

# The Center for Medical Mission's *e-Pistle* June 2012

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Welcome to the June issue of the *e-Pistle*. As people here in the office begin taking their summer vacation, I've been thinking of you and how hard you are working. I am asking the Lord to supply needed strength and wisdom for each day. I know it is difficult to get away from your medical work for many reasons, but I trust the Lord will help you take the time needed to rest and be refreshed.

I will be teaching a new leadership/capacity building class at this year's [Orientation to Medical Missions](#) for new medical missionaries. Part of my plan is to focus on the importance of having strategic goals for one's self and/or his/her family. The best way to make that happen is to get away from the grind of everyday life and to give the Lord a chance to lead you. Unfortunately, I learned the lesson the hard way – when looking back at a just completed term only to realize how little I had accomplished. May the Lord bless you with time to be refreshed and recharged!

It is not too late to register for this conference which will be July 20–22 in Bristol, Tennessee. We have more than 20 participants already registered and will welcome a few more. Think of those who have already been assigned to your hospital, clinic or community health program. Are they aware of this opportunity? This is not just for doctors or dentists. Any medical professional will benefit. You can register online at [www.cmda.org/orientation](http://www.cmda.org/orientation).

I did not get even one response for the question I posed last month: What could your sending agency do to make you feel more supported in your medical ministry? I hope that means everyone feels their sending agency fully supports their medical ministry.

If you are going to be in the U.S. in November and want to participate in the [Global Missions Health Conference](#) in Louisville, it is not too early to register. If you want to be an exhibitor at the conference, it is imperative to [register](#) for that immediately. Hopefully there is still space left. If you know young people who are interested in medical missions be sure to encourage them to attend. Did you know that college and high school students are welcome to stay in the homes of church members so that they can afford to participate?

I hope you find the following helpful. You are welcome to share the articles with your colleagues.

[susan.carter@cmda.org](mailto:susan.carter@cmda.org)

**Here is a list of the articles you will find in this issue:**

[Helpers of Health](#) by David Stevens, MD

[Cura Animarum](#) by Rev. Stan Key

[Comparison – Doing the Math](#) by Judy Palpant

[Suffering](#) by Dr. Ron Koteskey

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**Helpers of Health - Section X: Community Health and Development**

by David Stevens, MD

***Continued from May***

5) If You Haven't Measured It, You Haven't Done It – What have you really accomplished through your efforts? That is a huge question you, and especially present and prospective funders, want to know. Are your investments in planning and execution bringing dividends? How big of a dividend? What is working and what is not? What do you need to change to make what is not working actually work?

So what do you measure? You need to decide that first. What are the key indicators to show that you are lowering morbidity and mortality? What things need to happen to demonstrate that you are successful in making your target populations healthier?

If people build and use pit latrines, studies show there is a decrease in parasite infestations, diarrheal disease and other problems, so you may want to measure that. If a family has a clean water source they consistently use, they will be healthier and have fewer visits to the clinic or hospital. As a result, you will decrease the cases of dehydration from gastroenteritis, so you may want to measure that. Those are just examples, but whether you are starting a program or enhancing one, you need to determine your key indicators to show you are accomplishing your goals.

Though we were anxious to hit the ground running with our program, we made sure we took the time to complete a crucial task first. We conducted a survey of 600 homes to determine our baseline. We partnered with a U.S. university to ensure the validity of our survey instruments and to subsequently do an objective analysis of our data. To avoid surveyor bias, we hired local teachers during their school break to go house to house to collect the information. When we finished, we had great objective data that wasn't available from other sources on subjects like immunization rates, latrines and a host of other health behaviors we planned to target.

We trained the teachers to administer the survey correctly. How should they ask the questions to ensure each family understood? We asked them to visually confirm the information they were given if at all possible. If they were told the family had a latrine, they needed to verify if it was truly there and if a path was worn from the hut to the toilet. They should examine each child's "Road to Health" immunization card to verify their immunizations, see if the family had a raised fireplace, check if they were boiling their

water and much more. We wanted good data to show where we were so we would clearly know our successes and failures in bringing change to the community.

We then followed up by completing surveys of 2,000 homes every three years after the program was underway, but we did it with a new twist. We divided those homes into three groups. The first group included homes where our community health helpers had been teaching and helping their neighbors. The second group included homes with no community health workers, but the homes were located adjacent to where we had been working. We were looking for spillover from families who had been impacted and then influenced their neighbors who didn't have CHHs. The last group of homes we surveyed was some distance away so it had no program influence. Was our baseline changing over time from other influences?

All of this took time and money, but we built the cost into our funding proposal. The results were more than worth our efforts. We had concrete data to guide our efforts and our funders clearly saw the return on their investment. In fact, the data was so dramatic to USAID that the American ambassador visited the program. Some of the programs we visited before we started our program visited us to learn our methods. Established outreaches and those planning to start programs came from many countries to see our techniques.

Over time, surveys show change, but a snapshot every three years is not enough. You also need to measure effort and change every month to measure your progress, identify problems and motivate your staff and volunteers. It is no different than when you were in school. When the teacher told you that certain information was going to be on the exam you studied and learned it. When a paper was going to be 30 percent of your grade, you focused on doing it well. The same is true with your staff and volunteers, so ask them to report regularly.

What indicates effort? These questions help answer that question, but you may think of others. Are they visiting new homes? Are they revisiting families to teach new concepts? Are they sharing the gospel? Are they working to make their home healthy as a good example?

You also want to measure change because effort is not enough. A CHH may be working hard but is ineffective. That is a red flag to their supervisor to spend time with them to find out why. Is it their communication technique? Are they teaching the lessons wrong? Are they rushing their engagements? Are they not accepted in their community for some reason?

You will likely have more interventions than you can reasonably ask your volunteers to report on. What are the most important ones for improving health? What are your funders most interested in?

Our program had 25 teaching focuses, but the primary purpose of our funding was community distribution of family planning supplies because Kenya had the highest

population growth rate in the world at that time. We made sure we did enough measurements in this area to fulfill our obligation to our donor. We then looked at the behaviors causing the most morbidity and mortality and measured those indicators as well. For example, having a clean water source obviously fell into that category. On the other hand, though we taught about having a “hanging wire” (clothes line) versus drying clothes on the ground where they could pick up scabies mites, we didn’t measure that since it was of lesser importance.

For reports to be useful, people need to be able to compare their efforts and results with others. If you got an 80 percent on an exam in school, you were either disappointed or elated based on whether that was the lowest or the highest grade in your class! Measurements need context to have significance, so work out some way to report back to your volunteers and supervisors. We did that with a monthly newspaper that contained the eight or ten most important indicators for each of our health volunteers in a table. We also printed the total for each committee so each of them could compare themselves to others. This also gave us a way to monitor the effectiveness of each supervisor as they compared their health helper and committee results with their colleagues.

As you have success in one area that you are measuring and realize an area you are not measuring is not seeing the change you seek, you can change what you report. You will quickly see new effort and change as your volunteers realign their priorities.

Monthly measurements are the speedometer of your program and periodic surveys are the odometer. Don’t attempt to drive your program without them.

There is one other easy way to demonstrate your success. Use the annual statistics from your hospital and/or clinics for the diseases you are trying to ameliorate. If you are focusing on clean water, look at your admission statistics for gastroenteritis and dehydration. If you have a low immunization rate and are trying to turbocharge your vaccination program in children, what is happening with admissions for the diseases you are trying to prevent? Take those yearly numbers and graph them overtime.

You may even want to do some chart audits for a specific disease. Are your measles cases coming from areas where you have been working or areas you haven’t reached yet? Statistics powerfully supplement your surveys and monthly statistics.

Yes, all of this takes time but it is worth the effort. It gives you important information to guide your efforts, inform your donors, motivate your team and celebrate your successes.

To be continued

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## **Cura Animarum**

by Rev. Stan Key

***“Train up a child in the way he should go...” (Proverbs 22:6, NASB).***

If I've heard it once, I've heard it 40 times: *I don't want to force religion on my children.* I'll let them grow up and make their own choice about what they want to believe. On the surface, such language sounds noble, loving and open-minded. After all, who would want to “cram religion” down the throats of those sweet little innocent cherubs? Let's respect their freedom and let them make up their own minds about ultimate reality.

Don't be fooled. Parents who piously claim they don't want to foist a specific religion on their children are in fact imposing a very definite view of God upon them! Refusing to teach about God is itself a very effective means of teaching about Him. Though claiming to be creedless, such parents are evangelizing their children into a worldview whose basic beliefs can be summed up in the following eight articles.

1. God is optional.
2. One person's ideas about God are as good as another's.
3. Choosing a religion is like buying a car. Shop around. They're all basically alike, so pick the one that suits you best.
4. Children don't need God. Some adults do. So just wait until you are older to think seriously about this question.
5. Don't expect parents to answer life's most basic questions: Who is God? What happens at death? Does God hear my prayers? Do Muslims go to heaven? Etc. Either they don't know the answer or don't care enough to discuss it.
6. The religion of parents is not worth passing on.
7. Developing a worldview requires no real effort or preparation. No outside help is needed to formulate our deepest beliefs about ultimate reality. We can each just figure it out for ourselves.
8. This is the true creed. All other creeds are false.

On this day, I'm grateful for my parents who lived by a different creed and the fact that they did everything in their power to transmit their faith to my sisters and me. The choices I have made in life about God and ultimate reality were made possible only because of the creedal foundation that was passed down to me. I'm eternally thankful.

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*Some reading this will remember this article from when I used it in our e-newsletter for those who are preparing to serve. I think it will also be helpful to you who are already working in the harvest field.*

Susan

## **Comparison - Doing the Math**

by Judy Palpant

*...comparison is the worst of all seductions...[it] is the parasitic growth which takes vitality from the tree...the hidden worm which consumes in secret and does not die, at least not before it has taken the life out of love.--Kierkegaard*

I'm no good with numbers. A look at my checkbook proves the point. But I want the rest of life to balance out, things to be fair. I keep score.

I watch the addition and multiplication. Somebody, somewhere is happier, prettier, smarter, richer, funnier than I am. Someone else has acquired a new car, recently installed carpet, or gone on a cruise. Another person enjoys more time with their kids and grandkids, more time to read and relax, more time for retreats and renewal.

Look around. Listen. This calculating is both constant and endemic. Unchecked comparison leads to covetousness. It starts young, is habit forming and compounds with age. The scourge separates us from God and one another.

Even as a missionary in rural Africa, I found no immunity. In the early 1980s, I sat in a women's Bible study at a conference in Kenya. Our husbands worked in African mission hospitals. When one woman mentioned her microwave, my small gas stove suddenly seemed inadequate. It required a stick jammed up against the oven door to keep it closed. I envied another missionary whose home boasted of large, beautiful Turkana baskets. Still another woman enjoyed her spacious, guarded compound.

On a larger scale, ministries and churches also keep score. They crunch the numbers, tally up the donors, and jealously eye others' surplus. Overseas, one mission begs for a motorcycle while another boasts an entire fleet. The result is alienation between leaders and loss of unity in the kingdom of God.

Proverbs 13:14 describes envy as rottenness to the bones. We develop spiritual osteoporosis, malignancy or an infection—all of which can cripple us. The dictionary defines coveting as unrest—to ferment, to seethe with agitation. It is vinegar in the making. We exhaust ourselves: losing precious sleep, time and heart. Resentment builds. We belly up to the bar drinking drafts of bitterness and stagger away inebriated with a sense of entitlement. "I deserve better."

In Hebrews 12, the writer warns that the root of this disease defiles other people in our lives. The infection spreads. Comparison breeds competition which kills relationships.

Beleaguered and bitter, we subtract from our reserves of joy and contentment, ending up bankrupt.

To help me in the heat of the battle, I have memorized words from Hebrews to shake me out of an envy-induced pity party:

“Keep your lives free from the love of money and be content with what you have, because God has said, ‘Never will I leave you; never will I forsake you.’ So we say with confidence, ‘The Lord is my helper; I will not be afraid. What can man do to me?’ (Hebrews 13:5-6, NIV 1984).

During my husband’s residency and my childbearing years, we occasionally received dinner invitations from his faculty attendings. We often prayed beforehand. I confessed my feelings of frumpiness and ineptness. The Holy Spirit freed me from fixating only on the external trappings of our host’s home or their multiple achievements.

Differences, disparities and deficits exist everywhere on earth and will only end in heaven. There, God, the just Judge, will reward according to His good will. In the meantime, we strive to avoid the comparison game.

Is there rest for the calculating soul? In Galatians 6:4-5, the apostle Paul wrote a good word: “Each one should test his own actions. Then he can take pride in himself, without comparing himself to somebody else, for each one should carry his own load” (NIV 1984).

The Roman philosopher Cicero observed that gratitude is the mother of all virtues. A thankful heart gives the Holy Spirit time to remove the nit-picky microscope of negative comparison. He then replaces it with a telescope through which we view the vast array of God’s goodness. No longer constricted by the tangled roots of bitterness, we find freedom to live content and generous lives.

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## **Suffering**

by Dr. Ron Koteskey

As you think about some of your fellow missionaries, you realize that many of them are suffering greatly.

- One man has been in constant physical pain for years because of a problem with his back.
- A woman had a small fortune when she came to serve, but poor financial decisions by friends back home have left her virtually penniless.
- One couple worries constantly about their wayward son who is living as a street person back in their passport country.

- Another couple receives many heart-rending emails from their daughter living with a man to whom she is not married.
- Yet another couple cannot forgive themselves because their teenage daughter was molested by a national years ago.
- After nearly two decades of service, a missionary family sees its influence nearly wiped out when a cult comes in.

The list could go on and on. How could it be that faithful missionaries could suffer so much physically, emotionally, financially and so forth? They have been faithful in their service. It seems like God just does not care. Where is God anyway? God rewards His children, doesn't He? Does He keep His promises?

What's going on?

The problem is that we have many "Christian" cultural beliefs that are not true.

- God builds a hedge of protection around His people so they will not suffer.
- If we live in God's will, we won't suffer.
- Suffering means we have sinned.
- Suffering has no positive results.
- We have no joy if we suffer.
- If God really loves us, He will not let us suffer.
- God punishes us with suffering.

Again this list could go on and on. A much longer list appears in the comments of Job's "friends" in chapters 4-37. Job's comments in those chapters showed that he did not understand what was going on, but he was sure his friends did not know either. Let us look at what Jesus Himself told those who were following Him.

What did Jesus say?

When His disciples asked Jesus what it would be like for His people near the end of time, Jesus listed much suffering (Matthew 24, John 15-16).

- Famines
- Earthquakes
- Persecution
- Death
- Hatred by all nations
- Betrayal by people who left the faith
- Hatred by people who left the faith
- Killings by people who believe they are serving God as they kill

Jesus went on to tell the disciples that He told them about these things so that when they actually came they would remember that He had warned them (John 16:4). We should not be surprised when we suffer.



More specifically, He told his 12 disciples what it would be like when they went out to serve. He told them they would experience the following (Matthew 10):

- Be handed over to local councils
- Be flogged in synagogues
- Be arrested
- Be betrayed by family members
- Be killed
- Be hated by “everyone”

What happened to Paul?

We can read not only about Jesus warning but also about what actually happened to Paul, an early cross-cultural worker. Paul actually listed his sufferings in 2 Corinthians 11.

- 39 lashes from the Jews (five times)
- Beaten with rods (three times)
- Shipwrecked (three times)
- Imprisoned
- Stoned
- Hungry, thirsty and cold
- Labor, toil and sleeplessness
- In danger from rivers, bandits, false brothers and people from passport country as well as nationals
- In danger in the city, in the country and at sea

Cross-cultural workers today experience similar suffering, although they are more likely to be in airplane crashes than shipwrecks.

Do we have to suffer?

During his first term of cross-cultural service, to encourage and strengthen people, Paul told them, “We must suffer...” (Acts 14:22). Why would we have to suffer? Sometimes suffering is the only way to reach a particular goal. For example, most people have experienced getting a splinter in their hand or foot. This frequently happens during childhood, and children often want to leave the splinter in rather than suffering as the parents remove it.

However, the parents know that if the splinter remains, it will become infected and may turn into a serious problem. The parents also know that the only way to get the splinter out is to dig it out. Assuming that the parents do not take every splinter to a physician where anesthesia is available, removing the splinter causes some suffering as it is removed.

Why would anyone rejoice in suffering?

The answer is in the “know that” phrase which is in italics in the paragraph above. When you “know that” your suffering is the way to develop particular traits, you can rejoice as you consider the goal. James wrote that we should “consider it pure joy” when we face trials because we know that this leads to perseverance, which then leads to maturity (James 1:2-4). It is not that we enjoy the suffering, but we rejoice because we know that we are moving toward maturity.

Romans 5:3-4 states, “Not only so, but we also rejoice in our sufferings, because we know that suffering produces perseverance; perseverance, character; and character, hope” (NIV 1984). Again, our joy comes not from the suffering itself, but we rejoice because we know that we are moving toward character and hope.

It also helps to know that we are not alone in our suffering. Peter, a third culture kid, tells us to stand firm “...because you know that your brothers throughout the world are undergoing the same kind of sufferings” (1 Peter 5:9, NIV 1984). You are not alone, Christians all over the world experience similar sufferings as they develop perseverance, character, hope and maturity.

How do I respond while suffering?

Most of the information above is cognitive in nature, and it is important for you to think on these things. Likewise, it is important for you to watch what you say to yourself, your self-talk. Talking to yourself about God takes your eyes off your problems and focuses them on God. The Psalms have many good examples of such self-talk.

- “Why are you downcast, O my soul?” (Psalm 42:5, NIV 1984).
- “Find rest, O my soul, in God alone” (Psalm 62:5).

In addition, you must be honest about the emotions you feel. Jesus was in Mark 14:33-34, Matthew 26:38 and Luke 12:50).

- “deeply distressed and troubled”
- “overwhelmed with sorrow”

Likewise, Paul was honest about his emotional reactions.

- “great distress and anguish of heart and with many tears” (2 Corinthians 2:4)
- “anxiety” (Philippians 2:28)
- “fear” (2 Corinthians 7:5, 12:20)

King David, no stranger to suffering, wrote about these same emotional responses in the Psalms.

- Distress (Psalm 4:1, 18:6, 25:18, 31:9)
- Anguish (Psalm 6:3, 25:17, 31:10, 38:8)
- Fear and anxiety (Psalm 34:4, 56:3 94:19)

Of course, your most valuable resource when suffering is the Bible which has much to say about it. Many of the Psalms are prayers to be sung during times of suffering. Use your software or concordance to find what the Bible has to say about such emotions during times of suffering. Pray the Psalms that most closely match your own suffering.

We are not to seek suffering either in masochistic tendencies or as “Christian martyrs.” Neither of these is a sign of God’s favor, just as suffering is a sign of God’s disfavor. However, we can take comfort in knowing that God will use the suffering He allows to make us more like Him.

For a more complete treatment of this topic as well as other topics, please visit [www.missionarycare.com](http://www.missionarycare.com). Also please let your non-medical colleagues know about these free resources.

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**Center for Medical Missions**

PO Box 7500

Bristol, TN 37621

423-844-1000

[www.cmda.org/cmm](http://www.cmda.org/cmm)