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On a daily basis, I am in contact with people who find life is not what they thought it would be. Often times we get on the wrong track or we pursue things which do not really mean much in the end. Yet the temptation to do so has always been there. Ravi Zacharias says people are weary of life, not because of the pain of life, but because of constantly seeking after pleasure. Nobody ever intended though to be derailed…but it happens. Could you be derailed during your years of school? Read what Dr. David Stevens has to say in “Repelling Derailing.” But first some announcements …

Daniel Tolan

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Announcements
Repelling Derailing – by David Stevens, MD, MA (Ethics)
Medical Missions to Unreached People Groups: An Introduction by Barabbas, MD


Three days of exposure to what life will hold for you in medical missions: how to survive, thrive and stay alive while being what God has called you to be in medicine in a cross-cultural setting.

This annual conference by CMDA’s Center for Medical Missions has helped prepare more than 100 career medical missionaries. Spend three days learning from Dr. David Stevens and others with expertise in medical missions to prepare you for your career ahead. What will life hold for those called to medical missions? How will I thrive, survive or just stay alive while being what God has called me to be in healthcare in a cross-
cultural setting? What does wholistic healthcare look like in resource poor areas? How can I be most effective in reaching others for Jesus?

A small conference, designed to give personal contact and access to conference staff who have well over 150 years of mission experience … go prepared!

**Foundations of Health and Development Course** – July 1 - August 24, 2012 in Tanzania

A seminar exploring questions in medical missions… in Tanzania

Do you know undergrads, medical and dental students or others in their early years of training who would like to experience medical missions this summer? This six-week workshop will bring together scientific and biblical principles of health and agriculture, cross-cultural methods of communication and skills in establishing relationships that facilitate behavioral changes for the improvement of health, nutrition and care for the environment.

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**Repelling Derailing**
by David Stevens, MD, MA (Ethics)

Might you crash during your training? What will happen to your call into medical missions? Could you be derailed from what God has for you? How do you keep the flames of your call burning bright during training? It is hard as you move into your advanced years in any healthcare training. This is when the opportunities for jobs and decisions impacting the rest of your life are made. Medical students entering residency enter into your "God help me survive this" mode during your residency years. The clinical years of any healthcare training begin to be more difficult and demanding than the early time in the “sciences” when the answers are clearly to be found on the pages you study.

You may not know it, but you are being brainwashed. No, I’m not kidding! How do you brainwash someone? You deny them regular food and sleep and put them under enormous stress. The best way to do that is by making life unpredictable and causing someone to live in a state of fear and anxiety. Sounds like my third year of medical school or residency. You may be now, or will soon be, facing the same. What will you do?

The goal of the brainwashing is to turn you into a professional – self-reliant, highly competent, cool under pressure and in-charge. The unfortunate byproduct of undergoing this transformation is that you are in danger of turning into a cynical,
compassionless, spiritually starved automaton that believes happiness comes from success, money and performance. By the end of training, you have so much pent-up delayed gratification that you can’t wait to “get yours.”

You begin to rationalize away your call in a very spiritually acceptable way. You find good reasons not to complete your call – debt, children, parents, experience or whatever. You promise God you will do short-term missions, teach Sunday school or tithe heavily. You bargain with the Creator of the entire universe, as if you can pay Him off. It all comes down to your willingness to “deny yourself, take up the cross and follow Him” (Matthew 16:24, paraphrase).

I saw this happen to my friends and it almost happened to me. I felt called to be a missionary as a senior in high school. It wasn't a dramatic thing, but just a growing realization that God could use the abilities he had given me in science and I could be a small part of the answer to the terrible physical and spiritual needs I had seen on a mission trip to Haiti.

It is hard for God to steer a parked car. He wants us to move forward and follow the direction He has given you until that time. I didn’t know my ultimate destination was Tenwek Hospital in Kenya, but I knew I should enroll as a pre-med in college. I got the car moving.

After my junior year, I continued to open doors and spent the summer of 1972 in Kenya. I came back sure that God was calling me back to Tenwek Hospital. Working there felt like wearing a pair of wonderful comfortable shoes. I fit and I loved what I got to do. I could see myself in the role of the missionary doctors I worked with. I came back full of stories for my girlfriend Jody and we began to plan to get married and to go back to Tenwek together so she could experience it and give God a chance to work in her heart as well.

We did this during my fourth year of medical school. She fell in love with the Kipsigis people and the work just as I had. We were already under preliminary appointment with World Gospel Mission. The vehicle was in motion, the destination was clear.

But then I was put in the pressure cooker of residency. I was professionalized. I was taught to be in charge. I learned the lessons so well that I was appointed chief resident of our 40-resident family practice program. I was lauded by my attendings and even led a successful effort that forced a new administration to gut our family practice program by firing our powerful director.
It was a grand third year, but the days of the little old ladies at church telling you how wonderful you were for being willing to “give it all up” and go to the mission field were about over. It was almost time for the rubber to meet the road. It was time to go – to get rid of most of what we had accumulated, take our three-year old son and 18-month old daughter halfway around the world, learn a new language and be paid a pittance for working harder than any of my fellow residents upon graduation.

But those weren’t really the big issue. The issue was, "Did I want to give up control?" Did I want a mission agency that probably didn’t understand my needs to tell me when to go and when to stay? Was I willing to give up financial independence and even ask people for money to support us as we served?

I wrestled with God. I rationalized, made promises and worked hard to convince myself that I could serve Him just as well in a needy rural community. There wasn’t anything wrong with that, except it wasn’t God’s choice for my life.

Let me let you in on one of the devil’s favorite strategies. If he can’t get you to turn your back on God, he will get you to settle for second best. He will give you the good in exchange for the best every time and thank you for the bargain. One night I got out of bed, woke up Jody and we recommitted ourselves to what God had called us to do, no matter what the seeming cost.

Looking back, I’m so glad I did. God had a much bigger plan than I ever imagined but it all hinged on our obedience to Him. There is no greater happiness than being the middle of God’s will.

So as you move through training, here are some practical suggestions to keep your call strong:

1. Prioritize staying in close communion with God during your tough training years of ever changing schedules. Get to church whenever you can. Get in a small group. Read at least a small portion of His Word every day. Talk to Christ during your busy day. You need nourishment!

2. Find a good accountability partner, especially someone who has also heard God’s call into missions. Check in regularly with them in person, by phone or through email. Ask the tough questions of each other about your spiritual disciplines.

3. Get back to the mission field as often as you can to fan the flames of your call. If you know where you are called to serve, go there. If not, use these trips to explore where God may be calling you.
4. Continue to make your commitment public with your church, pastor, friends and a mission organization that you may be interested in.

5. Find a career missionary who can encourage you, answer your questions and keep in contact with you. The Center for Medical Missions can help facilitate this mentoring relationship.

6. Read inspirational and how-to books on missions regularly.

7. Keep yourself as free of things that will keep you here as you can. Limit your debt to the essential. Drive an old car, rent or live in a modest house and don’t accumulate.

8. Make plans to go to your place of service as soon as possible after you finish your training.

The longer you wait, the less likely you will ever go. If you are not sure where God is calling you, follow the leading you have and go for two to four years. God will use that experience to solidify your call and give you on-the-job training. I would look for a good missionary mentor to work with. God can then take you and what you have learned and use you there or somewhere else.

It is not politically correct to say it, but it is true all the same: the devil is out to get you - to derail your call, to drive you off course. Unless you take positive steps, he will likely succeed, but as you seek God, hold yourself accountable and keep moving forward. God has incredible things He wants to do in your life and through it. Stay on course!

Medical Missions to Unreached People Groups: An Introduction
by Barabbas, MD

Note: The following article is written by a friend serving in difficult to access countries. He is building relationships and identifying opportunities for service. Are you deeply interested in working is one of the closed countries? If so, let us know by email at cmm@cmda.org and we can let him know to connect to you. We will take this approach to provide him some protection.

Why are unreached people groups unreached?

Almost 2,000 years after Jesus’ imperative to “make disciples of all nations,” more than 6,000 ethno-linguistic “nations” are considered unreached by the gospel. This
constitutes 41 percent of the earth’s people groups and 39 percent of all humanity. In recent years, there has been unprecedented attention towards these unreached peoples, resulting in an exciting movement of missionaries to this area labeled as “The Last Frontier.” As they arrive, learn the language and toil among the people, these missionaries are finding one resounding truth - these unreached people groups are unreached for very good reasons.

The barriers which have partitioned these nations from the gospel are mainly religious. The majority of unreached peoples are Islamic, Hindu or Buddhist. But there are also political barriers, such as Communism and laws prohibiting proselytization. For this reason, these people groups are said to live in places with “restricted access.” In addition to these difficulties, there are the usual language, cultural and geographic barriers that missionaries have always had to contend with.

Over the centuries, missionaries have tried to penetrate these barriers and establish the church among these peoples, but in much less numbers than in reached places. Frankly, there are some that repudiate past missionary efforts in these lands, the paucity of results, defined by multiplying disciples and churches, being the basis for their criticism. On the other hand there are many who contend that mission work in these resistant areas has not really been tried in contrast to those places where the church is flourishing. And so we find ourselves at a crossroads in which the Holy Spirit is moving His apostolic ministers into areas which very few have traveled in the past, and which is not welcoming to carriers of the gospel message. The questions to be answered and the difficulties to be overcome are myriad, and there are few seasoned experts from whom to learn.

Medical missions has been attempted in many restricted access countries with varying degrees of success. Doctors, nurses, dentists and other healthcare heroes have persevered among peoples hostile to their message, winning them over with their love, but prohibited from freely proclaiming Christ. Because of the context in which they work, these colleagues are generally hidden from the spotlight. Only heaven will reveal the amount of suffering that has been poured out for the lost and the eternal impact that these have made. Our task is to learn from those before us, stand on the shoulders of their accomplishments and reach even higher for Christ. As a body we will establish His church among every tribe, people, tongue and nation, and the gates of hell will not prevail against it. [We must] explore the difficulties and questions of reaching the unreached, attempting to answer them from the experiences of missionaries, from literature, from Scripture and what can only be called “our best guess.” The good news for us is that no other discipline has the potential to result in successful church planting among the unreached as medicine. Medical missions has a wonderful heritage built on the juxtaposition of compassionate service to the hurting with the proclamation of the
gospel. And medical missionaries have been key players in the success of missions from the beginning of the modern age of missions, perhaps beginning with Dr. John Thomas who in fact preceded William Carey to India and later joined him (William Carey, 1761 – 1834, is actually known as the “Father of Modern Missions”).

Where others are restricted, health professionals are welcomed into virtually every country, into any community and into the homes of those in darkness. Because we demonstrate compassion and love to those in need, we are seen to be people of integrity and, consequently, our teachings are known to be reliable. Because of our expertise in curing physical woes, it is reasoned that we also have special knowledge into spiritual matters. Because we are seen to be teachers, we are in the perfect position to make disciples and empower them to reach their communities.

The Barriers to Church Planting
Christianity is not a religion competing against the other religions of the world. Muslims, Hindus, Buddhists and Communists are not our opponents or adversaries. We do not wage war against flesh and blood. On the contrary, following Jesus is a personal alignment with the Lordship of God and it only comes about by the recognition of what He has done for us through the atoning sacrifice of His Son and complete submission to Him. All men are born prisoners, and that is the state of the followers of these religions. Christianity begins with a personal reach to accept the key to freedom from the hand of God, and expresses itself, like springs of living water, as we walk in freedom and teach other prisoners the difference between incarceration and the freedom they cannot imagine.

Adherents of religions posture and perform to impress God, but He is not to be swayed by men. Christianity takes the focus off of humankind and the things we do and puts it onto the God Most High and what He has done to save us. Because of this, Christianity is a mystery to those in darkness. They were born into their religion and utilize arguments to justify their position. We were chosen by Him and were born-again into Christ by humbling ourselves and receiving the Holy Spirit. We do not justify a religious position with arguments. Instead, we proclaim the gospel, plainly depending upon the Holy Spirit to unveil the eyes of those who are blind. No one can talk a Muslim, Hindu, Buddhist or Communist into changing their position. They can only abandon their allegiance to these religions and follow Christ if the Holy Spirit draws them. It is the power of God that changes the hearts of men, not persuasive arguments.

In all countries of the world, among all peoples where the gospel has been communicated to large groups of people, God has revealed Himself to His remnant, and people have been saved. Unreached peoples are very entrenched in their religions. They are committed to the tasks their religions give them to perform and they are
completely ignorant of their imprisonment. But this is not greatly different from Americans who are absorbed with the task of material achievement. Among both populations, the majority of those who hear the gospel will reject it, but those the Holy Spirit draws to Him will respond.

The first challenge for church planting in restricted areas, then, is attaining a platform to communicate the gospel to enough people in a community so that God’s remnant can respond, become disciples and join into a healthy church. Most commonly in these areas, the gospel goes out to a few, one or two come to Christ and the persecution from the community causes them to retreat or be silent. Without the protection and synergy of being among a church of disciples, lone believers do not survive for long.

The difficulties of communicating the gospel in restricted areas are the same as in other parts of the world. If you were positioned to share the gospel in the perfect setting, what would you say and how would you say it? Would you even be able to speak the language of your audience? This is the second challenge for missionaries to the unreached and is the same as that which has been encountered by missionaries to every other nation since the days of the apostles.

The aforementioned persecution of converts is what most distinguishes unreached and restricted areas, and this is the last challenge for church planting. If the first two barriers are breached, and the gospel is communicated to many members of a community, how do the new disciples gather as a church where public identification as a convert is likely to result in persecution? In a related question, is it possible for someone to convert to Christianity and avoid persecution by hiding their new identity in Christ? How do a few persecuted disciples find the courage to advance the gospel throughout their region?

Since this article is an introduction into the subject of “Medical Missions to Unreached People Groups,” let me pause at this time to summarize the three challenges that I have just mentioned. They are “Enter the Community,” “Make Disciples” and “Empower the Church,” and are outlined below.

The Barriers to Church Planting

1. Enter the Community—attaining a platform to teach
2. Make Disciples—communicating the gospel until people come to Christ
3. Empower the Church—enabling disciples to gather together, grow and impact their people group for Christ

All missionaries can find themselves somewhere on this chart. If you are in language school and are still learning the culture, then you are entering the community. If you are competent in your host language or are able to witness effectively with a translator, then
you are making disciples. And if there are disciples present in your area and you are training them to gather into multiplying groups, then you are empowering the church.

These steps are not necessarily sequential. If you go to work in a new area and find some disciples already there, then you should jump straight to empowering them to reach their community and the communities around them. Also, you should be making new disciples while you are empowering those who were already there.

There is no greater vocation than that of an apostolic minister of Jesus Christ. Our boss is the Lord of the universe and we work side by side with Him to accomplish His agenda. Being a servant in this most noble of professions is critical so you can be a better servant for Him.