Vaccines, the faith community, and the common good

This is the ninth volume for the *Christian Journal for Global Health* and we are experiencing an increasing number of submissions from low- and middle-income settings. The journal wants to be a venue for work from these sources, but accompanying this development are challenges regarding scientific rigor and English language usage. Our reviewers provide excellent advice and help regarding the former and the editors assist extensively with the latter. One objective of the journal is to be a stimulus for original thinking and research in the majority world.

This issue has two articles which highlight the unique role of faith-based people and organizations in global health. Sara Melillo and her colleagues from USAID’s Momentum Country and Global Leadership program and staff from Christian Connections for International Health have reviewed the literature on the role faith actors can have in understanding and overcoming vaccine hesitancy in LMICs. Danielle Ellis and Tamara Fitzgerald offer a commentary on what faith-based organizations and non-faith-based organizations have in common, both ideologically and historically. These commonalities are a basis for partnerships in fostering the common good.

A Christian understanding of the human person is an antidote for the tendency of contemporary culture to disregard the unity of mind, body, spirit, and soul essential to true humanity. Thus, two articles offer examples of holistic mission. Palzer, Taylor & Patel have studied how Community Health Evangelism can be a model of integral mission. Braganza & Oliveira describe how a martial arts program in Canada includes a spiritual component to the bio-psycho-social framework that enables it to be truly holistic.

Two articles deal with the continuing potential for expatriates working in LMICs. Wendler, Lindberg, and Sund surveyed mission sending organizations on the role healthcare research occupied in their mission strategy. Ritchie and Woods analyzed Medsend exit interviews to see why cross-cultural healthcare workers had left their work earlier than expected. Both propose solutions on how these efforts can be more effective. Even in high-income countries like the USA, there are significant disparities in health measures and healthcare access, especially in urban areas across cultures. Amanda Martinez records an interview with the leader of a faith-based clinic in North Philadelphia, suggesting the ways in which this effort has had the effectiveness it has had.

The journal editors believe clinical articles based on experience in LMICs can inform practice more broadly and offer creative solutions for circumstances in which the practice guidelines in common use in Western countries are inappropriate or inadequate. A study by Grills, Singh, and Anderson correlates mental illness and marital status with multisite pain in patients in North India which has not been previously evaluated. Mathew, Mathew, Cherian & David present results of a clinical trial of pain control with epidural ketamine in total knee arthroplasty in a faith-based hospital setting in India. A clinical case report by Marpaung, Aryati, and Sochita describes rare suppurative thyroiditis managed with limited resources in Indonesia. Finally, a study from Iran by Aziznejadroshan, et.al shows how resilience can aid clinical competence among nurses.

Two papers offer an encouragement to faith in healthcare contexts. Emily Garmon offers a reflection and a prayer for those with pain. Diane McCroskey writes on the role scripture has played in helping her meet the challenges of a sustainable nursing career toward caring for the whole person, body and spirit.

Finally, we want to acknowledge that some articles in this issue relate to areas that are contested amongst Christians. As a journal we do not shy away from areas of controversy, but we have always actively encouraged respectful academic discussion and Christian discernment on such issues. Articles are assessed on their academic merit and alignment with the journal’s objectives. If the article is rigorous and relevant, and receives positive peer review, then we will publish it to promote mutual learning and growth.