We call it a paradigm shift: "a fundamental change in approach or underlying assumptions". It invokes the movement from one way of understanding something to another. And it doesn't come easily. When people like Copernicus (d.1543) advanced the heliocentric theory of what we call the Solar System, he was proposing a new paradigm. It hardly created a stir until Galileo built on his work and the Church threatened him with heresy charges. In 1633, Galileo was convicted under grave suspicion of heresy for "following the position of Copernicus, which is contrary to the true sense and authority of the Holy Scripture."¹ He was placed under

house arrest for the remainder of his life. Paradigm shifts do not come about easily, for they require us to understand ourselves and our world differently.

The South England Conference has adopted the vision: *Making Disciples | Building Communities*. This represents the aspiration and desired outcomes for the 2019 - 2022 Conference Term. But it also potentially represents a paradigm shift. It means viewing ourselves and our surrounding landscape from a different vantage point. You don't see things differently by looking at them the same way. And you don't change anything by doing it the same way.

Like 15,000 steps, "Making Disciples" sounds easy to fit into what I am already doing, until I begin to get to grips with the practical and time implications. In my sedentary, predominantly meeting and desk-oriented job, 15,000 steps does not happen easily. If I am ever going to have a hope of hitting that target, I have to change things up. When I look at local Churches, Plants and Groups, and notice how much volunteer time is used in meetings, preparing for public worship services that largely encourage passive listening, and the time spent in travel for members to get from home to the building we call 'The Church'... well, there is very little time left over for life on life, relational discipleship where there is deep, consistent, faithful investment over time. David Kinnaman², President of the Christian research organisation, Barna Group, notes that "disciples cannot be mass-produced. Disciples are handmade, one relationship at a time."

Let that percolate a bit (yes, I did use that metaphor).

We serve a changed and changing context. We have known this for some time. Yet our defaults to a "churched culture" keep us looking at ourselves and the world as it is today through

the same lenses we have been using for quite some time. Callahan notes that most churches assume the following as the basis for their ministry in the world:

1. The minister serves inside the church.
2. The laity ministers in the world.
3. The world is seeking out the church.³

These assumptions may still work within some parts of our faith community. Nevertheless, for much of our mission context, the assumptions fall short of reality. In an unchurched culture we notice a different set of factors at work:

1. The value of church is not among the major values of the culture.
2. A substantial number of persons are not seeking out churches on their own initiative.
3. By and large, people live life as though the church did not substantially matter.⁴

While there is much to attend to, both within and outside of the church, people lead in direct relation to the way they experience being led. When the leader's focus is inside the church, it signals to others that their focus should remain inside as well.⁵

Let us steer away from production line trainings, 'mass' baptisms, and streamlined processes designed to produce good members, and let's accept the vision for what it is: A paradigm shift of huge proportions. We cannot engage the handmade nature of relational discipling and community building without sacrifice. We must surrender mass-discipleship as a preferred model and recognise that if my church is too big to understand the unique callings and sensibilities, and questions of that young person, that single mother, that frustrated senior, then we are too big to do effective ministry and discipleship. We can give up some of the time-consuming, but not disciple producing activities and commitments in favour of life-on-life vocational mission. It is not flashy and a little old-fashioned, but "Hey!" it seems to be the way of Jesus. And He advocated for some pretty big paradigm shifts!

¹ From the Inquisition's sentence of 22 June 1633 (de Santillana, 1976, pp. 306-10; Finocchiaro 1989, pp. 287-91)
² "You Lost Me" 2011
³ Kennon L Callahan, 1990, "Effective Church Leadership" p.10
⁴ Ibid. p. 20
⁵ *Ibid.*

WAYNE ERASMUS



Where is God in bad marriage relationships?

My late brother Ambrose was a lover of pop music. He would often blast his music in the house on his cassette boombox with such tunes like, “Don’t go breakin’ my heart”, “What becomes of the broken-hearted”, “Total eclipse of the heart” or, his favourite, ‘Broken-hearted me”.

Then, I had no idea about the messages of these popular songs that my brother and his friends sang. Perhaps they carried a message of comfort and healing.

It is a fact that each of us are not alone, and perhaps others have suffered and survived the heart-searing pain that one feels after a breakup, particularly marital breakup.

Over the last eight months during the peak of the lockdown, I engaged with several couples who were experiencing bad marriage relationships and needed some form of intervention. This was a sobering experience which I bathed in constant prayer, asking the Lord for his wisdom and guidance. I repeatedly came across some research that reminded me that, even though we can survive a bad marriage relationship or a broken heart, it is not a condition that anyone should continue to live with. The fact is clear that one must actively avoid any situation where one is repeatedly hurt, especially in our closest relationships.

In their research work, Liu and Waite studied more than 1000 people over a five-year span and found some sobering facts about being married and staying in an unhappy

relationship. Investigators looked at four different heart-health measures (hypertension, rapid heart rate, C-reactive protein and general cardiovascular disease events), along with marital happiness and unhappiness over time. While true for most people in the sample, but especially among “more mature” women, the more unhappy a marriage was, the greater chance of developing physical heart problems! And, as we know, heart disease is the number one killer among older adults. Being in a bad love relationship is dangerous and should not be ignored as, “oh, well... that’s just the way it is,” or, “I’ve lived with it this long...”

So, what to do about a bad relationship? I encourage anybody to gather the determination to take at least one small step towards making your love life better. I would suggest you connect with a relationship specialist. The courage to making long-standing changes in relationships is not easy, and most people need support in order to be successful. It is possible that your counsellor or therapist may turn out to be your most effective weapon against heart disease! Also, another way to get started down a path of a healthier relationship is simply to start learning about what healthy relationships are like and the types of things that happy couples do (and avoid). Well known experts in this field, John and Julie Gottman, provide valuable support in this area. More information about this can be found at <https://www.gottman.com/>.

Some of you may want to do something less intense than speaking with a therapist, and might begin instead by paying close attention to the things that happen in your own relationship that leaves you feeling down. What does your partner do or say (or neglect to do or say) that leaves you questioning your



value in his or her life? These are the interactions that need to be fixed first. Go after them like your life depends on it.

But where is God in bad marriage relationships? What do we say to those who have suffered bad relationships and have asked where is God in all of this? God is right where he has always been. He is right there in the centre of it all, holding your battered heart in His nail-scarred hands. “The Lord is near to the broken-hearted and saves the crushed in spirit” (Psalm 34:18).

Perhaps you are not in a bad relationship like the many with whom I have engaged during the lockdown. Maybe your marriage isn’t ending. Maybe separation isn’t your reality, but you are still experiencing a separation of intimacy and love from your spouse. Perhaps you’re all too familiar with emotional distance and loneliness, despite the other side of the bed still being occupied. Know this, that God is there too; and be reminded that it is not too late. Keep praying like Hannah. Keep fasting like Daniel. Keep returning to the Lord with your messes like King David. He’s there. He loves. He cares. And He will hold you up.

Reference:

Liu, H., & Waite, L. (2014). Bad marriage, broken heart? Age and gender differences in the link between marital quality and cardiovascular risks among older adults. *Journal of Health and Social Behavior*, 55(4), 403-423



DR AUGUSTUS LAWRENCE

Bible Experience – Virtual Style

On 16 January 2021, Pathfinders and Adventurers in the SEC embarked on another new, innovative journey, owing to the Covid pandemic that landed on our shores. Instead of meeting in the large meeting halls, we moved to our computer screens as we endeavoured, for the first time, to produce the Adventurer Bible Experience and Pathfinder Bible Experience tests on a virtual platform.

When something has never been done before, the best plans often bring some challenges, as was experienced with some of the technology, both with the coordinating team and in some of the children’s homes. However, I believe God was with us and, by His grace and with the help of our many volunteers, we managed to launch the Area-level virtual event successfully.

To give you an idea of the scale of the task, allow me to share some statistics. In total, we had 664 individuals who pre-registered on Microsoft Teams (40 PBE teams and 29 ABE teams).

On the day, we had 385 individuals connected to MS Teams at one time for ABE and just under 400 for PBE. 117 Graders and Observers, assigned to individual teams, were working in tandem as the Test event progressed. Observers were given the task to continually monitor the smooth running of the procedure and report any issues in a separate ‘Zoom’ room. Graders tirelessly focused on accurately typing the answers they

received from the children into a programme called ‘Nearpod’.

Meanwhile, 20 Pathfinder Area Coordinators were working on various platforms, assisting participants online, as well as standing in as Observers and Graders at times. In order to make the technology run smoothly, 5 technical support volunteers worked over 8 hours, standing-by to assist individuals with technical issues and dealing with them in record time. In the end we had a large team, all pulling together for the success of this amazing programme. All the while, internet structures held up; ‘Microsoft Teams’ did not crash; ‘Nearpod’ held steady; two ‘Zoom’ platforms kept up with the pace until the test was completed with just over half an hour’s delay.

An exciting achievement, a new experience and a renewed commitment by all, brought the day to a conclusion, with the assurance that, although we are challenged by external circumstances, we are resilient and creative in finding new ways to minister to our children. The results were that all the teams progressed to the Conference Level in February.

By 13 February 2021, we were ready for the Conference Level. In the weeks prior, we prayed, reviewed our systems, reconsidered our strategy and re-trained the volunteers. And then we did everything all over again. None of the teams were lost in the process since the previous test,

and no one was discouraged by doing an on-screen test again. By the time of the Conference Level test, we were ready. Everyone logged in early; Observers and Graders were prepared; and a larger, nine-person technical team were set up for the job. As a result, the programme started on time for both ABE and PBE tests and finished with time to spare. Once again, we testified that God is good because the event went off without a hitch. At Conference Level, the standard is usually high, and teams have to achieve 90 percent to qualify for the next round. We can proudly announce that 15 PBE teams and 14 ABE teams made it through to the next level. However, all the other teams performed well, scoring more than 75 percent. We look forward to the BUC Union Level test.

As a Pathfinder and Adventurer movement in the SEC, we continue to innovate, to try new things and to never allow any challenge to hold us back — not even the Covid pandemic! I am proud of the team because we are not afraid to think outside the box. By God’s grace, we will continue to innovate and improve our ministry in a challenging world for the blessing and benefit of God’s children.



CLIFFORD HERMAN

COMMUNITY SERVICES DEPARTMENT

Whose Yoke Are You Wearing? Preventing Burnout from Community Projects

Matthew 11:28-30 is a well-known passage that many often use for encouragement and strength. Jesus uses the illustration of a yoke to compare the 'burdens' of the Jews to his burdens— "Take up my yoke upon you and learn from me; for I am gentle and humble in heart and you will find rest for your souls" (Matthew 11:29, NRSV). Now we don't have laws like the Pharisees', but reflecting on this passage, I do wonder, does the yoke we wear always align with Jesus' yoke?

The last year has seen heroic efforts from our local churches to pull together and provide for the needs of their local communities. We have seen existing foodbanks expand, new foodbanks open up, along with other ministries of kindness, including winter shelters and baby banks. The efforts of local churches have reminded the world of how relevant we still are.

However, what makes this more admirable is that the same people who have stepped up to lead and run vital community projects are the same people risking their lives in the midst of a global pandemic. They are the same people who may be facing an uncertain future as employers contemplate redundancies. They are also the same people who have known and even lost loved ones to COVID-19. This, inevitably, leads to a rise in anxiety and depression that would impact their general wellbeing.

This brings me back to Jesus' words in Matthew

11 because, while Jesus never promises that his mission would be easy, his words promise to refresh us so that we would be able to keep going. Which takes me back to my initial question: Does our yoke align with Jesus or does it align more with the Pharisees? Considering the rise in uncertainty, anxiety and depression, can our church be seen as rejuvenating each other, giving each other the vitality needed to serve our communities; or, is our yoke heavy, leading members in our church community to suffer from what is commonly known as *burnout*?

Burnout was actually included in the International Classification of Diseases 11 (ICD-11) as an 'occupational phenomenon'.¹ The definition highlights symptoms that include exhaustion, negativity, cynicism and reduced efficacy. What is interesting to me is that the ICD acknowledges that burnout is caused not only from an individual

overextending themselves, but from the

environment in which they operate. A 30-year study on burnout found that environmental issues contributing to burnout included an unsustainable workload, perceived lack of control, insufficient rewards for their efforts, lack of a supportive community, lack of fairness and mismatched values.²

So, what does all this have to do with community ministries and the church? Well, let's acknowledge the amazing work that many of our church members and leaders are doing. Furthermore, it stands to reason that we must also recognise the intense pressure that they are under at the same time.

Consequently, it is not unreasonable to assume that, in the current climate, we could see a drop-off in those who are volunteering. We may see increased levels of inconsistency and indifference.

We know we are living in unprecedented times and our church has stepped up in an unprecedented way. But if we find that our commitments are unsustainable and

members aren't able to give what they used to, how is that perceived by the wider church? Do they hear at our church boards and business meetings the mantra, "We need you to give more" or "You are not sacrificing enough" or "This is the Lord's business; you must continue?" For those who are already struggling from the impact of Covid, the yoke we are placing is heavy, not light. It is harsh, not gentle. It certainly doesn't refresh but is designed to shame and make others feel guilty.

Perhaps our environment might be contributing to the burnout of our fellow members, and if that is the case, then we may need to realign with Jesus' yoke. How can we rejuvenate our members and each other in the midst of intense pressure?

I suggest that this is a two-fold problem, stemming from the individual and the environment. The environment consists of the culture we experience in our church interactions. As a church, empathy is a must! We must acknowledge that what our members are doing is nothing short of heroic!

Additionally, if we can, let us look at what's really important. Maybe, we don't need three separate Bible Study programmes on Saturday. Maybe we only need one, freeing up more time to focus on other priorities.

We must also be mindful about our language. Language is powerful but easy to misinterpret; and so, in our desire to inspire more commitment, we might appear to be dismissive of the enormous sacrifice that church members have already made, leading to the feeling of being undervalued and thus contributing to burnout.



The second part focuses on our individual members, whether that be a local church member, pastor or administrator. Looking after your mental health is more important now than ever before. Physical health advocates eating well, exercise and good rest. This is also good for your mental well-being; but also set effective boundaries, even within the church. Remember Jesus' yoke is supposed to revitalise you in the midst of your struggle. Finally, strengthen the bond between your family, friends and trusted church members. A strong spiritual support is vital during these times.

God has given us His mission and command. It was never meant to be easy, but Jesus promises that His yoke is easy, and He will give you rest. Preventing your burnout is just as important as the mission itself, so take time for it.

- 1 <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>.
- 2 https://www.researchgate.net/publication/246546370_Making_a_significant_difference_with_burnout_interventions_Researcher_and_practitioner_collaboration.



MAX MCKENZIE-COOK

PARKSIDE COMMUNITY CHURCH ADDRESSES COVID-19 VACCINATION AND THE MARK OF THE BEAST

(Author: Don Roberts)

Following the mass rollout of COVID-19 vaccines to combat the coronavirus pandemic, in addition to ethical, legal and practical considerations, fears from a biblical perspective have entered the equation for some churchgoers.

Reading's Parkside Community Church is among several local congregations to follow the world church, regional divisions and the South England Conference, in providing a forum for its members to ask questions, combat misinformation, and address concerns regarding the vaccine. On January 23, 2021, it discussed the topic 'COVID Vaccine: Mark of the Beast?', with international guest speaker Dr Eric Walsh, who joined via Zoom from Connecticut, USA. During his presentation, Walsh, who served under US Presidents, George W Bush and Barack Obama as an advisor on HIV/AIDS, referred to medical and scientific data, the Bible, and the Spirit of Prophecy.

"The mark of the beast is the number of a man, not the number of a vaccine," stated Walsh, referencing Revelation 13.



Walsh dealt with several conspiracy theories including one that claimed that the US House of Representatives bill H.R. 6666 - the COVID-19 Testing, Reaching, And Contacting Everyone (TRACE) Act, referred to the *mark of the beast*. "You've got to be a critical thinker; you can't just listen to people because they tell you stuff".

He continued, "I don't believe the vaccine is the *mark of the beast*. I think it's another medical invention. All medical inventions have risks and benefits, and you have to figure out, would it benefit you more than the risks. Every one of us has to make that decision, but I don't believe it should be mandated."

Walsh went on to summarise vaccination history and how COVID-19 effects the body. He then talked about the risk factors associated with the virus and ways of boosting the

body's immune system, including a healthy diet, vitamin D, and stress relief through a relationship with Christ and the Sabbath rest.

After outlining the Church's teaching on the *mark of the beast* and end time prophecy from scripture and Ellen White's writings, Walsh stated, "one of the dangers of trying to make the vaccine the *mark of the beast* and all things evil, is that a lot of Christians are going to miss what is really happening in the world."

"Scripture tells us that pestilences will happen", continued Walsh, referring to Mathew 24:7-8. COVID-19 warns us that "Man can't solve problems. Man can't fix things. Governments can quickly become powerless, economies can collapse, and if your trust is in anything but the God of Heaven, you're in trouble."

Before he answered questions submitted by the online audience, he concluded his presentation by encouraging them to read the Scriptures and "have an experience with the Lord Jesus and the indwelling of the Holy Spirit", and to "be vaccinated against deception".

ONE VISION AND WATFORD'S THE HUB CHURCH PLANT ASSIST COMMUNITY VACCINATION EFFORT

(Author: Don Roberts)

One Vision, the Stanborough Park Church based charity, announced on 16th February, that it has come together up with The Hub Church Plant in Watford, Met Coaches, churches and faith-groups across Watford and the British Union Conference (BUC) to offer free transport to vaccine centres for residents in the local community. The service is aimed at individuals who are eligible for vaccines, particularly the vulnerable who need a safe way to travel to vaccination centres.

The Hub church plant has provided its minibus. Ruth Stewart, co-founder of The Hub, said that they wanted to help those travelling to their destination to do so "in comfort," and encouraged the community to "come out and get your vaccination."



One Vision founder and Chairman Enoch Kanagaraj, who has received the COVID-19 vaccine, encouraged eligible groups to take part in "the vaccination programme the government has brought to us".

The initiative is supported by Stanborough Park Church's leadership, including Associate Pastor Geert Tap, who was part of the video announcement alongside Kanagaraj, Stewart, and BUC Executive Secretary, Pastor John Surridge, who said that the Union was thrilled to be "partnering with One Vision in this amazing venture to get people in the community to get their inoculations. We are totally in support of that."

The scheme has also been praised by the Director of Public Health for Hertfordshire, Jim McManus, who said in a video statement, "I know that some people find it difficult to get to vaccination centres, so this project, where One Vision, Met Coaches and the British Union Conference Community Services have teamed up get people the transport to vaccination centres, is fantastic. It's the kind of thing we need. It's the kind of thing that will save lives." He concluded, "Thanks for folk who are transporting people. What you are doing is awesome."

One Vision has been at the forefront of the town's response to the COVID-19 pandemic, with its simple and highly effective approach of bringing people together with the common goal of helping the community. It recently reported that its 95 volunteers have delivered over 100,000 hot meals, 50,000 grocery bags and is currently supporting 350 families and 22 schools in Watford and its neighbouring areas.

The charity's trustees, including Kanagaraj, now consist of many of the most prominent figures in Watford and Hertfordshire, such as Watford MP Dean Russell, Chair of Watford Interfaith Forum Harjit Singh, former Watford Grammar School for Girls headmistress Dame Helen Hyde and Watford FC legend Luther Blissett.

REACHING OUT IN COVID-19 TIMES: EXETER, TORQUAY AND ST AUSTELL

(Authors: Pastor Weiers Coetser and Caleb Akinola)

Members from Exeter, Torquay and St. Austell have been worshipping online for the better part of a year. They have consistently been praying for wisdom and to open doors for us to reach out to others in a time when social distancing and lockdowns have disrupted many of our usual activities.

Adjusting to online worship has been a learning experience, but Area 1 pastors have been placing a lot of effort into putting together interesting and varied programmes. The year started with the series "Hope for a Tree", based on Job 14:7, which describes a tree that makes new shoots even when chopped down. This became a springboard to explore the topic of 'Resilience' from a variety of different angles. A second series has just begun, exploring the concept of 'Rewilding the Church'.

Suddenly something that had been imperceptible for some time started to reveal itself. Church members have been telling their friends about the new sermon series. "That sounds interesting," said one friend by the name of Paula; "Would it be okay if I joined?" Paula has now attended for two weeks. And when an announcement was made about the Bible reading groups that meet on Tuesday and Wednesday evenings, Paula asked if she could join.

Five or six years ago, Emma attended a few worship services in Exeter, but then life made a few twists and turns, and she never came back. One church member, however, maintained a low-key friendship, and communication became a bit more regular during the most recent lockdown. A chance remark that the church was running a series on the idea of "rewilding" piqued Emma's interest. She has always been interested in ecological thinking. The result has been that Emma was in church last week and loved it, and the conversations between Emma and her friend have deepened following that service.

We're finding that the Lord is opening opportunities for our members to develop personal relationships with people, and somehow the conversations touch on needs that raise their interest in what is happening at church.

Caleb Akinola is an elder in the Exeter Adventist church. He recently moved to the UK from Nigeria where he had been a pastor in one of the biggest churches in Lagos. He shared an experience of how his journey into healthcare chaplaincy opened doors to reach out and minister to people in hospital during the pandemic.

"In England, Adventists in healthcare chaplaincy roles are not very common. However, in 2019 I was given the opportunity to serve at a local hospital, and after some time, was promoted to an Honorary Chaplain. I now have the privilege of ministering and interacting with patients, relatives and staff members about God and my faith, particularly at this time of pandemic crisis. I have encountered questions such as, where is God and what's His position in this pandemic? What is Seventh-day Adventism all about? What happens to me after death? And many more.

Recently, an elderly lady from a Methodist background said she had been longing to meet a member of the Adventist Church because she had read about the Sabbath in the Bible and wanted to know more. I tactfully started a Bible study with her, because the chaplaincy role forbids a chaplain to engage in theological arguments or to convert. She was happy to meet me and her confusion about the Sabbath was dealt with.

I am confident that through this chaplaincy ministry, many have got to know that Seventh-day Adventists have a presence in Exeter; and that the church is located on King William Street. I believe some may come to visit when we are fully open after lockdown. It appears the Lord is answering our prayers about finding ways to reach out and make disciples, even

in COVID-19 times. For now, the answer seems to lie in fostering meaningful personal relationships."

BROTHER, RETURN TO THE LORD

(Author: Darell J Philip)

As we come to the end of the first quarter, one of the main highlights of the year, to date, was the baptism of brothers, Richard, 21, and Joshua Weekes, 20, on the first Sabbath of the year, held at the Hackney Seventh-Day Adventist Church on Sabbath, 2 January 2021.

Among those celebrating the joyous occasion with the brothers, in a church which had a severely reduced capacity in compliance with Covid-19 restrictions, were their mother, Vivian Nelson and elder sister, Stephanie Charles; while members of the Hackney SDA Church watched on virtually, through the online live Zoom and Facebook platforms. The brothers came to the decision to give their hearts to the Lord, having had personal Bible studies, as well as regular involvement within Youth Ministries activities over the years, including a missionary trip to assist in the rebuilding of a church struck by lightning in Kigali, Rwanda.

Expressing her joy at the baptism of her sons, Vivian Nelson said: "It was a joy to see my sons accept the Lord as their personal Saviour. I was elated because I have tried my best to bring them up in the ways of the Lord, and to see this day happen was a real joy that touched my heart. They have always been obedient children with a keen interest in wanting to know more about God; and so it's my prayer that God will keep them both, and the rest of my family, along this Christian journey."

Stephanie Charles, 28, proudly sang a special item for both her brothers, with their mother, Vivian, reading their chosen favourite scriptures. After their acceptance of the baptismal vows as presented by Elder John Mathieu, the brothers were charged by Pastor Joojo Bonnie to hold on to the Lord, knowing that in an age of distractions, especially through various social media platforms, they had made the best decision of their lives in giving their hearts to the Lord while they were still young. "God calls you, young men, because you are strong; and all heaven is rejoicing with us here today," he said.

With those final words of admonition given, the brothers were then each baptised and welcomed not only into the membership of the Hackney Seventh-Day Adventist Church but, more importantly, had their names written into the Lamb's Book of Life to the glory and honour of God, His heavenly host and our Lord and Saviour, Jesus Christ.



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POEM

NOT JUST A NUMBER

COVID HAS KILLED OVER 100,000
 LIKE THE SANDS ON THE BEACH
 LIVES WASHED AWAY
 THEIR MEMORY IN THEIR LOVED ONES HEART WILL FOREVER STAY
 EACH ONE WAS SOMEONE'S DAUGHTER, SOMEONE'S SON
 SOMEONE'S CARING GRANDMA, SOMEONE'S FUNNY GRANDAD
 LIVES NOW LEFT EMPTY AND SAD
 SOMEONE'S LOVED PARENT HAS PASSED AWAY
 THEY DID NOT LIVE THIS YEAR TO SEE THE MONTH OF MAY
 SOMEONE'S DEAR FRIEND IS NO LONGER HERE
 SOMEONE'S HEART IS LEFT IN MISERY AND FEAR
 100,000 IS A NUMBER
 EACH NUMBER WAS A REAL PERSON
 NOW LEFT BEHIND ARE LIVES BROKEN AND ENCUMBERED
 COVID IS NOT FAKE BUT ALIVE AND REAL
 DON'T INSULT NEITHER UNDERESTIMATE THE PAIN PEOPLE FEEL.

ANNICE THOMAS
 APRIL 2021



DEVOTIONAL



DO NOT FEAR



NERRINE BARRETT

Pastor for Clapton & Woodford Green Churches

This past year we encountered COVID-19 and have the scars to prove it. But in the midst of all of this uncertainty, I can hear a still small voice saying, 'Fear not'.

Isaiah 41:10 states, 'Fear not, for I *am* with you; be not dismayed, for I *am* your God. I will strengthen you, Yes, I will help you, I will uphold you with My righteous right hand.'

There are five reasons in this passage that tells us why we should not be fearful:

- 1. Fear not — God is with you.** David can testify of this in Psalm 139:7-8: "Where can I go from your spirit? Where can I flee from your presence? If I ascend into heaven, you are there; if I make my bed in hell, behold you are there'. The same is true for us. He will never leave us nor forsake us.
- 2. Fear not — God is our God.** He is real. When we are not sure about anything or anyone, we can be sure about God. When mother and father forsake us and friends leave us, God will always be there for us. He is constant; and just as how he led the children of Israel through the wilderness till they finally reached the promised land, so will He do the same for us.
- 3. Fear not — God will strengthen you.** When we learn to lean on Jesus, we will find more strength to endure. As the Psalmist says, 'Wait upon the Lord, be of good courage and He shall strengthen thy heart: wait, I say, on the Lord (Psalms 27:14). Isaiah also echoes David's sentiment: 'They that wait upon the Lord shall renew their strength; they shall mount up with wings as eagles; they shall run and not be weary; and shall walk, and not faint (Isaiah 40:31).
- 4. Fear not — God will help you.** When we lift up our eyes to the hills 'from whence cometh our help', we will realise that our help comes from the Lord, the maker of heaven and earth. We need to call and cast our cares upon Him, for He cares for us. In times like these God is indeed our help. He said, 'Be anxious for nothing, but in everything by prayer and supplication, with thanksgiving, let your requests be made known to God' (Philippians 4:6).
- 5. Fear not — God will uphold you.** God cannot help but do right by us. God's right hand is strong and powerful, and it is what He uses to uphold and guide us. God's right hand surrounds and strengthens us. He will fight our battles for us. Fear not, because God has not given us a spirit of fear, but of power and of love and of a sound mind (2 Timothy 1:7). So, therefore, fear not.

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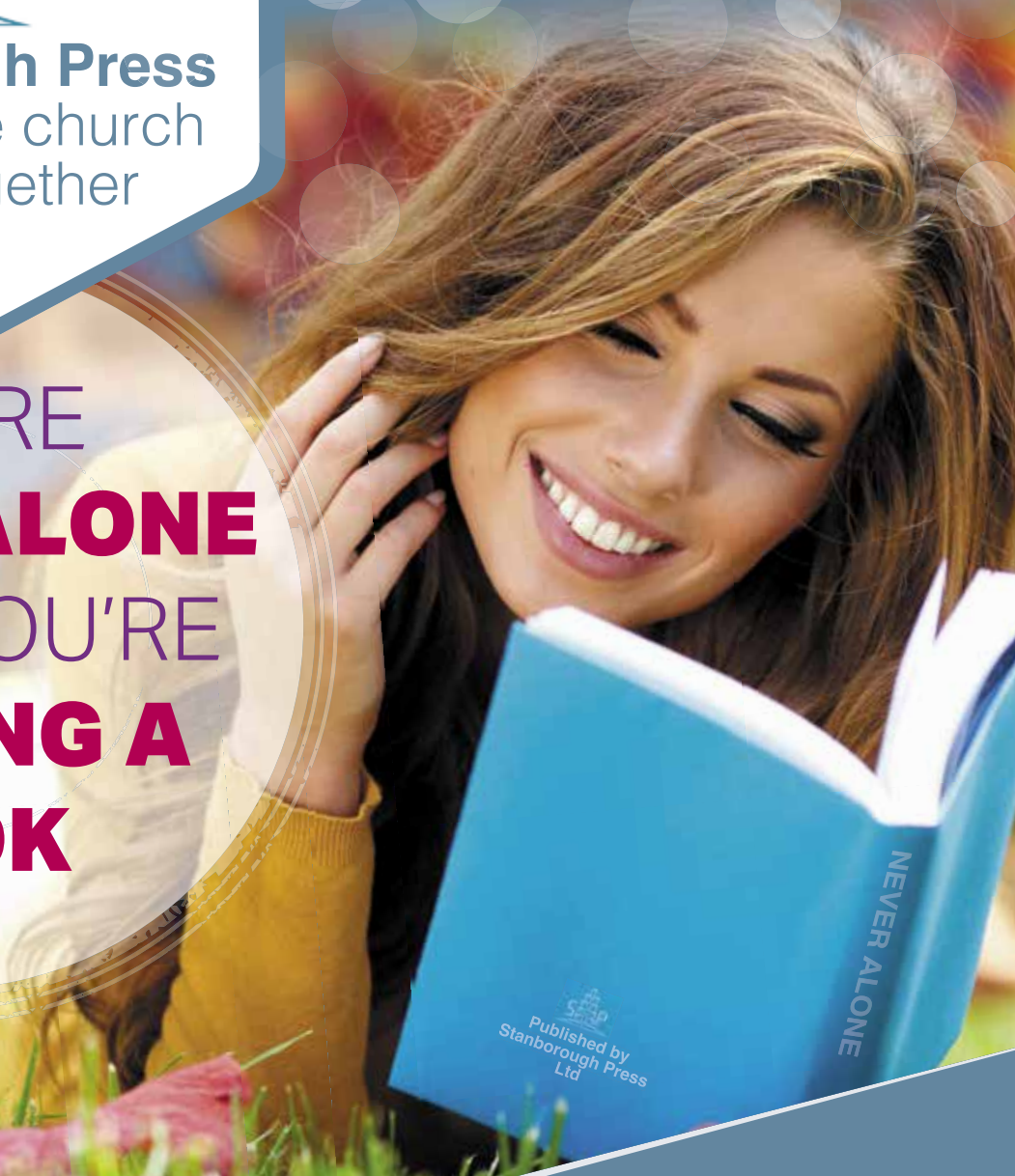
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