

ePistle

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Pearl

Jesus at age 12: *“After three days they found him in the temple, sitting among the teachers, listening to them and **asking** them questions”* (Luke 2:46, ESV).

Jesus around age 30: *“**Ask**, and it will be given to you; seek, and you will find; knock, and it will be opened to you”* (Matthew 7:7, ESV).

Charles Spurgeon: *“Lord, help me to have done with fretting, and to abound in **asking**, seeking, knocking; so shall I soon overflow with thanksgiving.”*

Introduction to this Issue

I married a man who asks many questions, sometimes to the annoyance of others, but generally appreciated as an expression of interest in their story or ideas. Over the years, I've come to appreciate the power of a good question.



One day, watching a burly agitated and confused man on the street, my husband Sam approached him and asked him a few key questions: "Do you have a place to stay? Do you have enough food? Do you know about Union Gospel Mission?" With each exchange, the agitated man calmed. In the end he walked away, seemingly at peace, cared for and heard.

At our dinner table most nights, we follow the meal with a family time question. When our children were young, "Dialog Drawings" was one favorite way to address the question. Out came paper, pencils and crayons. Sam would throw out a question, and everyone drew his/her answer. Ofttimes we had guests who also participated. We collected these artistic answers over many years into two large notebooks. They have become volumes of remembrance that hold revelations of thoughts and feelings we might never have otherwise discovered in our children, ourselves or others.

On this side of eternity, we are urged to continually ask, seek and knock. Are you asking insightful and probing questions of yourself and others? Where would we be without Thomas who doubted and asked his burning question, "...How can we know the way?" (John 14:5, ESV). Jesus' answer reveals to us that He is the way, truth and life.

This issue of *ePistle* is devoted to asking good questions. At the start of this year, what questions are you asking of yourself, God, your teachers or others? As healthcare professionals, what are the key questions that will lead to a diagnosis, the best care for the patient and the best use of your time?

Here's to asking questions in 2020 and expecting answers.

– Judy Palpant, Editor (You may contact me at judypalpant@gmail.com.)

The Great Physician Asks

Jesus, the Great Physician, asked blind and begging Bartimaeus, "**What do you want me to do for you?**" (Read the story in Mark 10:46-52.)

And at the Pool of Bethesda Jesus met a man who had suffered from an infirmity for 38 years. He asked the man with excuses, "**Do you want to be healed?**" (Read the story in John 5:1-15)



*Sculpture entitled
"Faith" by Mark
Hopkins*



CMDA'S WEEKLY DEVOTIONS

What the Heck?

by Al Weir, MD

"...But join with me in suffering for the gospel, by the power of God" (2 Timothy 1:8, NIV 1984).

I had just heard that his son was in the intensive care unit and wondered why he had not called me. When I got him on the phone, he explained his son's illness. All the while I was thinking of his wife, who had just come through difficult treatment for cancer, and his daughter, who had recently died after delivering her first child. He and I are close, and he explained his lack of communication. "I was just so worn out," he said. "I told God this time, 'I'm not going to let go of you, God. I know you've got this.' But all the time in the back of my mind I was asking, 'What the heck?'"

I've quoted one of my doctor friends before, "When Jesus said, 'In this world you will have tribulation,' He expected us to tribulate." Some of us tribulate so very much more than others, like my dear friend here.

The world's distribution of suffering is certainly not based on fairness. If we ever thought that, we need to get over it. The world's distribution of suffering can certainly not be based on reason, like, "I know why that guy is suffering and this girl is not." Our minds are not that big. The world's distribution of suffering is not about reason and not about justice.

When we try to sort out why some people suffer so much and others so little, my friend gets as close to the truth as anyone, "What the heck?" That's about as far as our minds and hearts can go.

But there are questions we can answer about suffering, like:

"Will I suffer with God at my side, or without Him?"

"Will I use this suffering for God's glory and the good of mankind, or not?"

Someday, we will find answers to the causes and distribution of suffering.

Once we are on the eternal side of glory, when it no longer matters, it will all be clear.

The questions of how we deal with it are for now.

Dear Father,

When it is my time to suffer, help me ask the right questions.

Amen

Are You Available to Help with Pre-Field Training?

If you will be in the Eastern U.S. during the second week of August, or you have the means to get to Bristol, Tennessee during that time, we'd love to have you be a part of the pre-field training for new medical global workers. There will be approximately 30 participants in the class, so this would be an opportunity to meet possible future colleagues. Housing and meals will be provided. Your responsibility will be a 30 to 45-minute presentation on lessons you've learned and participation on a panel discussing medical worker family life. The only other expectation is that you be available at meal and break times so participants might learn from your experiences. If this might be a possibility, please contact Susan at susan.carter@cnda.org.

Catalyst Questions

by CMDA CEO Mike Chupp, MD, FACS



As I began to think of important questions impacting the calling and ministry of medical missionaries, I remembered several questions that patients or younger missionary healthcare professionals repeatedly asked of me over two decades in Kenya. Those questions were a catalyst for me and my wife Pam toward deeper exploration of our own feelings, motives and purposes.

Questions from Younger Missionary Healthcare Professionals

1. Did you ever feel like packing up your bags and taking your family home?
2. How do you avoid letting death get you down when it is due to neglect, delay or inadequate resources?
3. What is the best way to approach a veteran missionary or mission leader who has offended you or has unrealistic expectations of your time and schedule?

Questions from Patients or Their Family Members

1. Why can't you just admit me (or my family member) today and do the surgery now? We came very far to find help.
2. Doctor, can you please promise NOT to tell my mother (or father or sister or) that she/he has cancer?
3. Do you remember me?

Even without specific answers, you can see the value and challenge of these questions. After a little soul searching, I would like to pose just two questions I believe might be helpful to brothers and sisters like you who are currently serving in cross-cultural medical missions or preparing to do so.

Question #1: Is my work resulting in outcomes that matter to God and accomplish His purposes with eternity in mind?

I first became aware that I wasn't alone in my struggle to answer this question while attending my first Continuing Medical and Dental Education (CMDE) Conference at Brackenhurst Conference Center near Nairobi, Kenya in 1998. The devotional speaker was the internationally recognized leader of evangelicalism, Rev. John Stott, from All Souls Church in England. Rev. Stott's expository messages those 10 days were some of the richest and most powerful teachings from God's Word that I have ever heard. His practice was to open the floor for questions on any topic from anyone in the audience at the end of each message. Many great questions were asked, touching on some of the most perplexing and controversial doctrinal issues facing the church today. Rev. Stott answered with such humility, wisdom and insight from Scripture as he challenged and encouraged the 300+ missionary and national healthcare professionals in the audience.

I really only remember one question and one answer, however. An African doctor stood up and asked, "Rev. Stott, I often feel like a failure as I work in my mission hospital setting, because I spend all my time caring for the sick instead of preaching the gospel. What advice or encouragement would you give to those of us in the audience who feel that we should be doing more to evangelize our patients and share the gospel with more people?"

I will NEVER forget his answer to this doctor: *"What is wrong with you missionary doctors? You are providing healing to thousands of people who otherwise would have no hope for cure or recovery. Don't you have chaplains in your hospitals?"* I was stunned by his answer! There was an uneasy laugh from several around me in the audience which Dr. Stott heard and then responded; *"I am actually quite serious. If you will partner with the chaplains and pastors who work in your hospitals and clinics, you will be acting as the body of Christ in the way our Lord intended you to."*

His answer was simultaneously a relief AND a source of significant conviction and challenge to me as I returned to Tenwek Hospital in Kenya to work. We had a group of 10 national chaplains in our hospital who doubled as pastors and lay leaders in local churches on the weekends. Every ward, as well as the outpatient department, had an assigned, full-time chaplain available. Dr. Stott's question and challenge caused me to engage and consult with our chaplains as never before. I began to do personal introductions of specific chaplains to individual patients whose stories I had come to know quite well.

One of the chaplains, Mrs. Hellen Tangus, an extremely humble and kind-hearted woman, had such a heart for evangelism and amazing success with our patients. For certain cases, especially those involving hard-hearted orthopedic trauma patients, many struggling with alcoholism, God used Pastor Hellen to break through their spiritual indifference and pride. I witnessed dozens of patients on the orthopedic and general surgery wards coming to the Lord Jesus Christ with dramatic transformations through her bedside ministry.

Some of the most wonderful memories I now appreciate relate to enabling and empowering chaplains to speak truth into the hearts and minds of my lost, broken and hurting surgical patients. I will also treasure the friendships and relationships that grew between myself and the chaplains over the years at Tenwek. The medical students, interns and residents also heard the clear message that my top priority was the spiritual care of our patients, even as we gave intense focus to the medical and surgical management of every patient.

I will be forever grateful to Dr. Stott for his direct and compelling response to that African doctor's sincere question.

Question #2: Is there anything you wish you had done differently or prioritized more over the course of 20 years as a medical missionary in Africa?

One of the new roles I have assumed at CMDA is that of representing our U.S. organization on the International CMDA (ICMDA) Board of Trustees. In August 2018, I attended the World Congress of ICMDA in Hyderabad, India and met missions-minded national Christian healthcare professionals from around the globe, including Kenya, my ministry home for 20 years. Some of the Kenyan delegates were former students and interns of mine from the late 1990s and are now in leadership positions in their hospitals and in CMDA Kenya. Discussions with Kenyan Christian physicians reminded me of what Dr. Stephen Muhudhia, a senior Kenyan pediatrician and leader in the Christian Medical Fellowship of Kenya, once shared with me when I was the Medical Director of Tenwek: "Mike, I think Tenwek is much better known for its excellence in medical care and witness among Christian doctors in the U.S. than among Kenyan doctors."

I could give many reasons for our less than ideal networking and co-laboring with the CMF/CMDA leaders in Kenya, such as poor communication systems, remoteness of our mission hospital, busyness of the work for both missionaries and nationals, etc. I do believe, however, that the opportunities for partnership, networking and education between ex-pat missionaries and Christian national healthcare professionals are numerous in most nations where medical missionaries are serving and should be leveraged for the sake of advancing God's kingdom.

Chief Executive Officer of ICMDA Dr. Peter Saunders is diligently working to network national movements of physicians and dentists with the mission agencies and staff in various countries. If you would be interested in reaching out to Christian national healthcare professional leaders in the country/region where you are serving or hope to serve, I know Dr. Saunders would be delighted to connect you with the national movement (peter.saunders@icmda.net).

May the Lord's face shine on you as you seek to find His eternal purposes and network with His people around the world.

Is This Educational Opportunity for You?

by Peter Saunders (CEO of ICMDA)

I am writing with news of an exciting new training programme for doctors working in resource-poor settings all over the world.

We are delighted to announce that applications are now open for the new International Postgraduate Diploma in Family Medicine (I-PGDFM), an accredited distance education initiative by [ICMDA](#), [Christian Medical College](#), Vellore, India (CMC) and [Loma Linda University](#) (LLU), USA.

The new diploma course, launched this week, aims to train and certify doctors with post-graduate training in family medicine in the developing world and equip them professionally and spiritually to serve their countries and the poor. Online teaching will be supplemented by hands-on training courses in five mission hospitals worldwide. The two-year blended learning curriculum is designed to hone distinct family physician attitudes, skills and knowledge.

Applications close on February 28, 2020, and the course begins on April 20, 2020. For more information and to apply, visit icmda.net/training/i-pgdfm.

Please do make this known to anyone who you feel might benefit.

Is It Possible—a Joy-filled Life of Sacrifice?

The following excerpt is from Philip Yancey's introduction to his updated and combined edition of [Fearfully and Wonderfully: The Marvel of Bearing God's Image](#) (IVP 2019). It tells of his 10-year collaboration with Dr. Paul Brand, a renowned leprosy surgeon. Their connection began when Philip was writing *Where Is God When It Hurts*. His wife found an article called "The Gift of Pain" by Paul Brand while rummaging through an old medical supply closet. Dr. Brand was the physician who discovered that leprosy affected peripheral nerves, which caused a loss of sensation and many destructive injuries because patients were unable to feel pain.

...For nearly a decade I followed Dr. Brand around the world, retracing the steps of his medical training in England and observing him with patients at leprosariums in India and Louisiana. Sitting under a tamarind tree, watching him at work

in a laboratory, bouncing along in a Land Rover, screeching through the London “tube” (subway), I asked him every question I could think of.

Even after forty years of medical practice, he retained a boyish enthusiasm for the grandeur of the human body. Our conversations roamed wide, yet every topic I brought up, he had already thought about in some depth. He quoted Shakespeare and discussed the derivation of Greek, Hebrew, and Latin words. During breaks he taught me such things as how to select a ripe fig (watch the butterflies) and how weaver birds build their elaborate nests using only one foot and a beak...

Dr. Brand had the rare ability to bring fields together. An avid scientist, bird-watcher, mountain climber and organic gardener, he strove to integrate the natural order with the spiritual order. As a Christian, he delighted in discovering echoes of the Creator within the world of nature.

I look back with nostalgia on the decade of our collaboration when my own writing career was just beginning. I had splendid subjects to work with: the realm of nature and specifically the magnificent human body; the exotic life of a surgeon who brought healing to people who knew no physical pain (due to their leprosy) and therefore much suffering...

From the perspective of a success-obsessed culture, an orthopedic surgeon devoting his career to some of the poorest and most oppressed people on the planet is an example of “losing his life.” Yet Dr. Brand lived a full and rich a life as anyone I know, one that combined professional achievement with enduring qualities of humility and a grand sense of adventure...

I now view the ten years I spent working with him as an important chrysalis stage. As a journalist, I gave words to his faith. In exchange, he gave faith to my words.

Simone Weil once said, “Imaginary evil [such as that portrayed in books and movies] is romantic and varied; real evil is gloomy, monotonous, barren, boring. Imaginary good is boring; real good is always new, marvelous, intoxicating.” I saw real goodness in Paul Brand and found it indeed marvelous and intoxicating. I feel privileged, as his coauthor, to have had some role in shining a light on his life.

What If?

by Jen Wilkin—excerpt from her book [*None Like Him*](#)

Our control issues grow out of speculating about the “what if” [questions]. Our inability to answer the “what if” definitely causes anxiety...My husband always soothes my anxiety by pointing me back to an important question: What’s your worst-case scenario? Speaking aloud my fears about circumstances, relationships, possessions or my body helps lay them to rest. Or more precisely, it helps me lay them at the feet of my Father in heaven. It is a form of confession, letting my mouth speak out of the overflow of my heart, giving voice to my nagging fears and relinquishing my need for control. It is an acknowledgment that His is the kingdom.

“Yours, O Lord, is the greatness and the power and the glory and the victory and the majesty, for all that is in the heavens and in the earth is yours. Yours is the kingdom, O Lord, and you are exalted as head above all. Both riches and honor come from you, and you rule over all...” (1 Chronicles 29:11-12, ESV).

So said King David to the King of heaven. So say I.



Does Your Church or Ministry Need a New Strategy to Serve People Living with HIV/AIDS?

Adherence clubs are a special form of support groups. Dr. Cynthia Calla has developed this strategy to care for people living with HIV / AIDS. The clubs are something churches and Christian ministries can readily do. The clubs help with the greatest challenges of HIV, which is adherence to HIV treatment (ART) and retention in care, as well as community delivery of ART. The clubs help PLWH to stay on ART, become stable on the treatment and sustain it lifelong. You will find the written strategy at liferise.org/resources/documents/LifeRiseAdherenceClubGuidelines.pdf.