Welcome to this issue of the e-Pistle. I’ve included a variety of articles and information on some training opportunities. Some of you will be especially interested in the responses to my question about licensing physician assistants in your country of service. It’s all here.

I’ve had multiple people ask me for suggestions of things that could help them as they deal with the large number of deaths they face in ministry. CMDA Senior Vice President Dr. Gene Rudd has developed a class on that subject that he’ll be sharing with our next class of new medical missionaries. I hope to also have it available online soon. I’ll be sure to let you know when it is posted. In the meantime, Rev. Stan Key has shared a thought in this month’s devotional.

If you will be in the U.S. and are available to participate, don’t forget to register for this year’s Global Missions Health Conference. Registration is now open at www.medicalmissions.com/gmhc.

If the Lord brings it to mind, would you join us in praying for the Center for Medical Missions’ next two big events? August 2-5 is our New Medical Missionary Training. This class will include this year’s Samaritan’s Purse post-residents as well as others who will soon go to the field.

The second event is our annual Healthcare Missions Leadership Summit for executives of mission agencies. This year there will be presentations on agency partnerships, women in mission leadership, medical ministry burnout and hospital administration/capacity building. Discussion group topics will include security in closed access countries, developing a common data set in healthcare missions, developing and implementing best practice guidelines for long-term healthcare missions, resources for building resiliency and retention. Thank you for joining us in prayer for these events.

If something comes up that you think I might be able to help with, please don’t hesitate to ask. Susan susan.carter@cmda.org

Included in this issue:
Cura Animarum: Good Grief by Rev. Stan Key
Survey Findings
Tailored Help with Diabetes Care – Dr. Jeff Jackson
Heart Pathways by Dr. Al Weir
During the four centuries of her history, the nation of Judah had many kings. But only eight of them were “good.” King Uzziah was one of those kings whose blessed influence was so positive in the life of his people. During his reign of 52 years the nation of Judah experienced prosperity and security. When he died, it was a national catastrophe. What would happen next? Everything seemed to be up for grabs. The foundations were shaken. And yet that was the context in which Isaiah had his greatest spiritual experience! He saw God the clearest when his pain and uncertainty were the greatest.

Americans have been conditioned to think that pain and suffering are always bad. We believe “the pursuit of happiness” is an “inalienable right” to which we are all entitled. To experience pain and loss is almost, well, unpatriotic! So we invest millions in avoiding suffering and suppressing pain. Through entertainment, counseling and mind-numbing medications we do everything possible to live free from that awful enemy of pain.

The Bible, however, sees pain in a very different light. For example, look at how the psalmist viewed suffering:

“Before I was afflicted I went astray, but now I obey your word...It was good for me to be afflicted so that I might learn your decrees...I know, O Lord, that your laws are righteous, and in faithfulness you have afflicted me” (Psalm 119:67, 71, 75, NIV 1984).

What about you? Is there pain in your life today? Perhaps a physical challenge, a relational rupture, an emotional trauma, a hurtful memory, a tragic loss or a spiritual disappointment has filled your life with a deep ache that simply won’t go away. Could I make a suggestion? Before you ask God for pain relief, or before taking a spiritual narcotic, pause and ask Him what His purposes are in permitting this suffering in your life. There are gifts God wants to give you that can only be discovered in the valley of adversity. These “treasures of darkness” (Isaiah 45:3) may well be the greatest spiritual blessing you will ever receive.

The year of Isaiah’s greatest loss was the year of his greatest experience of God. His world fell apart when good King Uzziah died, but that was the very year he saw the Lord. Many fellow Christians I have known have a similar testimony. In the year of my cancer...of my depression...of my unemployment...of my patients’ deaths...of my son’s rebellion...I saw the Lord!
The writer of Hebrews understood well the surprising blessings that come to us through pain:

“For the moment all discipline seems painful rather than pleasant, but later it yields the peaceful fruit of righteousness to those who have been trained by it” (Hebrews 12:11, ESV).

Today, don’t curse your pain. Allow God to use if for good!

From prayer that asks that I may be sheltered
from winds that beat on Thee,
from fearing when I should aspire,
from faltering when I should climb higher,
from silken self, O Captain,
free Thy soldier who would follow Thee.
Amy Carmichael

Point to Ponder: Today, rather than asking God to remove your pain, why not ask Him to use it?

Prayer Focus: Someone whose world just fell apart.

Surveys

I want to first say thank you to everyone who responded to the survey regarding working with U.S. funding in your faith-based ministry. You surely did surprise me with more than 200 responses. I won’t have so little faith next time.

I hope you’ve had time to look at the results we sent a few weeks ago. That included the top five findings, top five stats and top five recommendations. If you need another copy of the results report, please let me know and I will resend.

Within the past few days, Jonathan Imbody, CMDA VP for Government Relations, had the opportunity to brief about 40 USAID officials on the results of survey. A copy of the report was given to each attendee. There were a couple of the recommendations they were especially interested in. We are making progress and will keep you informed.

If you have any questions about the findings, you can contact me and I will pass along to Jonathan Imbody. He is continuing to share the findings with various people and groups in Washington, D.C.

Licensing Physician Assistants
Thank you to the 10 people who responded to my question in the last newsletter regarding the possibility of licensing physician assistants in your country of service. As promised, here are the results.
• The only countries where the answer was a strong “yes” were Kenya and Malawi (clinical officer). The response from Zimbabwe was that they don’t have that designation but they can function as a PA. The advice from Zimbabwe was that a nurse practitioner is the way to go.
• Uganda and Nicaragua have had some success with obtaining temporary PA licenses.
• Countries that said “no” include Burundi, Albania, PNG, Belize, Indonesia and Pakistan. People in PNG are starting to work on making this happen.

That’s it. I would love responses from other countries but this is all I can report at this time. Seems if someone asks for help in determining what training to get, physician assistant training should not be the first option.

Tailored Help with Diabetes Care

Jeff Jackson, MD, FACE, CDE, a diabetologist/endocrinologist from Fishers, Indiana, is interested in being a resource for diabetes care at mission hospitals/clinics. His experience includes full-time clinical endocrinology practice at Scott & White Clinic in Temple, Texas from 1985 to 2006 and then clinical research in diabetes with Eli Lilly and Co (U.S.) until August 2017 when he retired. Not wanting to sit around in semi-retirement (Jeff still attends an endocrinology fellow clinic at IU Eskenazi Clinic two mornings a month), he hopes to assist mission hospitals (initial focus on Sub-Saharan Africa although plans are “fluid” and he is open to expanding more broadly) with tailored diabetes care programs, treatment algorithms, etc. Could your ministry benefit from such help?

Jeff and his wife Laurie, a retired speech pathologist, have a heart for missions. They served as volunteer missionaries at Tenwek Hospital (World Gospel Mission) in SW Kenya for about 10 months in 1981 to 1982. They had the opportunity to return to Kenya this year for five weeks in March and April where he was able to do diabetes/endocrinology teaching at four hospitals.

They are willing to come to your site where Jeff will observe your situation, develop protocols, do teaching and serve as an ongoing resource. Together you can decide how long the visit needs to be. Jeff and Laurie will cover their own expense of getting to and from your site. Help with food and lodging while on site would be appreciated but would not be required.

If you would like to see some of the observations made during his recent visit to Kenya, you will find them here.

Should you wish to begin discussion with Jeff about the possibility of him serving your ministry you can reach him at jjaxalpha@gmail.com or 317-644-9248.

Heart Pathways
by Dr. Al Weir
“Dear children, let us not love with words or tongue but with actions and in truth” (1 John 3:18, NIV 1984).

We were in the hospital, dedicating a conference center to Dr. Bill Johnson, the founder of Albanian Health Fund (AHF), a partner ministry with CMDA’s Medical Education International. AHF had contributed money to refurbish the center. The rector, the dean, our AHF president and Bill Johnson’s daughter were seated at the podium. The dean detailed all the services and doctors AHF had brought to Albania over the last 25 years. The rector then spoke briefly and from his heart, “I remember 1997, when there was so much trouble in Albania. Albanians were leaving. The airport was lined with guns and tanks for protection. The plane landed and Bill Johnson stepped off the plane with his team. When everyone else was deserting us, Bill Johnson was coming to help.”

Earlier that week three of us from America were presenting along with five from Tirana at the Twelfth Annual Mother Theresa Medical University International Hematology Conference. After the presentations the Chief of Hematology in Tirana spoke her appreciation for the presenters and added, “The doctors from America have been working with us for 25 years. They have been in our homes and we have been in theirs. They have helped us through very difficult times. They don’t do this because of any reward; they do this because they are Christians.”

When I was a healthcare missionary in Africa, our mission board developed a sea of change in their thinking. For decades, ours had been a missionary agency that focused on medical aid for those in great need around the world, with our healthcare building the foundation for sharing the truth and love of Christ. And then a decision was made to diminish the medical work as too costly, as too little bang for the buck. Church planting became the chief outcomes measure for our missions while medical work was remarkably reduced. Of course, this may have been God’s best plan for bringing the world to Him through Christ, but I have always been a bit skeptical of the change.

The Albanian rector’s story points a different pathway to evangelism, the heart pathway. My own prejudice is that the message of Christ is most likely received with conviction when it travels on heart pathways. 25 years of ministry in Albania and the many faces of those who have come to know Jesus there rest on stories like Bill Johnson coming when everyone else was leaving, like a dentist sitting on the stairs of a busy hotel praying for a student who lost her grandfather, like a new endoscopy suite for a country that had none, like dinners in Albanian homes and soccer with the grandchildren, like sponsored visits to homes in America and loving hospitality. Such actions were not wasted; more likely, such actions were vital in building pathways to hearts that were more receptive when they heard about a Person who loves like we do.

Dear Father,
Thank you that your love through Jesus was not just words. Let us be more than words to those we seek to bring into your kingdom.
Amen
Training Opportunities

New Medical Missionary Training

The next pre-field training class will be held August 2-5, 2018 at CMDA's national headquarters in Bristol, Tennessee. If you know of someone preparing to get started on their medical missions journey, this is a great opportunity. They can learn more and register at www.cmda.org/missionarytraining.

Multiple Classes

Christian Health Service Corps is offering the following courses on global health, tropical medicine, crisis response and community health evangelism at their headquarters in Northeast Texas. CME/CEU is available for most courses and student discounts are offered. Find more information at http://www.healthservicecorps.org/training/. Contact Director of Training Laura Smelter, MD at laura@healthservicecorps.org or 903-962-4000 with questions.


- **Suture Workshop** (http://www.healthservicecorps.org/event/suture-workshop/), June 30, 2018: Offered as part of the Global Health and Tropical Medicine Overview or as a stand-alone workshop.

- **Introduction to Disaster and Refugee Response: Sphere International Standards** (http://www.healthservicecorps.org/event/introduction-disaster-refugee-response-july-2018/), July 26-31, 2018: Explore effective engagement in global response efforts through knowledge and application of life-saving and dignity-upholding international standards in the areas of water supply, sanitation and hygiene promotion; food security and nutrition; shelter, settlement and non-food items; and health action. Up to 32 continuing education credits offered.

- **Community Health Evangelism Training of Trainers 1** (http://www.healthservicecorps.org/event/che-tot1-aug2018/), August 20-24, 2018: Discover a strategy for community based transformational development using approaches to teaching physical and spiritual topics that equip individuals and communities to identify issues and mobilize resources for positive growth. Early registration discount available until June 25.

Undelivered Cakes: Serving God with Our Time

by Judy Palpant
“I shall not allow the devilish onrush of this century to usurp all my energies, but will, as Charles Williams suggests, ‘fulfill the moment as the moment.’ I shall try to live well just now because the only time that exists is now.” Clyde Kilby

Time flies. Time drags. Time’s up. “Actually, there is only one thing to say about the topic of time,” says my friend Karlene. “The actually the time that takes to make a difference.” I’ve added her words to my short list. It includes St. Paul’s words in Ephesians: “Wake up, live wisely and redeem the time, make the most of every opportunity” (Ephesians 5:14-15, paraphrase). And for years I’ve mulled over The Tyranny of the Urgent, a small booklet by Charles Hummel. I know what’s important. Even so, emergencies gain the upper hand.

In 1980, when we arrived in Kenya as medical missionaries, the life and culture slowed me down. People sauntered. They paused to greet and talk. They stopped for mid-morning and late-afternoon tea. Africans lived what Simon and Garfunkel sang: “Slow down, you move too fast. You’ve got to make the morning last.” For me, the shift from American efficiency to this more generous pace happened gradually.

Our first Christmas there, I baked three cakes as gifts. The recipients all lived in mud huts close to each other. I set aside a half day: three hours, three cups of tea, three cakes delivered. Without any hitches, interruptions or my kids, it was manageable.

With the cakes in a basket, I walked down the rutted red path past the acacia tree that stood guard at the hospital gate and the outcrop of rock where our children liked to play. A green patchwork of sugar cane fields stretched to the horizon.

As I approached the home of Mama Rosoah, the oldest and most venerated hospital chaplain, I called out “Hodi” and heard her deep, resonant voice say, “Karibu.” She stood silhouetted in the doorway, hunched over her walking stick. I presented her with the cake. “Asante, sana,” she said with a smile. Then we sat down together to drink the customary cup of Kenyan chai.

An hour later, I prepared to go. Culturally, I could not say, “I have to go now.” Instead I said, “Acha niende,” which means “Let me go.” But as the words left my mouth, I saw a child chasing a clucking chicken. Once caught, I knew the hapless bird would be plucked and cooked—my lunch in the making. Doing the math, I knew my morning was shot.

“Mama,” I said, thinking quickly, “Please let me return home. I will bring my children and Daktari (doctor) for kuku na subu (chicken and soup).” She smiled at the prospect of the whole family, new from America, coming to her home. “Sawa, sawa,” she said, “Okay, okay.”

With the other two cakes still in my basket, I headed back up the steep red path. I would have to deliver the others another time. I went straight to the hospital and notified Sam. “Is there some way you can take a couple hours for lunch today?” When he looked at me incredulously, I explained my dilemma and the promise to Mama Rasoah.
The kids quickly washed their beaming faces and dirty hands. Excited at the prospect of an adventure, they skipped and bounced down the hill toward Mama Rosoah’s mud hut.

That afternoon the five of us sat around her simple wooden table savoring the delicious chicken stew complete with chicken’s feet floating in the broth right along with the wings and thighs, a sign of genuine hospitality. It was a good place to be. No quick bite to eat here. We slowed down and tasted the fullness of time.

Solomon assures us for everything there is a time. You as a parent have the opportunity to use time as a tool in raising your children in a spirit of service. Learn to be flexible and resilient, living into God’s gift of time as you serve with your children. Be open to the possibilities. Don’t let the “tyranny of the urgent” dominate your life; be willing to put down your agenda and spend time with someone who needs you and your children to just be present for a little while. It may take only minutes to make a difference or it may take much longer than expected, as I discovered in my visit to Mama Rasoah. In the end, you and your children will grow into a deeper understanding of your place in the world and in the larger framework of God’s time.

Narcissism
by Dr. Ronald Koteskey

Susan was excited when she found out she was going to be serving with Steve! He had spoken in her church, and the missions committee was so impressed they took a share in his support. He had described how he had planted five churches almost single handedly. When she joined the agency, the people at headquarters also told her what a great leader he was and how fortunate she was to be serving with him.

However, after a few weeks of service, she found he was not at all like that with the missionaries. He liked to be praised, but he disliked hearing others praised. He was very nice to visitors but very critical of missionaries when visitors were not there. He exaggerated what he had done and belittled what others had done. He was very difficult to live with. The missionaries would have reported what he was like, but they thought no one would believe them. He had some symptoms of narcissism.

What is narcissism?

Narcissists are people who have an exaggerated sense of their own importance, a deep need for attention and admiration, troubled relationships and a lack of empathy for others. They can appear incredibly nice and talented in one situation but monopolize conversations and belittle people in another. The term comes from Greek mythology in which Narcissus fell in love with his own reflection in the water and could not leave it.

Here is list of some characteristics:

- Expect special favors
• React with rage or contempt
• Take advantage of others
• Require constant excessive admiration
• Are unable to recognize how people feel
• Have a grandiose sense of self-importance and exaggerate achievements expecting to be recognized as superior
• Have fantasies of unlimited success, power or brilliance
• Require much admiration
• Take advantage of others to achieve their own ends
• Are envious of others and believe others are envious of them
• Do not recognize or identify with the feelings or needs of others
• Show arrogant, haughty behaviors or attitudes

Of course, no one will have all of these symptoms, and some narcissists may have additional ones that are not listed but show their self-centeredness. Just because a person has a few of these traits does not mean that he or she has a disorder. Often these traits are not noticed by many people other than those who live with them.

In addition to these traits, narcissists also have another side that is more public in which they are personable, efficient, charming and the life of the party. They can be gracious, humorous and fun to be around. These characteristics appear early in relationships and may last a long time when people do not get well acquainted. However, people who live with narcissists know their dark side.

Is narcissism in the Bible?

A good example of a narcissist in the Bible is Haman in Esther 3-7. Here are some traits Haman displayed:

• He was enraged when Mordecai would not bow to him or honor him (3:5).
• He looked for a way to destroy not only Mordecai but all the Jews (3:6).
• He boasted about his wealth, his sons and the King honoring him above all other nobles and officials (5:11).
• He pointed out he was the only one Queen Esther had invited to her banquet with the king —and she invited him for the next day as well (5:12).
• None of these facts gave him satisfaction when he saw Mordecai at the King’s gate (5:13).
• At the suggestion of his friends, he had a gallows built on which he could hang Mordecai before dinner the next day (5:14).
• When Haman arrived to ask the king about hanging Mordecai, the king asked Haman what to do to honor someone. Haman assumed he would be the one honored, so he suggested a royal robe and horse belonging to the king and honoring that person on the streets (6:4-10).

Many narcissists rise to positions of leadership as Haman did. King Xerxes honored Haman, elevated him and gave him a seat of honor higher than any of the other nobles. All the royal officials at the king’s gate knelt down and honored Haman (Esther 3:1-2).
Likewise, narcissistic missionaries may rise to positions of leadership. Those missionaries may be very successful at raising funds, completing projects, teaching Bible and speaking on behalf of the agency. However, missionaries who live with narcissistic missionaries may become disillusioned, resign and leave mission work. The narcissist will not accept the blame for the attrition, but may blame headquarters for sending poor missionaries to the field. The “successful” (narcissistic) missionary may then be promoted to field leadership, area leadership or position in the agency headquarters. This may be good if other leaders find out what he or she is like.

What should I do?

A good place to begin is with Esther, an adult third culture kid who gave us a good example in chapters 4 and 5.

- She noticed that Mordecai was distressed and found out why (4:1-9).
- Although very reluctant, she finally committed herself to accept his advice (4:9-13).
- She recruited a large group to fast about the situation (4:16).
- She then she invited Haman for a meal with her and her husband (5:1-5).

Noticing when others are disturbed, asking about it, accepting good advice, getting people to fast and pray and inviting the narcissist to a meal are good starts. Here are some other suggestions:

- Remembering that narcissists believe they are “perfect” and always right, try to maintain a soft voice when talking with them. Raising your voice may lead to arguments.
- Watch their body language for warnings.
- Remember that they are very unlikely to change.
- Protect your own independence.
- Remember that narcissists who walk off in a rage are likely to return with criticisms or questions.
- If they try to change your opinion and you refuse, they may be angry.

What should I not do?

What Esther did not do?

- She did not press the issue, but she invited Haman to another meal the next day (5:6-8).
- Even then she did not confront Haman or even tell the king. They were just having a drink before eating when the king asked Esther what she wanted (Esther 7:1-2).
- Still she did not ask for Haman’s life but said that if she had found favor with the King and if it pleased him, she asked for her life and the lives of her people (Esther 7:3).
- Then she provided information the King did not have.

Even though she and her people were in grave danger, she did not violate the customs of her host culture. Here are some other things that are best avoided:

- Do not expect narcissists to take any interest in you unless they want something from you.
- Do not expect narcissists to ever apologize. They are never wrong.
- Do not expect narcissists to understand jokes, but do tell them for others anyway.
• Do not expect narcissists to clean up after you, but they will want you to do so after them.
• Do not expect narcissists to give up their time for you, but they will demand much of yours.
• Do not expect narcissists to remember events from their childhoods.
• Do not ever say to narcissists to “please have a heart.” That will probably make things even worse.
• Expressing affection toward narcissists may lead to a negative response.
• Don’t adopt the narcissist’s habits of criticizing others.

How can I live with a narcissist?

The best help for that is at https://en.wikiversity.org/wiki/Living_With_a_Narcissist. This brief booklet is written by several people who actually live with one, so it covers things they have found useful. Here are some samples of what they recommend:

• Take care of your self-esteem.
• Accept that there are some things that only God can change.
• Protect or regain some of your independence.
• Remind members of your family that you really love them. That helps heal family rifts often created by narcissists.
• Learn to understand the narcissist.
• Learn to identify and record the danger signs, such as controlling behavior, verbal abuse, isolation from family and friends and excessive control of family finances.

Will narcissists ever change?

The narcissistic personality is one of the personality disorders that are stable, long lasting and can be traced back to adolescence or early adulthood. They are very unlikely to change even with therapy. Narcissists do not believe anything is wrong with them, so why should they change? After all, they are superior in many ways in that they are intelligent, successful and envied by many others.

Those who live with narcissists are the ones who suffer the most, and the most help can come by helping them learn to live with them and pray for all involved

For other topics, please visit www.missionarycare.com. Also please let your non-medical colleagues know about these free resources.