



Anglican Health and Community Network: Report to ACC18

'Connecting, preparing and equipping Anglicans to provide health care, accompany the sick and advocate for equitable health-care based on both trust in science and hope in God.'

Across the Anglican Communion, there is a vast amount of health-related technical expertise and experience. Provinces, dioceses, organisations and networks not only manage health facilities but also undertake health care in local communities through health projects, networks such as the Mothers' Union, local congregations, and volunteers. Churches also serve to facilitate greater access to health care provided by the state. This wealth of knowledge and experience is an asset of the Communion that needs to be shared, to enable mutual flourishing. And to be effective in a health crisis, technical expertise and experience needs to be well connected, easily accessible and activated quickly.

The Anglican Consultative Council Meeting in Hong Kong adopted resolution A17:07 'Towards an Anglican Health Network'. The Resolution asked for a scoping report and consultation on the development of an Anglican Health Network to be undertaken and reported back to ACC Standing Committee. This work was conducted in 2020, with support from the Anglican Alliance. As well as the scoping research, Anglicans involved in health, development and relief across the Anglican Communion's organisations and networks held a virtual Global Consultation of interested early adopters for a network in September 2020. This work led to a shared understanding of the work and structure of the new network, which was approved by the ACC Standing Committee in February 2021.

On World Health Day, 7th April 2021, the Anglican Health and Community Network (AHCN) was launched, following the formal approval of its formation by the Anglican Consultative Council's Standing Committee in February. It has long been recognised that, in many parts of the world, Churches are best placed to reach 'the last mile' in hard-to-reach communities – whether it is in disseminating disease prevention education; or organising community clinics. The Covid-19 pandemic has demonstrated that it is possible to draw on health expertise in a specific health crisis; the AHCN will enable that health expertise and experience to be more readily accessible, available, communicated and coordinated in other situations too. The new AHCN includes 'and community' in the title, in recognition of the fact that Anglican mission in health takes place in communities as well as in hospitals and clinics and that a complex social, community and health system underpins health in many different ways.

The network now has three co-convenors from across the Communion and two co-coordinators, all experts in health. The co-convenors were nominated following consultation with their primates and have received the approval of the Archbishop of Canterbury and the Secretary General of the Anglican Communion. **Rt Revd Michael Beasley** is the Bishop of Bath and Wells in the Church of England, formerly an epidemiologist at Imperial College, London. **Rt Revd Luke Pato** is the former Bishop of Namibia and a lead member and advocate in the Isdell Flowers Cross Border Malaria Initiative. **Dr Janice Tsang** is a specialist in Medical Oncology and the Honorary Clinical Assistant Professor at the University of Hong Kong. The co-coordinators are **Dr Sally Smith**, consultant/senior adviser to WHO EPI WIN team who previously worked for 14 years at UNAIDS latterly as Senior Adviser for community engagement on HIV with focus on faith-based organisations (FBOs). And also, **Dr Ben Walker**, Strategic Programme Manager for the Diocese of Leeds, previously of the WHO Collaborating Centre in York, and author of Religion in Global Health and Development (2022).

The AHCN has six primary functions which relate to **the five marks of mission**, especially in responding to human need with loving service, and in its advocacy work, seeking to transform unjust structures. The six functions break down as:

- 1) **Connect and coordinate:** Provide a coordinated Anglican voice on key health issues globally, regionally, nationally and across districts, informed by health professionals and church leaders working together, using the best scientific evidence.
- 2) **Advocate:** Play an important role in keeping health on the Anglican agenda world-wide. This will include providing technical expertise from a broad body of health professionals and church leaders that will inform Anglican advocacy, call for equity in health and strengthen inputs to our representation at WHO, the wider UN, the African Union and other regional bodies and with national governments in partnership with other Interfaith and Ecumenical partners such as Religions for Peace and the World Council of Churches.
- 3) **Build trust and hope among local communities in health messages and help to build confidence among secular health partners in the Communion as a trusted partner, which works in line with the best scientific evidence and collaborates well in support of national Ministry of Health responses.**

- 4) Equip: Bring together practitioners, church leaders and academics from across the Communion to inform practice and advocacy. The inclusion of both academics and active practitioners in the network brings a greater legitimacy to the work and voice of the Communion and provides a mechanism for cross Communion learning and skills building on health.
- 5) Support, Accompany and Encourage: Provide technical support to isolated Anglican health partners as well as connection with colleagues across the Communion to develop and share practical information and examples of what works.
- 6) Prepare: Document lessons learned and examples of good practice across the Anglican Communion, organizations, and networks to inform planning for the next health emergency.

In 2021 and 2022, the AHCN has created and grown communities of practice (COPs) on malaria, Covid and mental health, established a regular newsletter to its members, actively engaged in the strategy and research of the new WHO faith network, and built its own vision and strategy through international consultations - setting the course for **the next 3 years**. From this basis and following agreement with funding bodies providing resource, we are now preparing to recruit regional coordinators and to build a steering group. The central message coming out of the consultation was that the goal of the AHCN should be: to connect, equip and empower local churches to engage with issues of health, especially those most pressing within their particular contexts. Going forward the AHCN will continue to provide accurate information and advocacy about the connections between faith and health to the wider Church, so that churches can play their part in responding to current issues happening in local contexts and take steps to prepare more effectively for the next pandemic.

A standout recent **highlight** has been the two seminars at the Lambeth conference in August 2022 and our resulting visibility and increase in numbers. We had so much positive engagement and around 70 Bishops/spouses signed up to be part of the network. Our initial seminar explored building trust and countering fake news, especially in the context of Covid vaccines, conflicting information, faith leaders role as trusted sources, and overall community confidence in health promotion. Our second seminar 'The Other Pandemic' on the global mental health crisis had over 40 attendees and notably high levels of interest. We discussed supporting mental and spiritual wellbeing, help with grief, and care for carers. Our contributors from Australia, South Africa, El Salvador, the UK and the USA, offer a range of fascinating insights into resilience and trauma care. Finally, our September newsletter on health equity, with Bible studies, theological approaches and practical examples, was well received at the conference, and taken by many individuals.

KEY QUESTION: In which areas of health do you think Anglicans should increase their advocacy and grow further their existing work, and how might this happen?