

The Center for Medical Missions'

e-Pistle

May 2011

Welcome to this month's e-Pistle. I hope this issue will be helpful to you. All the articles are important, but be sure to look at the Get-Away Opportunity in the middle of this newsletter if you are especially tired and in need of some time away.

We are gearing up for our annual Medical Mission Summit for mission-sending agency executives. This year we will be discussing the findings of the PRISM medical mission survey that I hope many of you completed. We will also be discussing how the Global Mission Health Conference can be of greater help to sending agencies. If you would like your mission agency executive to be invited to this conference, be sure to let me know. It will be held in Atlanta, Ga., on Sept. 8 and 9, 2011. susan.carter@cnda.org.

Here are the articles included in this newsletter:

[Train Up](#) by David Stevens, MD

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

[Book Review - *Grey Matter*](#) by Daniel Tolan, MD

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[Guilt](#) by Dr. Ron Koteskey

We'd love to hear from you if you have any comments.

Train Up - Section XI: Training School

by David Stevens, MD, MA (Ethics)

Excellence is an art won by training ~ Aristotle

You will never change the overall health of your patients without proper training. No matter how hard you labor, you will just be filling a bucket with water that has a hole in the bottom.

Community health evangelism is the ideal way to prevent disease as you teach people better health practices while changing their minds and hearts. Nevertheless, that still leaves the curative side of the equation including the employees that work in your hospital, clinic or other institution. No matter how good your prevention training, people are still going to get appendicitis, cancer and a host of other diseases that need treatment. And that means you are going to need trained staff to help cure their ailments.

In pioneer curative medical missions, training is traditionally done on the job with short courses and lots of hands-on mentoring. When I arrived at Tenwek Hospital, we had “ward attendants” who were hired, attended some basic classes, and then assigned duties such as moving patients, sweeping floors, changing beds and various other duties. The best of those were promoted to become “medicine dispensers” and were trained to dispense medicines and give injections on the ward. In those early days, we only had six or seven nurses with formal training in a hospital with 130 beds, and those nurses focused on supervision, diagnosis, treatment and midwifery. It was the best that could be done with our available resources, but it was far from the excellence we wanted.

Essentially, we had the chicken and the egg problem. We needed nurses, but we were stymied because we didn’t have enough nurses to open a training school. We also didn’t have enough doctors, lab techs, chaplains and other professional staff. That is why I was involved in starting not only community health outreach, but also three training schools.

As I have watched the mission healthcare landscape around the world, it is evident that training has the longest and largest impact. Larger mission facilities are increasingly moving into residency training. The Pan African Academy of Christian Surgeons (PAACS), a CMDA commission, has surgical residency programs in a half dozen mission hospitals. Another six hospitals are currently working to get the surgeons they need to start programs.

So what are the key principles to starting and then running a good training program?

1. Strategically decide what training programs you need. Also prioritize them. You probably can’t do all the programs at once so start with the program that is most needed.
2. Plan. To start planning a program, begin by completing a strengths and weaknesses analysis. What supplies or resources do you already have that will facilitate this training program? Review your staff, patient load, facilities, applicant pools, funding streams, teachers, networks, government contacts for accreditation, etc. Many of these issues will likely fall into your weakness category. At Tenwek, we had a great need for nurses and plenty of patients, but not much else. We were concerned that it might even be difficult to find qualified applicants because the schools were so poor in our area. Even if we did find applicants, we worried how we could keep the graduates when they were so concerned about their own children’s educational opportunities. We added that latter issue to our list of weaknesses.

Once you’ve completed the analysis, divide your list of weaknesses into three categories:

- a. Items that have to be solved in order to start a program.
 - b. Items that need to be solved, but can happen over time.
 - c. Items that would be helpful to have solved, but aren’t necessary to start a program.
3. Go for it. It is easy to look at this problem list of weaknesses, conclude it’s too difficult and decide to simply give up on making the needed changes. As with all problems, the mountain can seem too high. Remember, you don’t have to jump over the mountain all at

once, but can just climb it one step at a time. Consider the rewards that will come with this accomplishment, have a time of prayer and fasting, seek God's guidance and obey His leading. He has all the resources in the world. If He says "go," then go for it.

4. Harness the team. Committees waste a considerable amount of time, but a core group of people needs to be brought together as a task force to get the work accomplished. Organize the task force by casting the vision and getting commitments from each person. This task force may only be two to five people. A bloated task force does not run well, so you want the fewest number of people who can accomplish the goal. More than likely, many other people will just need to be kept informed instead of actually being on the task force.
5. Overcome obstacles. Prioritize all of the items on your list of weaknesses that have to be solved in order to start a program. What are the choke points and the release points? For example, your task force has so many individual responsibilities that it would be helpful to hire a key leader of the training school in the early stages to handle much of the work that needs to be done. Filling that position would turn a potential choke point into a release point. Let's dig into some of the common issues in starting a training institution.

- a. School leader. Hiring this person should be high on your priority list. Perhaps you have a person who already understands the culture, knows your work, has the credentials and can be relieved from their present responsibilities to focus on this new task. That is the ideal situation, but is often not the case. Instead, you have to search for someone to fill the position. Remember these principles:

- i. Develop your dream qualifications. What is the profile of an individual who could really make this training school successful?

- ii. Make a short list of qualified individuals. Spread the word about what type of leader you are looking for as far and wide as you can. Ask people to suggest applicants that they think may qualify for the position.

- iii. You have not because you ask not. The tendency is to leave recruiting to your mission agency or just to wait on the Lord. You need to do your part. The best staff I have at CMDA were already highly successful in their previous positions, and I pursued them and asked them to prayerfully consider radically changing their life. During our nursing school project at Tenwek, I spread the word and heard about a missionary nurse in Papua, New Guinea, who had degrees in both nursing and midwifery and had a great interest in education. She was also considering a venue change from her current work place. After receiving letters and having a personal conversation with my boss and me, she prayed, considered the opportunity and ultimately accepted the position. Since then, she has earned multiple other degrees including a doctorate in nursing. The school she leads at Tenwek is considered one of the best in the country. You are a part of God's plan for calling others to assist you.

b. Facilities. You often need dormitories, classrooms and offices to start a training school. Obviously, you need additional funds in order to build these necessary facilities. This money problem is often the easiest one to solve. Supporters easily grasp the vision of training nationals, but you also need to think outside the box and approach foundations, para-government organizations and major donors. Use the online [Foundation Directory](#) to search for foundations interested in education in your part of the world. As a new missionary in language school, I learned of a family foundation in Wisconsin that wanted to train nurses in Africa. We received our first large grant from their foundation.

Approach fundraising like a capital campaign and offer naming opportunities for buildings, classrooms, the library and even the entire school. Major donors often want to honor a loved one and will contribute at a higher level if they are given the opportunity to memorialize someone.

c. Government accreditation. I have seen two common mistakes in this arena:

i. Ignoring It. Some mission facilities don't bother to pursue accreditation. That may be because they think it is too hard or impossible to acquire. Occasionally, it is impossible. Most often, accreditation is possible to obtain through work and persistence. It is worth the effort if you want to be seen as excellent in the eyes of the medical community and keep up with ever-changing requirements. You also owe it to your trainees.

ii. Aiming too high. You may have to start at the bottom and work your way up. At Tenwek, we started with an enrolled community nurse school and then worked our way up to a registered level. We would have never qualified for the latter when we first started.

To be continued next month.....

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Cura Animarum

by Rev. Stan Key

Years ago, a country farmer visited a big city for the first time. Everything was new and strange to him. He found himself in the lobby of a tall building. Because he had never seen an elevator, he did not understand what happened when those shiny doors opened and closed. He sat and watched as a little old lady shuffling along with her cane stepped through the sliding doors. Minutes passed and then the doors opened again. Out stepped a tall, very attractive young woman. Grabbing his son by the straps of his overalls he said, "Boy, go get your mother!"

The gospel of Jesus Christ is the promise of radical transformation. In Him, we can be made new, re-created and given a new nature. God intends to do much more than patch up our flaws and adjust our behavior. He envisions a metamorphosis! Redeeming grace makes all things new!

* A new birth (1 Peter 1:3)	* A new life (Romans 6:4)
* A new heart (Ezekiel 36:26)	* A new nature (1 Peter 1:3-4)
* A new mind (Romans 12:2)	* A new name (Isaiah 62:2)
* A new self (Colossians 3:10)	* A new creation (2 Corinthians 5:17)
* A new spirit (Ezekiel 11:19)	* A new everything! (Revelation 21:5)

C. S. Lewis said it well:

“Mere improvement is not redemption...God became man to turn creatures into sons; not simply to produce better men of the old kind but to produce a new kind of man. It is not like teaching a horse to jump better and better but like turning a horse into a winged creature,” (Mere Christianity, p. 167).

If you came to worship seeking only a few band aids, some aspirin, and five steps to self-improvement and behavior modification, well, perhaps you should try a good therapist or join a support group. But if what you seek today is radical transformation of the deepest recesses of your soul... you have come to the right place!

Our sin problem goes deeper than we imagined, but so does God’s grace! The change God wants to work in you this morning is radical. It will not likely be instantaneous or painless. You may need to return in future weeks for further treatments. There are no shiny doors that open and close. This is not magic. But it is real!

This morning, give Jesus Christ access to the deepest places of your heart. Let His re-creative grace have freedom to redeem and transform the very essence of who you are. This metamorphosis begins when you can say, “I believe that He can. I believe that He will. I believe that He must!”

“...what counts is a new creation,” (Galatians 6:15, NIV 1984).

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Book Review **By Daniel Tolan, MD**

Gray Matter ... a neurosurgeon discovers the power of prayer ... one patient at a time.
By David Levy, MD, and Joel Kirkpatrick

Let me summarize my thoughts about *Gray Matter*. *A powerful read ... a must read.*

But, why am I recommending this book in a missions publication? It is simply because *Gray Matter* chronicles a neurosurgeon's journey in becoming "missional" in his professional life. Dr. David Levy allows us to journey with him as he resolves to begin praying with patients to today when he states "my practice and my life have been transformed because I learned to pray with patients."

It is an amazing story. This book will challenge you to look much deeper at the issues of praying with the patients we care for and at being involved beyond their physical hardships to their spiritual needs. The book itself is truly a challenge to us as readers to care for the whole person in our professional lives. In Dr. Levy's words, the book serves "to inspire you to approach the relationships in your own sphere of influence, whatever they are, with greater love and authenticity."

Dr. Levy gives insight into how to approach the spiritual dimensions of patients' and families' lives in caring and sensitive ways. Some thought-provoking statements in the book include:

- "Prayer is for the patient, not the [care giver]."
- "In prayer there is opportunity to do great good but the potential to harm as well."
- "I have encountered life-changing responses that go far beyond the procedures I perform."

What does he mean? Well, you need to read this book to find out!

The subject is relevant no matter what stage of training you are in or where you are in your career. If you take the principles in *Gray Matter* and learn to apply them in your own life, you too will become "missional" in your journey.

Gray Matter is now [available on the CMDA website](#). David Levy, MD, practices neurosurgery in San Diego, Calif. and is the author of *Gray Matter* along with noted journalist and author, Joel Kirkpatrick.

Opportunity for a Get-Away

Christian Hospitality Network

CHN is once again planning two Get-Aways for missionaries who can cover the cost of traveling to the venue. This year's retreats are in Kerala, India, from Oct. 4-7, 2011 and in Budapest, Hungary, from Nov. 7-10, 2011. Spaces for couples and singles are available. Families applying will be placed on a waiting list and notified of availability. Except for the cost of travel, there are no charges for this special treat and the venue is always a luxury hotel.

These Get-Aways are designed for the Lord's servants who are in at least the second year of their term, and who will not be going for home leave within the following few months. If you or your co-workers are especially in need of some retreat time, please contact Kathy Corbin at kathy@thechn.org. Please mention that you heard about this from Susan Carter since she asked us to include this announcement in this month's *e-Pistle*.

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Guilt

By Dr. Ron Koteskey

Lately you have been feeling guilty, but you're not sure why. People are suffering. They are dying without Christ. Your work seems to make little difference. You are having difficulty maintaining a consistent devotional life. You just feel guilty about so many things that it is interfering with your work. You begin to wonder if you truly are guilty. Why do you feel so guilty? Isn't guilt bad? What can you do about feeling so guilty? What if the feelings don't go away? Let us consider some of these questions.

Am I guilty?

This is the crucial question. All imaginable combinations of guilt and guilty feelings are possible. You may be guilty and not feel guilty, you may feel guilty and not be guilty, or you may be guilty and feel guilty. Any one of these is likely to interfere with your work as a missionary. You want to reach the place where you are not guilty and do not feel guilty.

The Bible says much about being guilty. A look at "guilt" and "guilty" in a concordance will reveal dozens of verses about being guilty of sin. When you break one of God's commands, you are guilty—whether you feel guilty or not. If you are guilty, something needs to be done about the guilt, and we will discuss that later.

Why do I feel so guilty?

Of course, you may feel guilty because you are guilty, and that is good. Although the Bible says much about *being* guilty, it says little about *feeling* guilty. If you feel guilty because you are guilty, you just need to do something about the sin. However, many people feel guilty without being guilty. In fact, the guilty feelings may even be *stronger* when there is no guilt present. Here are a few examples of things other than sin that may produce guilty feelings:

- Falling short of your own expectations. This often happens during the first term, especially for perfectionists.
- Falling short of other's expectations. Your church, family, field director and headquarters may expect more of you than you can possibly do.
- Not forgiving yourself. After God has forgiven your sin, you may not be able to forgive yourself even though your guilt is gone.

- Guilt trips by other people. Martha tried to “lay a guilt trip” on Mary for not working hard enough in Luke 10, and she even tried to get Jesus to join her.
- Oversensitive conscience. A good conscience will produce guilt when you sin. However, part of your conscience is learned in your culture, and you may feel guilty for many things that have nothing to do with sin.
- Satan himself. Remember that Satan is the “accuser of the brothers” in Revelation 12. His accusations can make you feel guilty.
- Temptation. Although we are never promised that we will be beyond temptation, missionaries may feel guilty for being tempted to lie, cheat or be sexually unfaithful.

Shame, rather than guilt, often brings on these guilty feelings. Guilt means that you have broken God’s command and fallen short of his expectations. Shame means that you have fallen short of the expectations of someone other than God. It may have begun when you walked through a mud puddle, soiling your new shoes. Your parents said, “Shame on you, you should have known better.” Perhaps there was no way for you to have known, and the Bible does not forbid walking in puddles, but you felt guilty.

Isn’t guilt bad?

Of course it is. That’s a major goal of missions, to tell people in other cultures that God has solved the sin problem.

Aren’t guilty feelings bad too? They may or may not be. If they are caused by things other than sin, including some of the examples given in the previous section, they are also bad. They will interfere with the missionary’s goal of telling others the good news.

Guilty feelings as a result of sin are good. These guilty feelings provide motivation for doing something about the sin in your life. Without them, people seldom come to Christ and often have great difficulty in society, perhaps becoming antisocial personalities (psychopaths) and getting into serious legal trouble. Such guilty feelings tend to be strongest immediately after sin is committed, then decrease as rationalizations are generated. You then no longer feel the guilt, at least not nearly as much, and your “heart is hardened,” making you much less likely to do something about the sin.

What can I do about guilt?

The natural response to realizing you are guilty is to try to hide or rationalize, such as Adam and Eve did. However, that will not solve the problem. Missionaries are familiar with what to do about sin, but here is a review of the steps.

- Confession. Certainly confess your sins to God. You may also want to confess to people you have harmed as well. Confession usually should be only to those actually affected by the sin rather than to the general public.
- Repentance. Repentance is more than being sorry for your sins; it is a change of purpose or a change of mind. We are to turn from our sinful ways to God. After forgiving her, Jesus told the woman taken in adultery to sin no more (John 8).

- Faith. Christ paid the penalty for our sins, and we must trust him with this.
- Restitution. As far as possible, try to make right the wrong you have done. If you have stolen something, you can usually return it. Of course, if you have destroyed another's reputation, you may not be able to rebuild it.

What can I do about guilty feelings?

That depends on the cause. If the guilty feelings are because of sin, follow the steps reviewed above. If the guilty feelings are because of other factors, you need to deal with each one individually. Let's consider a couple of examples.

First-term missionaries often have very high expectations about what they will accomplish and feel guilty that they do not achieve their personal goals. In this case, they need to talk with an experienced missionary and set more realistic goals. Of course, they may still not lower their expectations, thinking that they are different and that their ministry will be more effective.

If the goals set for you by others are too high, ask to have them lowered. One teacher felt guilty for not spending the required number of minutes on each subject until she realized that the required number of minutes each day was an hour and twenty minutes longer than she had the children in class. The principal lowered the number of required minutes.

What if the guilty feelings don't go away?

Guilty feelings that you have had for a long time as a result of sin may become conditioned responses and remain even after the sin is forgiven. Just as Pavlov's dogs salivated to the sound of a bell, you may feel guilty when some event triggers those feelings, even after the sin is forgiven and the guilt itself is gone. These responses gradually decrease and stop over time.

If they do not go away, you may need to talk with your pastor or a counselor about why they are remaining in you. You may have hidden things under layer after layer of rationalization and may need someone else to help you sort it all out.

Christ died for our sins and there is no condemnation in Christ. There is no need to be hindered by guilt or guilty feelings.

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

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