



## Building evidence in diverse places where healing is needed most

This year the journal completes a decade of publishing Christian perspectives on global health. In an accompanying editorial on [research, reflection, and writing for global health](#), Daniel O'Neill and Nathan Grills review the case of why the journal exists and why it is both right to publish such perspectives and how such publishing can be helpful to the church and our neighbors around the world. Their argument is comprehensive, Scripture-informed at multiple points and very well worth your attention.

Multiple submissions in this issue testify to the breadth of the global reach and interest of the journal. COVID-19 continues to be with us in terms of understanding its associated complications even when active infection is on the wane. [Margarita Portilla Diaz](#) and her colleagues inquired into musculoskeletal complications engendered in university professors in Colombia by remote working conditions, finding substantial health effects. [Seyed Reza Hosseini](#) and his coworkers surveyed sleep quality and associated factors in elderly persons living in a community in Iran.

The editors value informed discussion of differing points of view and offer the category of commentary to further that aim. Drs. [Nicholson, Dahlman and Carlough](#) provide a perspective on the ongoing relevance of the medical missionary enterprise that is balanced, but illustrative of its virtues in meeting needs and sustainability in ways and in locations government and secular initiatives fail to serve. Dr. [Volodymyr Shablusty](#) and colleagues describe the roles several non-governmental organizations (NGOs) - Doctors Without Borders, the International Committee of the Red Cross and Oxfam – have played during the war in Ukraine. Their account does not mention faith-based organizations which have also contributed in major ways to the ongoing humanitarian effort there, but the lessons learned from their analysis of the relationship of government under martial law with NGOs can inform FBO action and democratize aid.

Two field reports inform us regarding faith-based global health interventions in two low-income countries: [Supit, Mautang and Pangemanan](#) report on a collaboration between school and university to benefit school health in Indonesia, and [Daring, Ten Broek and colleagues](#) show evidence on outcomes in a program to bolster adolescent appreciation of gender equality in Bangladesh. An additional reflection by [M. Shawn Morehead](#) in the form of a meditation on dust inspired by personal experience in Afghanistan speaks of our common humanity and common need.

In a letter-to-the-editor [William Cayley](#) responds to James Harries' article *Biomedical Services' Fit Amongst People with Relational Worldviews, and a 'Middle Road'* published in the previous issue. He offers the biblical story of Daniel and his colleagues as captors in Babylon, suggesting an ancient and God-ordained precedent for clinical trials, which he argues are not beyond comprehension for people who hold indigenous or relational world views. Harries' response highlights the global variations which exist in the interpretation of both the biblical story line and health-related observations in nature. Our editors' response contributes to the debate.

Finally, [Jessica Culver](#) poetically prays for grace in the suffering and inconvenience occasioned by an injury, and the doxological hope that emerges from the Christian faith in the God who suffered and heals.

