

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

It may seem early but I wish each of you a very Happy Thanksgiving. The November *e-Pistle* is not due to be sent until the week after Thanksgiving, thus the early greeting. I know you, like me, have much to be thankful for. God is good all the time! You are included on my list of people I'm thankful for.

Also on that list is my Dad. He passed away on October 16, but waited for me to get to his bedside. One of my brothers lives in Wisconsin. It just so happens we are both about 500 miles from our parent's home in Kokomo, Indiana. He had to drive southeast and I had to drive northwest. We reached Kokomo within five minutes of each other and 20 minutes before Dad passed away. Besides the simple fact that I was blessed to have a godly father, I'm thankful that he could still respond when I got to his bedside. He opened his eyes, looked at me and responded to everything I said, including that he loved me after I said it to him. What a special gift! I am grateful.

Everyone here at CMDA is gearing up for the Global Missions Health Conference. We will have eight booths all set up around a media theme so we should be easy to find at the center back of the main floor exhibit hall. I hope you will stop by and introduce yourself if you are there. There's probably a 90 percent chance I will be at the booth as I'm usually so busy talking that I don't get to the sessions.

susan.carter@cnda.org

This month you'll find the following articles:

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Cura Animarum – The Purpose of Pits

by Rev. Stan Key

WHAT'S IN A NAME?

"But God said to him, 'You fool!'"

(Luke 12:20a, NIV 1984)

My mother taught me not to call people names. And yet in one of His parables, Jesus described how God Himself called someone a “fool” (Luke 12:13-21). This is all the more remarkable when we remember that Jesus had specifically commanded His followers *not* to call anyone by that name (Matthew 5:22. Though different Greek words are used, the effect is the same.). The parable describes a man who wants to expand his farming business. While many of us would have called him visionary, bold or shrewd, God called the farmer a fool. Looking beneath the façade of success, God saw a heart filled with folly.

How do you recognize a fool? More importantly, is it possible to fool-proof my life so that the farmer’s fate doesn’t become my own? This parable helps us to recognize what are perhaps the three most salient characteristics of a fool.

1. **More, more, more.** “...*I will tear down my barns and build bigger ones...*” (verse 18). A fool is never content with what he has. The secret to happiness always lies in having more: a few more barns, a little more money, a bigger house, a better retirement plan, etc. Greed is not only sinful, it’s foolish. It’s like drinking sea water: the more you drink the thirstier you become.
2. **Now, now, now.** “...eat, drink and be merry” (verse 19). The fool lives only for today. He wants to grab for all the gusto he can... before it’s too late. The lust for short-term happiness drowns out the promise of long-term joy. The fool cannot grasp the principle of delayed gratification.
3. **Me, me, me.** The fool believes “it’s all about me.” His tiny universe is egocentric, bounded on the north, south, east and west by himself! The fool believes that God’s great purpose is to ensure that at the end of the day everyone has had a good time. Happiness, not holiness, is the great aim of life. The pronouns in the farmer’s vocabulary tell the story:

*“What shall I do? I have no place to store **my** crops.... This is what I’ll do. I will tear down **my** barns and build bigger ones, and there I will store all **my** grain and **my** goods. And I’ll say to **myself**... ‘Take life easy...’” (Luke 12: 17-19, NIV 1984).*

Fool-proofing your life involves studying the farmer’s choices... and then doing just the opposite!

- Rather than living for more... learn to be content with what you have (Philippians 4:12-13). Discover how true blessings come not from what you get but from what you give (Acts 20:35).
 - Rather than living for now... invest your greatest treasures in heaven (Matthew 6:19-21). Choose long-term joy over short-term happiness.
 - Rather than living for me...deny yourself. It is only when you lose yourself in God and others that you find who you really are (Luke 9:23-24).
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The Big Picture

by David Stevens, MD

Since my days on the field, I've realized that healthcare outreach overseas traditionally operates in relative isolation. Those in charge are often so busy that they have little contact with the Ministry of Health, professional organizations and even other mission outreaches in their service country. A doctor or nurse many have little idea of what is happening up the road 50 kilometers in another program or facility because they are just focused on accomplishing their enormous workload that day.

Cross pollination is as important in mission ministry as it is in growing flowers. Without it, you won't realize that the problem you are struggling with has already been solved somewhere down the road. You won't know that someone else has developed a training manual that you desperately need and could adapt for your own use. Of course, you also have ideas, methods, systems and resources that could be helpful to others and make their jobs easier.

I urge you to seek out opportunities to network, build relationships and learn from others. This investment will bear rich dividends for your ministry and, I believe, actually save you time in the long run. As you assist others, they will grasp opportunities to return your kindness.

This is especially important to do with your national health system. Too often mission healthcare outreaches operate off the radar at the national level, which sends the wrong message to government officials and regulatory bodies that you don't value or respect what they do. When you do need their help, you will find them much less receptive and sometimes outright resentful.

Relationships are much more important in developing countries than they are in the U.S. Investing in them is always a long-term and multifaceted project. They are oiled by not only expressing appreciation but giving more of it than is actually due. Don't just focus on the person you are targeting. Look for opportunities to say or write a word of appreciation to the superior of the person that you are building a relationship with. I would do that regularly in our community health work. When I wrote a thank you note to a chief or assistant chief who had helped us, I would also copy it to the district officer or district commissioner they reported to. Or you can do it the other way around and write their supervisor and then blind copy them.

Another way to do this with people who are helpful on an ongoing basis is to create a certificate of appreciation, plaque or annual award to present to recognize individuals who have helped you. Make sure certificates are framed, look significant and are ready for display. Remember it is not what you give but the significance that is attached to it the presentation that is important. Give it in front of as many people and significant others as you can. If appropriate, create a news release and send to newspapers, radio and TV outlets announcing the award to further increases the audience size. That will exponentially increase the award's perceived value and be great PR for your ministry. If

done well, you will later find the token you gave prominently presented in the official's office.

Don't forget to build relationships with your embassy officials by making appointments with those involved in healthcare and dropping by to see them. If you really want to get off on the right foot, don't go in asking for something but inquire how you can help them accomplish their goals and briefly share your ministry's capabilities.

Ask them to visit your ministry site and offer to house them in your home if possible when they come. Relationships go to a much deeper level when you entertain people in your home and have them around your table. Ask questions about their work and family to get to know them well and find connection points. Give them the best exposure to your ministry possible and offer to introduce them to other faith-based organizations you know. Have someone take pictures as you show them what you are doing instead of a posed shot. Drop them a thank you note or drop by again to give them a framed picture encapsulating their visit. Send them a thumb drive with the best photos you took. Ask them to bring the ambassador for a visit to ramp it up to a new level.

Most USAID funding and other government projects are now being distributed at the embassy level. As you prime the pump with a good solid relationship focused on making them successful in their job, you will have many opportunities to get grants and be part of larger projects. You will also have a solid bridge into the embassy when you have to deal with visa, security and other issues.

Relationships that require travel and time seem costly but pay off handsomely in the long run. Motivate others on your staff to do it as well to divide and conquer to make the job easier for all. Key staff members can focus on particular areas so you have all the bases covered. The job is too big for any one person to do.

As you prime the pump of outside relationships, the reputation, funding, credibility and quality of your outreach will be enhanced. It's a worthwhile investment you cannot afford not to make!

VillageDoc.net

by Dr. Don Rumbaugh

www.VillageDoc.Net

VillageDoc.Net is a free, electronic, Christian healthcare service. It is designed to support the work of cross-cultural workers in rural areas of the world where healthcare is limited or non-existent. At its backbone is an online community and personalized email communication. We receive and respond to health questions from both healthcare and non-healthcare workers.

1. VillageDoc.Net improves the quality of healthcare in rural communities. With a snap of a cell phone camera, valuable medical information can be whisked around the globe to medical consultants. With a click of a computer's mouse, these consultants can send back both advice and peace of mind. Whether it be:
 - o Expert advice and counsel on health issues;
 - o Reassurance that illnesses are being treated effectively; or
 - o Caring words from a physical or mental health provider.

This personalized contact can make a world of difference in how people in poor and rural communities cope with setbacks and challenges in their lives.

Believing that relationships (rather than projects) are the foundation for kingdom transformation, each non-medical cross-cultural worker is connected by a monthly email from a specific VillageDoc.Net Patient Healthcare Coordinator (PHC).

2. VillageDoc.Net increases the receptivity, effectiveness and testimony of cross-cultural workers. When such workers are able to go the extra loving mile for their non-Christian neighbors in a practical way, credibility as persons who truly care markedly increases.

For good and for bad, technology and the internet have changed the world. More than 50 percent of sub-Saharan Africa has cell phones; 10 percent of commerce in several African countries is conducted over personal cell phones! As a result, there is an almost unlimited field for the service VillageDoc.Net can provide. A shrinking globe defines an expanding potential.

We are convinced that VillageDoc.Net fills a special niche in improving healthcare around the world, in villages where there is no doctor or in villages where the general practice doctor could use the specialist's hand and mind. **Providing the best medicine in the universe in the hardest places in the world**, VillageDoc.Net shares the love of Christ in a very, very tangible way.

If the Holy Spirit is talking to you now, if He is asking you to look for a way to use your cross-cultural location, your administrative gifts and/or your healthcare expertise to help take light into darkness, we are looking for you. Contact us through Don Rumbaugh at dwrumbaughmd@gmail.com or 724-372-4857.

** Note from Susan: This is not to replace MD2ndopinion@aol.com, the consulting service offered by CMDA and the CMDE commission. Rather, we hope you will share this resource with your non-medical colleagues who are working in areas where access to medical care is difficult at best or even impossible at times. They can seek help for themselves or for the people they are there to serve. As I understand it, all the doctors who are part of www.VillageDoc.Net have tropical disease experience. Imagine the impact a non-medical missionary can have if they seek advice for a friend or neighbor

and later go back with the advice. That is at least two opportunities to be the hands and feet of Jesus.

Saved By a Walking Stick

by By Judy Palpant

*There is no need for faith where there is no consciousness of an element of risk.—
Elisabeth Elliot*

Lush grass grew knee-high across the hospital compound in East Africa. The busy maintenance men hadn't found time to slash it. Back in America, we would have pulled out the lawn mower.

I drove to town that morning leaving the children with our Kenyan nanny. Bright sunshine and blue sky meant open windows and doors. Fresh breezes blew through our home. The children played outside. Two year-old Nathan toddled out to the front lawn and plopped himself down in the tall grass.

Picking up a small stick, he pretended to slash the grass blades, not seeing the threat. A venomous spitting cobra slithered toward him. Just at that moment, the medical student on elective walked past. He saw the impending tragedy and shouted, "SNAKE!" Then he snatched Nathan out of harm's way.

Fifteen yards away, Mzee methodically stirred scone batter. Hearing the shout, he dropped the spoon into the mixing bowl and grabbed his carved walking stick with its knotted, burlled end. He bolted to the scene, raised his practiced arm and aimed the stick at the snake's head. The deadly blow left the cobra lying motionless in the grass, rendered powerless to spray its blinding venom.

When I returned from town, I was startled to see a six-foot snake stretched across our concrete front porch and my physician husband, knife in hand, dissecting the unwelcomed intruder. Nathan and his two older siblings looked on in amazement as their father taught them a lesson in reptile anatomy.

I'd heard tales of hospital patients brought for treatment after tangling with mambas, puff adders or cobras while walking at night. But this was daylight! I rushed toward the house.

"Did it bite anyone?" I asked, holding my breath--a kiss and a band aid would hardly suffice for an "owie" from an African viper.

"No, Mommy!" "Mzee hit the snake! He killed it!" They all chimed in at once. I listened, piecing the story together. Sobered. Relieved. Grateful. My heart weighed the debt of love owed to the alert and observant medical student and our neighbor Mzee with his

powerful, protective walking stick. Pulling my robust toddler onto my lap, I pondered what might have been—temporary or permanent blindness, possibly death. I praised God who sees the sparrow.

Fear is pervasive. It swallows. Torments. Paralyzes. Yet, in the face of substantive risks like malaria, Ebola, road accidents and even poisonous snakes, fear flees when faith mounts up on wings. Anxiety gives way to prayer. Courage chases cowardice as the Christian relaxes in God's strong and everlasting arms.

With childlike faith, I once again declared my intent to rest in God and His promise: "Even when the way goes through Death Valley, I'm not afraid when you walk at my side. Your trusty shepherd's crook makes me feel secure" (Psalm 23:4 *The Message*).

Compassion Fatigue

by Dr. Ron Koteskey

Bill has been an effective and dedicated missionary for a decade, but now, in his mid-30s, his missionary service seems more like labor than a labor of love. He used to enjoy interacting with nationals and feel deep satisfaction in his friendships with them. Although he continues to spend time with them, he becomes annoyed at what he sees as their increasing demands.

From all appearances, he is a successful missionary that others respect and even envy a bit; however, internally he is exhausted, feels isolated and seems spiritually depleted. Even talking with his supportive wife does little to help. Bill is suffering from what has recently come to be called compassion fatigue.

What is compassion fatigue?

An article in *Family Practice Management* published by the American Academy of Family Physicians defines compassion fatigue as "a deep physical, emotional and spiritual exhaustion accompanied by acute emotional pain"

<http://www.aafp.org/fpm/2000/0400/p39.html>.

Compassion fatigue is a combination of burnout and secondary trauma. In classical burnout, missionaries cope by withdrawing and becoming less compassionate; however, missionaries with compassion fatigue continue to give fully to their work with nationals. They often feel like they are being pulled irresistibly down by a whirlpool and are powerless to stop. These people may be viewed as incredibly dedicated and successful missionaries by others, but they often do not feel that way about themselves. Here are some of their major symptoms.

- Feelings of depression and hopelessness
- No feelings of accomplishment and joy

- Blaming and complaining about others
- Increasing irritability and anger
- Nightmares and other sleep problems
- Startled by unexpected sounds
- Personal and professional life not separate
- Intrusive frightening thoughts

Neither burnout nor secondary trauma are approved medical diagnoses; rather, they are lay terms, as is “compassion fatigue.” Compassion fatigue is also sometimes used to describe an organization characterized by high absenteeism, turnover and interpersonal conflict, or to describe the decrease over time of a whole country’s donations to victims of disasters such as earthquakes or floods. Here it is used to describe individuals showing signs of burnout and secondary trauma.

What does the Bible say about compassion fatigue?

The Bible never uses the term “compassion fatigue,” but Moses is a good example in that he continues for years until he finally breaks under it. Moses was not a missionary, but he was a Third Culture Kid who was leading a group of cross-cultural workers as they transitioned from one culture to another. At about the time of receiving the Ten Commandments, he shows tendencies toward compassion fatigue.

- Exodus 18. Only a couple of months out of Egypt and before receiving the commandments, Moses’ father-in-law told him, “What you are doing is not good... you will only wear yourselves out. The work is too heavy for you; you cannot handle it alone” (vs. 17-18).
- Exodus 32. A few weeks later as he was coming down Mt. Sinai with the commandments, Moses became so angry with the people that he destroyed the tablets on which God had written them.
- Exodus 34 and Deuteronomy 9. Moses went back up Mt. Sinai and spent nearly six weeks prostrate before God interceding for the people, but neither eating bread nor drinking water. A plague on the people followed.
- Numbers 11. On their way from Mt. Sinai to Kadesh Barnea, the people complained, so God sent fire on them. Moses again interceded and then told God, “I cannot carry all these people by myself; the burden is too heavy for me... put me to death right now—if I have found favor in your eyes—and do not let me face my own ruin” (vs. 14-15).

One would think that Moses would change. However, 40 years later at Kadesh Barnea, he was again leading the children of those he led at Mt. Sinai. The people were again complaining. Moses and his brother interceded, and they left the tent following God’s directions. However, when Moses spoke to the people, he struck the rock twice with his staff rather than speaking to it as God had told him. This disobedient outburst resulted in Moses not being allowed to lead the people into the promised land (Numbers 20).

Do I have compassion fatigue?

Of course, you can look at the major symptoms above to get a general idea. Fortunately, the best measure of compassion fatigue is available online free of charge at http://www.proqol.org/ProQol_Test.html. It is available in about a dozen languages and is called the ProQuol, Professional Quality of Live Scale. The English version comes in a self-scoring format which includes scales for both burnout and secondary trauma. This test has high internal reliability but no research on validity. When scoring the test, be sure to reverse the scores for the items indicated on the burnout scale. Your scores will tell you if you are low, average or high on both burnout and secondary trauma.

Things to do to get over compassion fatigue?

The logical place to begin is with what Moses' father-in-law suggested. First, Jethro listed Moses' roles: be the people's representative before God, teach them the decrees and laws, show them how to live, show them their duties. Second, Jethro told Moses to select men who were capable, feared God, were trustworthy and would not take dishonest gain. Then Moses was to appoint these men as officials in a hierarchy over groups of 10s, 50s, 100s and 1000s (Exodus 18:19-23). In other words, delegate much of the work to others.

Later when Moses was complaining to God about the heavy load of carrying the people, God told Moses to choose 70 elders who were leaders and officials. Moses was to bring them to the Tent so that God could put the Spirit on them to help carry the burden of the people (Numbers 11:16-17). This was the same advice Jethro had suggested long before.

This is still great advice today, especially for people like Moses who seem to think that saving the world depends on them alone. All of us need others. Here are some further suggestions.

- Reaffirm your commitment to Christ, including daily time in the Word, meditation and prayer, as well as a weekly Sabbath (Matthew 22: 37).
- Reaffirm your commitment to others, including time for family, colleagues and nationals (Matthew 22:39).
- Reaffirm your commitment to maintaining the temple of the Holy Spirit (your body), including eating right, getting daily rest and exercising daily.
- Clarify your personal boundaries.
- Share your feelings with colleagues who can share theirs with you.
- Follow God's call on your life even when it means saying "no" to good things.
- Develop a support system of people around you who listen well and care.

Things to stop doing to get over compassion fatigue?

In addition to doing the things mentioned above, one should

- Stop blaming others. People at headquarters, your field director or your principal may act in ways that you disapprove of, but people are not responsible for how you react.
- Stop complaining. When you talk with other discontented people, it only makes you feel worse. You may have heard that misery loves company; it should be stated that “misery loves miserable company.” Discontented people do not want others spreading cheer.
- Stop making big decisions. Do not decide to quit being a missionary, buy a luxury car, get a divorce or any major life decision. You will be doubly sorry later.
- Stop looking for a quick fix, such as an affair, drugs, etc.

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

Center for Medical Missions

PO Box 7500

Bristol, TN 37621

423-844-1000

www.cmda.org/cmm