

SPRING/SUMMER 2023

THE medical evangelist

A PUBLICATION OF ADVENTIST MEDICAL EVANGELISM NETWORK

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Broadening Streams

After years of drought, we were blessed this year with an abundance of snow and moisture in Northern California. The rivers are full. A stream flows through our front yard again after years of being dry. Nearby lakes and aquifers are replenished for which we praise God.

In Ezekiel 47:1-12, the prophet Ezekiel describes a vision where he is standing in a stream of water flowing from the sanctuary. At first it was just up to his ankles, then it came to his knees and then his waist before becoming a river that was too deep to cross on foot; one must swim.

This vision is clearly a prophecy of the growth and spread of the life-giving power of God, the river of life. After quoting from the last five verses of this passage, Ellen White applies the prophecy to an area of special interest to medical missionaries. "From this fountain flows the mighty river seen in Ezekiel's vision. Such a river of life and healing God designs that, by His power working through them, our Sanitariums shall be."—Ellen G. White, *Testimonies*, vol. 6, p. 228.

We believe this is happening before our own eyes right now!

We may only be at the beginning stages of this outpouring of blessing through medical missionary work, but the promise is that the waters will cover the whole earth.

"For the earth will be filled with the knowledge of the glory of the LORD, as the waters cover the sea" (Habakkuk 2:14, NKJV).

The medical missionary work is worldwide, not limited only to these United States. In this issue we read of reports of medical missionary work not only here, but also in Ukraine, Bolivia, Haiti, and Tanzania. In each case we trace the common thread of people being called to work in a way that is out of the ordinary and out of the usual order of things.

As friends and members of AMEN, our privilege is to support and engage in this work that will grow and deepen until the whole earth is filled with His glory.

"We shall see the medical missionary work broadening and deepening at every point of its progress, because of the inflowing of hundreds and thousands of streams, until the whole earth is covered as the waters cover the sea."—Ellen White, *Medical Ministry*, p. 317.



TODD GUTHRIE, MD
is an orthopedic surgeon
and the editor of *The
Medical Evangelist*.

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The Medical Evangelist is the official publication of Adventist Medical Evangelism Network. The purpose of the publication is to equip physicians, dentists, and other healthcare professionals to be effective medical evangelists.

THE MEDICAL EVANGELIST STAFF:

EDITOR

Todd Guthrie, MD

MANAGING EDITOR

Patti Guthrie, MPH

EDITORIAL COMMITTEE:

Todd Guthrie, MD

Donn LaTour, MD

Adrian Charles-Marcel, DDS

Norm McNulty, MD

Phil Mills, MD

Brian Schwartz, MD

John Shin, MD

DESIGNER

Susie Kuhlman

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Adventist Medical
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PO Box 2528 | Greeneville, TN 37744
(530) 883-8061 | www.amensda.org

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Restoring Sight by Faith

by Gayle Daniels, OD



GAYLE DANIELS, OD,

writes from Fort Worth, Texas. When she is not traveling, cruising, or RV-ing, she enjoys photography, building dollhouses, foodie experiences and sharing laughs with her son.

The year 2020 was every eye care provider's anticipated year! Many practices had plans to market witty slogans focusing on 20/20. But little did we realize the world would be brought to a standstill by a pandemic of coronavirus, known as COVID-19.

Earlier I had founded The Daniel Migael Foundation, Inc., a non profit humanitarian organization that operates as "Better Vision Better Hope" to provide humanitarian aid and access to vision care and prescription glasses based on the biblical principle of "serving wholeheartedly as to the Lord and not to men" (Ephesians 6:7).

I thought the mandatory shelter in place would force me to close the foundation, since our operating expenses are covered by lab processing fees from clinics and grants. Those 18-24 months of absolutely no clinic activity—meaning no income—were my ultimate test of faith. Only by God's grace and mercy was I able to keep the lights on and the bills paid. At this point I realized our non profit mission and organization was truly God-inspired and had a God-directed purpose.

By persistent prayer and faith, God enabled me to continue to serve communities and establish programs that contribute to the betterment of our world.

Over the years I have established a network of vendors that specialize in portable optometric equipment so that the care rendered is of the same quality and standards as any private practice. "Better Vision Better Hope" is the flagship program that provides access to vision care for disadvantaged communities.

We run clinics in rehab facilities, churches, schools, YMCAs, homeless shelters, and neighborhood



community centers. In late 2019 the program was blessed with an in-kind donation of a Class-A, RV-styled mobile clinic that was affectionately named PopEye. The vehicle came fully equipped with two eye lanes, finishing lab equipment, and an optical area.

For years I had wanted to purchase a mobile clinic van, but in God's perfect timing He provided this van as a gift.

Although the donor cautioned that it might have mechanical issues, PopEye is still faithfully traveling monthly to clinics in the Fort Worth area. However, PopEye is now more than 20 years old. It has served us well in providing vision care to vulnerable populations, but now we are praying for funding to purchase a new mobile clinic van.



By faith I have already named her Iris because she is going to be so pretty!

In addition to participating in community vision clinics, I created Eye Tech Academy, a curriculum that teaches individuals to become optical technicians.

There are two programs: a one-year competency-based apprenticeship registered with the Department of Labor and a six-week internship. The teaching modules combine lecture hours, hands-on workshops, and practical experience with patients of the community clinics. The final modules introduce resume writing and interview skills. At the end of the program the students earn a certificate of completion and are empowered with job-ready skills. It was approved as a Department of

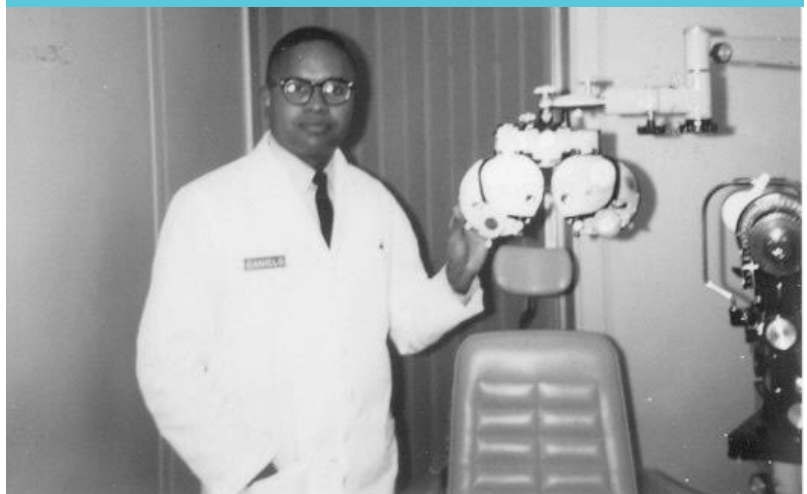
The back story

Born into a military and health career family, Dr. Daniels' passion for service was nurtured at an early age. She followed the steps of her late father who was an optometrist and retired Lt. Colonel in the United States Army. She attended Oakwood College in Huntsville, Alabama, and then attended the Pennsylvania College of Optometry (PCO) in Philadelphia. Upon graduation, she was commissioned as a Captain in the United States Air Force and was stationed at Bolling Air Force Base in Washington, D.C. Continuing her love of optometry, Dr. Daniels was the Lead Optometrist in Kaiser Permanente's Mid-Atlantic region. In 1996, she relocated to Ft. Worth, Texas, in pursuit of owning a private practice.

In 1998, Dr. Daniels purchased a private solo practice which had been in operation for 40 years. Although business was flourishing with the acquisition of two additional private practices, she sensed a void. Although "born and raised a Seventh-day Adventist, there was a time that running my practices overshadowed my faith," Dr. Daniels admits. "Once I dedicated my life back to Christ, I felt my purpose had been brought to life."

The seed for Dr. Daniels' love for mission work was planted in 1988, her final year in optometry school. She participated in a SOSH (Student Optometric Service to Humanity) trip to Queretaro, Mexico. A decade later, that seed had germinated into annual international trips to various Caribbean countries, the Dominican Republic, Haiti, Greece, Guatemala, Suriname, American Samoa, and South Africa.

Owning three thriving practices and a with heart to serve others, Dr. Daniels combined her two worlds of mission and business and officially birthed "Better Vision Better Service."





Labor Apprenticeship program for optical technician training.

Additionally, I taught an optical technician course at a local high school for at-risk teens for five years. The classroom was transformed into a functioning vision clinic with lab equipment. Students learned how to pre-screen, select frame and style, measure and cut prescription glasses for their peers and faculty. Attention to the program was highlighted on a local television news channel featuring creative classrooms for innovative learning. Several of the high school graduates were subsequently hired in local optical practices in the Fort Worth area. A version of the syllabus was submitted to the Texas Education Agency (TEA) and was approved as a 1 credit hour innovative course, eligible to be taught at any high school in the State of Texas.

“For we walk by faith, not by sight” (2 Corinthians 5:7) is not only a play on words for vision care but it’s how I live. Whether in the

brick and mortar of my private practice or my non-profit mobile van, I continue to share my faith.

This is evidenced by the office décor and the industry-standard reading cards which have been strategically replaced with laminated pages from Ministry of Healing or GLOW tracts.

I remember one time a patient jokingly threatened not to return if the inspirational placards were not put back on the walls once Christmas was over! The comment made me realize that people are very attuned to everything we are saying, verbal and non-verbal, confirming the saying that the best sermon one will ever preach is how you live your life.

Called to Serve... the Least of These

by Briana Greene, MD



BRIANA GREENE, MD, is founder of Hearts 2 Hands Inc and a member of Loma Linda University School of Medicine Class of 2023. She plans to serve as an overseas missionary physician after completion of a residency in pediatrics.

How did a surfer girl from Florida wind up 8,000 miles from home in a local market bargaining for sinks in Swahili, hiring plumbers, trying to balance a box of ceramic blue tiles on her head like the locals, and designing a dental hygiene room?

I've been interested in global missions since I was a child, but my journey truly started about six years ago when I stepped off a plane by myself into the dense green mountains of Arusha, Tanzania. I was hit by a wave of humid air and jolted out of my Western comfort zone. Here I would discover my life's purpose and be motivated to launch my own nonprofit to benefit children in Tanzania.

During that first trip to Tanzania in 2017, I volunteered independently at an orphanage and nursery school for three months. While there I developed curricula and taught classes, instituted health policies, installed sinks for hand washing, and oversaw the construction of a dental hygiene room (Happy Teeth Center) where nursery school children can learn how to properly brush their teeth. Daily I would go to the nursery school armed with self-made lesson plans and crafting supplies, with eyes open for areas needing change.

In high school I had worked as a Little Lamb director for our church's Adventurer club. This experience came in handy for working with these young children. However, in a low resource setting I had to be even more inventive. For example, I made paintbrushes from scratch by cutting tree branches with a machete, scraping the bark off, and attaching dish sponges with a hot glue gun! As I got more attuned to the local area, I found a store selling small paint brushes so I will not be repeating that challenge—but the experience of making them from scratch taught me grit and ingenuity!



Tackling hygiene issues led to further innovations. I got each child their own labeled water bottle to be filled with boiled water every morning instead of the children sharing cups. Then I purchased mattresses and bedding so that nap time was not on the cement floor and oversaw the construction of a chicken coop to provide the nursery school with both food and a means of building capital. The nursery school has an aim of providing child care to needy families and this was a mission I could support.

Creating tangible change in a short time lit a fire in me, and I returned to Tanzania for yearly projects. In 2019 I launched my 501(c)(3) nonprofit "From Hearts 2 Hands Inc" which works to "transform the goodwill of our hearts into action for children in need in Tanzania."

I spearheaded projects such as the construction of



a playground, funding pediatric medical care including cleft palate surgery, and purchasing and refurbishing a bus for the nursery school to provide safe transport instead of packing 15 kids in a five-seater car.

Although the 2020-2022 COVID pandemic could have stalled the forward momentum of the nonprofit, through divine providence From Hearts 2 Hands had launched an education sponsorship initiative called the “Mind Investor Program” the year before. Eight students were transferred from extremely overcrowded government schools (with ratios of one teacher to 80+ children) to private schools with smaller classroom ratios; two others were sent to vocational school or college. This project was able to continue remotely. In addition, two new projects were created and completed remotely. In 2021 the Tanga Wheelchair Initiative provided 10 paralyzed children at an orphanage for the disabled with new wheelchairs. Then From Hearts 2 Hands undertook the largest project to date—the Kwamkono Handicap Accessible Bathroom Project—which was completed in 2022. Ten handicap accessible bathrooms and showers were constructed at the same orphanage!

It has been exhilarating to witness the growth of From Hearts 2 Hands over time. During the first two summers I went to Tanzania I raised money through word of mouth, the online fundraiser platform GoFundMe, and employer donation match programs. As I continued to share pictures of the work that was being completed and the children that were being helped, interest grew. I knew that founding From Hearts 2 Hands as an official nonprofit entity would allow for more growth and translate into more improvements for children in need. This endeavor has been able to grow by speaking at many churches, utilizing social media to spread awareness of needs and projects, and partnering with different organizations.

The Loma Linda University (LLU) School of Dentistry has supplied toothbrushes and toothpaste to restock the Happy Teeth Center so that it can continue promoting good dental hygiene to young children. The LLU School of Medicine class of 2022 sponsored a child’s education for a year, while the class of 2023 hosted a fundraiser providing much needed medical equipment for a pediatric ward in Tanzania.

As I write I am currently traveling across Africa for ten weeks serving at hospitals in Liberia, Chad, and Tanzania as a part of my medical school electives. As a fourth-year medical student at LLU School of Medicine, my future goal is to be a pediatrician in an underserved country where service will help eliminate inequities and provide better baseline health standards for those considered the lowest in their society—particularly children. I’m excited to combine my clinical knowledge with the nonprofit’s goals of providing critical resources to communities and children.

Though some express surprise that I was able to start and run a nonprofit during my studies, that’s exactly what kept me grounded and renewed my soul during the strenuous rigors of medical school. Buying cows 8,000 miles away via text and purchasing plumbing fixtures via FaceTime during a break between my classes did make for a unique medical school journey. But I wouldn’t have had it any other way. How rewarding it was hearing the squeals of unbridled glee as children used the playground for the first time.

It’s beautiful to know that while their lives may have hardships, this playground provides them moments of joy. Here they can be the carefree children they deserve to be.



BEFORE



AFTER



BEFORE



AFTER



Seeing children happily splashing and washing their hands in a sink before mealtimes, I'm acutely aware of the fact that the opportunity to perform this simple hygiene practice offers them protection from parasites and bacterial infections. This is deeply fulfilling. To see the pure gratitude and shock on a family's face when you say that their child's education will be sponsored—nothing feels better than that.

Upcoming projects now include a sister project in Chad that supplies kid's clothing and postpartum female supplies. In Tanzania the current initiative is to supply the orphanage for the disabled with reusable sanitary products. Providing these products and a sewing machine for students to make more on their own will allow for both an ongoing solution and a self-sustaining skillset to be passed on to these girls in need. My vision for the future is for From Hearts 2 Hands to expand while maintaining our core values of transforming children's lives and their community. It can be the bridge between those who have a need in developing countries and

those from developed countries who want to help meet this need. Recognizing that one of the largest refugee camps in Africa is in Tanzania, there are endless opportunities for creating change there that can be explored. Perhaps in the future the mission will spread to other countries.

It has been said that when you find that which breaks your heart, then you will find your passion. For me, witnessing children suffering doesn't just tug at my heartstrings but pulls on my very being. This is why I founded From Hearts 2 Hands Inc. The question that guides my life is, "What is the wrong I was born to right?"

I challenge you to ask that question, too. Then let your heart call you to action following the example of Isaiah, who said, "Then I heard the voice of the Lord saying, 'Whom shall I send? And who will go for us?' And I said, 'Here I am. Send me!'" (Isaiah 6:8).

Sharing Starts Now

by Calvin Kim, DDS



CALVIN KIM, DDS, works in Washington as a dentist. He is the co-founder of F5 Challenge and ARME Bible Camp and currently serves as vice president for evangelism for ASi (Adventist Laymen's Services and Industries). He and his wife Amy have two daughters. His passion for fitness and health is second only to his greatest passion: giving Bible studies and winning souls into God's kingdom. He believes that everything we do in this life, while worthwhile, is only provisional, but connecting people to Jesus is eternal.

My friend Steve Dickman shared some sage advice with me. When initiating any new endeavor, one should start small, start simple, and start soon.

These principles work. I've applied them in my efforts to become an effective soul winner for Christ, and I recommend them to you.

I'm no expert. I'm just one thankful beggar sharing with others where to find food. Most of what I do in my office I learned from two main sources—others who have gone before and my own personal soul winning mistakes! One of the best books I've read on soul winning is *Winsome Witnessing* by Gary Gibbs. I highly recommend this book!

In this article I want to share with you some lessons I've learned along the way.

Fishing is a great metaphor!

Jesus introduced us to the concept of fishing as a metaphor for soul winning.

Fishing is a science.

An experienced fisherman uses the right kind of lure or bait to attract the hungry fish. He knows when and where to find the good fishing holes. It's where the fish are congregating. He understands fish behavior and adapts his approach to increase his chances of landing a fish.

What is the best way to become a good fisherman? There's no substitute for getting out there and trying. And the more you go fishing, the more you learn what to do and what not to do. It's natural to make mistakes, but these may prove to be the greatest teachers.

Ralph Nader stated it succinctly: "Your best teacher is your last mistake."

Fear of failure stands in the way of many taking even the first step toward winning others to Christ. We serve a God that can take curses and turn them into blessings. He can take our failures and turn them into wins!

Soul winning is intentional and deliberate.

I've learned that being an effective soul winner—just like achieving success as a fisherman or anything else in life—requires one to be intentional and deliberate.

When you go fishing, the fish don't just jump into your lap. A fisherman has to cast a line.

Ecclesiastes 11:1 (KJV) says: "Cast thy bread upon the waters: for thou shalt find it after many days."

Bread represents the word of God, or Jesus, who is the "bread of life" (John 6:35). Water represents "people, multitudes, nations, and tongues" (Revelation 17:15). We are instructed to "cast" or offer Jesus to the people.

In fishing, the more often you cast a line the greater the likelihood of landing a fish. It's a numbers game. This applies to soul winning as well.

"He which soweth sparingly shall reap also sparingly: and he which soweth bountifully shall reap also bountifully" (2 Corinthians 9:6).

We've all heard the quote: "I am a great believer in luck, and I find the harder I work, the more I have of it."

This is akin to a quote credited to William Temple: "When I pray, coincidences happen, and when I don't, they don't."

These quotes underscore the point that when



we are intentional and deliberate, the opportunities and blessings naturally follow.

Successful soul winning requires being intentional and deliberate!

Like everything else in life, the key to success is to start small and simple.

To be successful at running, you do not want to sign up for a full marathon for your first running event and get overwhelmed, demoralized, and fail. The key is to start with a 5k and build up to a 10k, then a half marathon, then a full marathon. In dental school, we first started learning to place simple one surface fillings before doing more complex procedures. We practiced on mannequins before proceeding to a live patient.

I first learned about placing a prayer box in the office lobby from one of the board members of AMEN. I liked the idea and placed a prayer box in my office. Then, I purchased a literature rack from Amazing Facts and stocked it with neat literature. Both of these things were very simple to implement and did not require much engagement. The key is to start simple and small, as I know that it can be daunting to try and engage our patients in spiritual matters if we have never done this before!

One of my patients took a picture of our prayer box and sent it to her pastor on the East Coast. When she was moving to the West Coast her pastor had told her that she was “moving to the land of heathens.” She wanted to let him know that there were non-heathens on the West Coast!

Currently, I have a GLOW literature rack in my lobby.

I have a number of books that I like to personally share with my patients. If any of my patients disclose that they are going through a health crisis or some kind of a trial or difficulty in their lives, I like



to hand them Alistair Huang’s book titled, *Struggling with “WHY?” Lessons From My Brush With Death*. This encouraging little booklet is a great sharing resource and in a very winsome way outlines why God allows bad things to happen to good people.

For patients with whom I have already established a relationship, I like to hand them a *Great Controversy*. My goal is to try to get a *Great Controversy* into every one of their homes.

The best time to hand my patient a *Great Controversy* is when they are thanking me profusely for our services, when they are in a really great mood, or when I need to give them my personal cell number.

Before I hand a patient a *Great Controversy*, I first write my cell



number inside the cover of the book. I tell the patient that this is my cell number and they are welcome to call me anytime they have an emergency. The patient is usually appreciative that I'm sharing my personal cell number with them, and it seems to make them receptive to accepting the book. I tell my patient that this is one of my favorite books and the reason why I'm giving them this book is because the world is crazy today. They invariably nod in agreement! I tell them that I believe in the Bible because of Bible prophecy and it has been 100% accurate. I tell them I enjoy giving Bible studies and if they are ever interested to give me a call. This has led to Bible studies.

Before COVID all of my Bible studies with patients were done either in my office, my home, or at a neutral place like Starbucks. With the ubiquity of Zoom, thanks to COVID, it has become so convenient and easy to do virtual Bible studies with patients. This cuts down on travel time and patients much prefer this. With the share screen function my patient can see exactly what I'm sharing on the screen and this makes for a very effective Bible study. After the Bible study is over, it is very easy to send my patient a link to the Bible study via email if a Bible study guide was used.

Soul winning is like investing—diversification is key to success.

Investors diversify to reduce their chances of experiencing losses and increase their chances of gains. In the same way the more one diversifies, the greater the chances for soul winning

opportunities. For some of my patients, it is the "prayer box" that sparks a conversation. For others, it is because of literature that was shared with them. For still others, it is because they were offered Bible studies.

One day two of my staff were asking me about what I was sharing with one of my patients with whom I was doing Bible studies. I told my two staff, I will provide lunch on Tuesday. We will invite all of the staff to join us and we can do a Bible study. Ever since this has turned into a weekly Bible study. Staff are motivated to come for the free lunch, and this gives me an opportunity to share Bible truth with our dearly loved staff!

I asked an older patient of mine named Hal if he wanted Bible studies. He declined, but encouraged his grandson Jordan to study the Bible with me since Jordan was searching for truth. Jordan and his wife began to study the Bible with me and this last summer I had the privilege of baptizing both of them!

Different people will be reached by different means. By employing a variety of methods and resources we can best increase our opportunities for soul winning!

Every day should be a day for New Year's resolutions.

There are people who appreciate a good New Year's resolution and there are those that think resolutions don't work and are a



Different people will be reached by different means. By employing a variety of methods and resources we can best increase our opportunities for soul winning!



waste of time. One survey found that people who planned to make New Year's resolutions were more optimistic about the future. A 2002 study published in the *Journal of Clinical Psychology* found that those who made a New Year's resolution were 44% more likely to succeed in that goal after six months than those who decided to put it off.

The point I'm trying to make is that people who make New Year's resolutions are more optimistic and more likely to succeed in their endeavors than those that don't. New Year's resolutions are part of a phenomenon they have dubbed the "fresh start effect." A resolution can serve as an opportunity to make new commitments and serve as a "temporal landmark."

Think of it this way. Every morning we are blessed to wake up can be a fresh start, an opportunity to change for the better.

I believe that one of the most important things we can do for soul winning success is to begin each new day by praying and asking God to give us divine appointments. When we do this three things happen. First, we begin the day with a fresh new resolution that is focused on soul winning. Secondly, we are making ourselves available to God. Thirdly, we are uniting our feeble human efforts with His divine power!

When we pray this prayer we are taking on the mind of Christ.

What was on Jesus's mind? In the *Desire of Ages* we are told that

Jesus focused on soul winning. “In all men, He saw fallen souls, whom it was His mission to save” (p. 53).

Whatever is on your mind is what you are going to see, because what you focus on becomes your reality.

We need the mind of Christ.

I am convinced that soul winning is not an event, it is not a profession, or a thing. Soul winning is a mindset!

The key to being a successful soul winner is to have the mind of Christ!

As I seek to embrace and inculcate this mindset into my psyche, I find that I am naturally more intentional about soul winning and see soul winning opportunities all around me. It has changed the way I interact with people because now they are not just passersby but candidates for the Kingdom of Heaven.

Sister White summed it up succinctly: “Let the mind of Christ become your mind, and the works of Christ become your works.”—*The Medical Missionary*, June 1, 1891.

As medical and dental professionals, every day we are given opportunities to point people to Christ! Soon there will come a time when we will never again have this opportunity.

May we recognize the privilege and honor that is ours, and may we redeem the time that remains!



Prayer Works

by **Leanna Ursales, DDS**

I recently acquired a dental practice by God’s providence. One specific blessing that comes with being an owner dentist is having full autonomy and liberty with my chair time.

One of my patients lost her husband to cancer close to Thanksgiving last year. She had been opening up to me about her daily experience grieving. During her last visit I took courage and asked her if I could pray for her—the first time I asked a patient if they would like prayer after being in practice for over eight years! Earlier that morning I had memorized a Bible verse God brought to me during my devotional and it was exactly what we both needed in prayer. This “Yes” experience demonstrated to me how preparation is vital because I cannot share if I did not spend time with God—I cannot give what I don’t have.

I take advantage of opportunities to give God the credit in response to a compliment and positive feedback, which has led patients to share their own faith journey. One patient thanked me for saving her tooth. To this I replied, “Thank God!” She then shared how she had been praying for me prior to the appointment. It’s proof that God truly releases His power through intercessory prayer.

Leanna Ursales, DDS, is co-owner and biomimetic dentist at Loma Linda Family Dentistry. She graduated from LLU School of Dentistry in 2014 and completed undergraduate training at USC San Diego.

A Blended Ministry

by Kimberly Azelton, MD, DipABLM, MPA with Pastor Philip Mills



KIMBERLY AZELTON, MD, DipABLM, MPA,
practices family and lifestyle medicine in Lansing, Michigan, in coordination with Pastor Philip Mills and the Lansing Seventh-day Adventist Church (familyandlifestylemedicine.org).

A providential conversation at the 2018 AMEN conference in Palm Springs redirected my career path from serving overseas as a medical missionary to pioneering a new mission at home.

Pastor Philip Mills, Jr., and his wife Lindsey had come to AMEN looking for a doctor who would be willing to serve with them in ministry at the Lansing Seventh-day Adventist Church. Ellen White's counsel that physicians and pastors should partner in ministry for saving souls had made a lasting impression on Phil during his teens and now he had a growing desire to implement this counsel in his own church.

At the time I was a family practice resident in South Bend, Indiana. Since we lived within driving distance, I invited Pastor Phil and Lindsey to join a small group study on gospel medical evangelism. As we prayed and studied, our hearts warmed at the thought of relinking the gospel and health in the very place where it had been separated more than a century before. We decided to go forward.

In preparation for this new endeavor, I completed lifestyle medicine boards, a fellowship in health services management, and a Master of Public Affairs degree at Indiana University. This afforded time to study the best business models for gospel medical evangelism in light of the Spirit of Prophecy.

Once my training was completed, I moved to Lansing where Pastor Phil was already laying important groundwork in his church. Dina Coelho was added to the team as leader of company evangelism in harmony with the counsel that small groups are the basis of all Christian effort. Within a year there were 11 small groups in the Lansing



church who were engaged in Bible studies and health outreach.

Additionally, we started a Churches Reaching Out to Save and Serve (CROSS) trainers pilot program. Three young people were taught how to give Bible studies, how to go into people's homes and prepare meals with them, and how to conduct neighborhood cooking programs. They supported themselves by canvassing. This inspired the Lansing church family and generated more interests.

Renové health program initiated

We launched the first church-based Renové series in the fall of 2021. Renové is a remake of the original Complete Health Improvement Program commonly known as CHIP. It was developed by Dena Guthrie, MS, RN, and featured Hans Diehl, DHSc, as video host and lifestyle expert. In my assessment, it was without peer for its evangelistic

potential. Renové, like CHIP, is an outpatient intensive lifestyle change program that is hosted by churches while enabling patients to stay in their own homes.

Renové begins with baseline lab work, a physician visit, a personal culinary starter kit, and an individualized exercise plan for each participant. It meets three times weekly for six weeks. The class size is limited to 20 people and, like CHIP, is built around small groups. The attendees have table leaders who support and encourage them. Various physicians (including myself) and other health professionals present the lectures.

Fitness coach Nathan Hyde teaches group exercise classes and also provides individual coaching. This appeals to people in the community who may not be interested in Bible studies but appreciate the opportunity to get in shape.

With all these activities we have outgrown our church fellowship hall. We are praying for resources to build a health education center that would include space for health lectures, hydrotherapy, a teaching kitchen, cooking demonstrations, and fitness center. Next door would be a doctor's office. We envision what the Spirit of Prophecy terms a treatment room and eventually a small, suburban-style sanitarium and food service.

Our church now offers a combined cooking class and potluck once a week and a more traditional-style cooking class once a month. We've also operated several types of mobile cooking programs in homes and at other locations. One of our guests said our church is "the only place in Lansing where I can learn how to eat whole foods, plant based."

Direct primary care

The next step in our health initiative was to launch a direct primary care micro-practice on January 11, 2022, as a non-profit 501(c)3 having a Memorandum of Understanding with the Lansing Seventh-day Adventist Church. Phil Mills, Sr., MD, Elder Ringstaff and Tom Owiti from the Michigan Conference of Seventh-day Adventists, and Pastor Phil Mills, Jr., who sit on its board, gave oversight to this process.

This set-up allows for financial sustainability, a flexible ministry schedule and ability to scale the clinic's growth. Debbie Swena, MD, serves as director of culinary medicine. She trains church members to provide in-home follow up for primary care contacts. A similar process is followed for those needing different types of hydrotherapy. Patients are also referred to fitness classes and/or coaching under Right Living with Nathan Hyde and his team of church members.

Creating a spiritual connection

When patients in the clinic or Renové ask spiritual questions, I often refer them to Pastor Phil, a CROSS trainer, or another team



Hope restored

A mother and reluctant daughter with BMIs over 60 joined our March 2023 program, discouraged and hopeless. The diabetic mother, on insulin, applied herself despite various challenges. Her daughter, who initially refused to come, held her accountable and prodded her on. Her blood sugars dropped dramatically and she stopped insulin the first week. Erik Christensen, a theology intern, organized men in the church to assist with their home repairs as they were facing deadlines from the city for a condemned home. Dr. Swena and her husband Mitch met weekly with them, building a friendship and teaching them how to cook. Without any invitation they showed up to church the first week of Renové and liked it so much they wanted this to be their new home church. The daughter came to the program questioning God's existence, but as she saw the gospel and medical care blended in love by the team, she opened up to me about her spiritual questions. At the time of this writing, she is receiving Bible studies and the family is attending church. This story is representative of many similar stories!



member rather than answering the questions myself. That synergy has been so powerful that Pastor Phil is pursuing a master's degree in psychology and wellness through Weimar University. I refer my patients to him for spiritual care consults, stress management, marriage counseling, and help with family issues and sleep. Likewise, he or other team members will ask me to assist when one of their Bible study interests is sick, which strengthens an open relationship with the contact.

We have learned the power of many points of contact. Ministering to needs is a powerful way to "warm up" contacts who are starting to get cold. We are constantly learning how to bridge these connections and amazed at the synergy it generates both in patients' or contacts' lives and the church as a whole.

As part of the Renové Health package, Pastor Phil conducts a spiritual care consultation with every guest in the program. He mingles with the guests at every Renové session and moderates the classes, introducing Bible themes that fit with the lecture topic. In this way he establishes rapport with the patients.

Renové Health results

Approximately ninety percent of Renové participants continue association with the church through participation in church activities or health events. Renové has been a wonderful bridge to forming more spiritual connections.

From the Lansing church's perspective, Renové is electrifying! Graduates share heart-warming testimonies at church, encouraging

"Do medical missionary work. Thus you will gain access to the hearts of the people. The way will be prepared for a more decided proclamation of the truth. You will find that relieving their physical suffering gives you opportunity to minister to their spiritual needs. The Lord will give you success in this work; for the gospel is the power of God unto salvation when it is interwoven with the practical life, when it is lived and practiced"

(Ellen White, Review and Herald, March 4, 1902).

church members and community alike to participate in future programs.

Adding the evangelism component

In the spring of 2022 the Lansing church conducted a series called Crossroads. It was patterned after the work of John H. N. Tindall, an early 20th century medical missionary. By following Spirit of Prophecy counsel for reaching the cities, Tindall experienced tremendous success in combining small groups and personal work along with large meeting events.

He later conducted a field training school in San Francisco. One of his apprentices was W.D. Frazee, who applied Tindall's formula



A new path to medical practice

I am on a journey to provide team-based healthcare delivery that fosters the “union of Christlike work for the body and Christlike work for the soul [as] the true interpretation of the Gospel” (Ellen White, *Review and Herald*, March 4, 1902).

Aside from business and church start-up work, my days consist of primary care house visits and connecting patients with services offered by the church and clinic. Our team includes church members who are trained to administer hydrotherapy and teach cooking. Often church members can relate to and encourage the patient from their own health experience through Renové.

On the side I juggle working at our local hospital as a hospitalist to pay off loans, and I teach family medicine residents about one week per month. As a member of the Lansing Chamber of Commerce, I attend most of their networking events to connect with our local business community.

As we continue to grow and experiment, the direct primary care business model is showing flexibility in our unique start-up setting. It has allowed for rapid sustainability while maintaining an evangelistic focus in cooperation with the church. It is based on a subscription model where patients pay a monthly fee of \$60 which entitles them to unlimited physician visits on a same or next day basis. The clinic phone forwards straight to my cell phone. I order wholesale labs and medications which are much cheaper than when using insurance. It’s possible to get common, generic medications for pennies. Basic labs are usually a couple of dollars each. We are growing via word of mouth and had to cap enrollment for several months to avoid expanding too quickly.

I love it because I don’t have to spend time or human resources on billing, prior authorizations, etc. I am paid based on customer service. I’m in the process of building my patient base, but overhead is so low it allows me to grow the clinic at the same pace that the church is growing its initiatives. As God opens the doors, we plan to open a brick and mortar clinic connected to the health education center.

in cities across America. In 1942, Frazee founded Wildwood Sanitarium and Medical Missionary Institute where thousands of medical missionaries have been trained. The connection extends to the modern era as Elder Frazee was an early mentor of Elder Mark Finley. In the recent Crossroads series we experimented with Tindall’s methods in a variety of ways. For example, concurrent with the evangelistic meetings we offered small group Bible studies, Renové, cooking classes, a finance class, and an exercise class. We are still following up on contacts!

It definitely takes a team to pull an effort like this together. But it’s worth it because blending gospel and medical care disarms prejudice and opens hearts.

While God has currently led me to be a missionary of a different kind, it is a privilege to be part of a renewed effort of fulfilling this vision:

“If ever the Lord has spoken by me, He speaks when I say that the workers engaged in educational lines, in ministerial lines, and in medical missionary lines must stand as a unit, all laboring under the supervision of God, one helping the other, each blessing each.”⁴

¹ *The writings of Ellen White as foretold in Revelation 19:10.*

² *Ellen White, Testimonies, vol. 7, p. 21.*

³ *Financial Peace University.*

⁴ *Ellen White, Testimonies, vol. 9, p. 169.*

“Jump!”

by Mark Sandoval, MD



MARK SANDOVAL, MD, is board certified in emergency medicine and lifestyle medicine. He is founder and president of New Paradigm Ministries, through which he provides counseling, health consultations, and seminars to those in need. He has a passion for God and seeks to serve Him in everything that he does. He particularly enjoys sharing about the gospel and its impact upon healing—spiritually, emotionally, and physically. He and his wife LeEtta have six children.

If you would have met me at my medical school graduation and told me what I would be doing now, eighteen years later, I never would have believed you. At that time, I was transitioning into an Emergency Medicine residency program, with hopes of subsequently spending six years in the mission field as a Deferred Mission Appointee (a program of educational debt amortization offered by Loma Linda University and the General Conference of Seventh-day Adventists), and then returning to the States to continue in and retire from a career in Emergency Medicine. But something happened. God happened. And nothing has been the same since.

During my residency training, I faced the crisis of my life and finally surrendered my life wholly to God. At that point, everything began to change. I had been contemplating staying in the States and earning lots of money, but God convinced me that He needed me, not my money. So, I next went to the island of Trinidad, where I served as the director of Emergency Medicine and Family Practice at our hospital there.

While I was in Trinidad, I was given the responsibility of putting health programming together for a local radio station, which forced me to read and learn about health (something I

didn't know much about). That—along with reading *Medical Ministry*, *Ministry of Healing*, and a few other health-related works by Ellen G. White—led to a change in the focus of my practice. I began to teach people how to improve their health and reverse their disease processes with lifestyle changes and the use of simple, natural remedies. I traveled from community to community teaching people how to be healthy. And I formed an organization (HEALTH by the Book) to continue that work in Trinidad and Tobago.

It soon became clear that the Lord was calling me to make an entire change in my career path, leaving Emergency Medicine behind and exploring lifestyle and natural remedies. I felt like I was on the edge of a cliff in the complete darkness with my toes hanging over the edge, and God was saying, “Jump!” I was terrified to make this transition, but I knew I could only have success where God wanted me to be, so I jumped.

I landed at Uchee Pines Institute in Seale, Alabama, where I first worked as a physician in their lifestyle center under Dr. Agatha Thrash. After a few years, I was elected president of the Institute and became the medical director of the lifestyle center. At the same time, the Gulf States Conference made me their Health Ministries Director.

While I was at Uchee Pines, I had the luxury of time. In a 17-day lifestyle session, I could spend at least four hours, if not more, with each patient that I cared for. This allowed me the opportunity to start asking the “why” questions. “Why do you eat this way?” “Why don’t you exercise?” “Why do you feel so bad about yourself?” And so on. And as I asked the “why” questions, I began to understand that my patients’ diseases were tied to their lifestyles, and their lifestyles were dependent upon their beliefs. And if I was going to make a difference in their lives, I had to influence their beliefs.

As I would meet with a patient, I would pray fervently in my mind. “God, I don’t know what this person’s problem is, but I know that you do. Please reveal it to me, and then help me to help them resolve it.” I can’t tell you how many times I would be speaking with a patient, and I would say something, hear what I just said, and think, “Wow! I never thought of that before!” It was as if God would put the words in my mouth, and it was just what that patient needed. Each time that happened, I had another tool in my “mental health tool kit” that I could use with someone else in the future. In this way, my ability to understand peoples’ underlying problems and how to help them to freedom increased with each patient. Then Dr. Horst Müller came to Uchee Pines Institute from Germany and presented 20 presentations on the topic, The Law of Life. His presentations took my whole world and threw it on its head. The concepts he was presenting were so different from everything I

had known. I was skeptical, but as I listened, I couldn’t take any one thing he said and controvert it. As I went over the recordings from those meetings several times, the conviction grew that I needed to share these concepts with our patients at our lifestyle center. So, I put together one presentation on The Law of Life and its emphasis on the mind-body connection.

Over time, one presentation turned into two, then three, then six, then twenty-four. My notes for the presentations turned into the *Law of Life* book. And the messages and concepts were so transformative for those who heard them, that I started getting requests to share in many different locations. As my understanding and presentation of these concepts grew and improved, I saw many remarkable transformations happening in my patients and audiences. People’s personal spiritual lives were transformed. When applied, relationships were mended. People who had no self-control started to be able to maintain a healthy lifestyle.

As time progressed, God began to place a new vision in my mind of what He wanted me to do. So, in 2021, our family made another big transition. We formed a new organization, New Paradigm Ministries, and without money of our own, purchased and moved into a 22.5-acre property in Cabool, Missouri where we currently operate.



I was reluctant to make this move. I was comfortable where I was at. I loved the people at Uchee Pines. I loved the opportunity of teaching, clinical care, speaking, administration (except for that disciplinary stuff that goes along with admin), etc. But it was clear that God was calling me to focus on developing resources that will help many people find freedom. As God and I would have our talk times together, He began to lay out a plan of operation for our new ministry. I knew I needed to learn to trust in Him more as we approach the end of this world's history, so I decided to set up the ministry on a value-based model.

I would offer biblical counseling and natural health consultations for free (via Zoom), and each person would be given an opportunity to donate to the ministry so we could provide free services to others. I would work for God, not money or people. And God would have to figure out how to make it work financially. If God decided that He no longer needed us to help His children in this way, He could let the finances dry up, and that would be our sign to move on. I knew that God is a faithful employer, but I had never done anything like this before, so there were moments of worry along the way. I knew that with this model, if things weren't going "well," my response would not be to work more, but to pray more. It would require me to trust in God as my provider.

So, on November 1, 2021, we moved to Cabool, Missouri and started New Paradigm Ministries. As expected, it was a slow start. But God has been gracious. We have never run completely out of money. God has provided for our needs. And we have been able to help many people find freedom in Christ. Currently, my virtual appointments are booked solid four months in advance and my earliest availability for speaking appointments is 15 months out. This is no credit to me. It is a testament of God's faithfulness. I am currently writing a book that will serve as the backbone of our ministry's mission. This book will take people from where they are, show them how they function, present to them their needs and how those needs are met, introduce them to the Source (God) that will fulfill their needs, clearly portray the practical gospel that saves them from their problems, and show them how they can find freedom in a cooperative relationship with God. This will be followed by a workbook to help each one apply the principles to their own lives.

Then we will develop an app that will take the same approach, but through short videos and digitized workbook activities will help walk individuals, in the privacy of their own homes, from their crisis to freedom in Christ. The app will also survey users at certain intervals to collect anonymous data on how well the app improves depression scores, anxiety scores, work satisfaction, and other standardized measures. And it will also provide HIPAA-compliant security for gathering personal health information as well as a history of traumas, losses, and emotional distresses in



life, correlated into a timeline, to see if we can find associations between psychological traumas and physical disease processes. After the app is developed, we will develop a training program to teach this same biblical counseling approach to others, so that we can have a network of trained LIFE Coaches (LIFE stands for Living Free, Improving Relationships, Finding Purpose, and Experiencing Health). We will also develop weekly, facilitator-led LIFE Restoration Programs which can be run through local churches or community organizations.

Finally, we will develop long-term (9-18 months), residential treatment programs to assist those who are affected by trauma, addictions, and mental health challenges. These programs will emphasize the practical gospel that sets people free from their past and restores them in cooperation with God. They will receive life skills training, work training, and spiritual mentorship, while being able to eat a healthy diet and keep the Sabbath.

This is the vision that God has given to us, and we are excited to be at the beginning of this pathway. We don't know how much time we have before the final events surprise us. But we will occupy till He comes. This may not be the vision that the Lord has called you to, but He is calling you to something. Maybe you have been afraid of following His leading, wondering how it could ever work out. Don't worry about that. God will work that out. Simply do what God is asking you to do.

Trust that He will work it out. Be faithful, earnest, conscientious, and wise, and go forward with a heart full of love for God and your fellow men. It is time to step out in faith, following where the Lord leads. It may seem like you are standing on the edge of the cliff in the dark and God is saying, "Jump!" Don't worry. God is there waiting to catch you and place your feet on higher ground. He is waiting to do something for you that you can't imagine yet.

It will not be without challenges, but at the end of the road, you won't ever regret that jump.

The Path to Full Surrender

by **Dosung Kim, DDS**



DOSUNG KIM, DDS,
is the founder and director of the Instituto Quebrada León. He also serves as Outpost Centers International field vice president for South America and Northern Asia Pacific regions.

On October 29, 1995, I was flying my family home in our Cessna 177RG when the airplane lost power and we crash landed in an almond orchard. The plane was destroyed, but my wife and I and our two young sons walked away from the accident unhurt. Investigators said no one should have survived that crash. It was a miracle.

I always attended church and paid my tithes and offerings but over the years I had drifted away from God. Pursuit of worldly success and wealth consumed my thoughts. My heart was one with the world. God had spared our lives, and I felt so undeserving.

It had been a long time since I had really prayed. That night after the crash, I was lying in the hotel bed but I couldn't sleep. Thoughts of what had just happened flooded my mind.

"Are you awake?" I asked my wife.

"Yes."

Together we knelt down and thanked God for sparing our lives.

I knew it was God alone who had intervened to save our family, and during the following months and years, I wondered why. Later, I recalled the many times in my youth when I would find my father kneeling in prayer. I couldn't hear him, but I knew he was praying for me.

The change happened slowly, but now, at long last and in answer to my father's many prayers, I began to seek God. I began to spend time getting to know Him personally. The more I got to know Him, the more I loved Him. The things of the world that I once valued so highly began to lose their luster. Now the salvation of souls and knowing God became the focus of my life.

After awhile we were convicted to make bigger changes in our lives. First, we relocated our family to a rural area in Montana where I established a new dental practice. I wanted it to be a mission where we could minister to the physical and spiritual needs of my patients.

With that goal in mind, I attended an AMEN conference and took my entire dental team along with us. The stories we heard at the conference about praying with patients inspired us to provide this opportunity for patients when we returned to Montana. The Lord was really working. We began the day as a team praying for our patients. During the day, my assistant would talk to each patient and pass along any areas of spiritual interest or concerns. We allowed for as much time with a patient as was needed. If, for example, they wanted to know more about God, we took the time to share. Our focus was never money. And surprisingly, I actually earned more than when I had shorter appointments. We didn't charge extra for the time we spent talking and sharing with them. In fact, sometimes the patients had to reschedule their dental appointments because we ran out of time, but they were happy to do so, because they appreciated these times talking with me or with my staff members.

When you go to a business, sometimes you get asked the same questions over and over. I tried to avoid this by passing along essential information, saying, "My assistant said you are going through some trials, I am so sorry to hear that. I am more than happy to pray that God will help you in this situation." We found that a person's religious background was irrelevant when it came to prayer. Almost everyone appreciated it. A simple, sincere prayer is so powerful. This was the best marketing tool in my practice because no one else was doing this, and it created a real bond among our staff as we worked together to care for the patient's spiritual as well as physical needs.



One morning as I was meditating on the story of Abraham and Isaac in our beautiful log home, the Holy Spirit impressed me that there was still something I hadn't given up for God: my dental career. I sensed that God was asking me to put that on the altar of sacrifice. For three months I battled that conviction, but in the end I realized He was calling me to go to Bolivia and start a lifestyle center and medical missionary training school.

I said to the Lord, I will go, but I asked Him for three things:

- 1) **Skills.** I didn't know how to start or run a medical missionary training school. I'm not missionary material. I asked God to please either equip me or provide others to supply my lack.
- 2) **Funds.** I had money but it wasn't enough.
- 3) **Family.** I prayed, "If I go, and make this "sacrifice," will you save my family?"

During my morning devotional time, the Lord responded and impressed me with the thought, Why would I call and not provide for your needs?

However, regarding my third request, God was silent. Years later, I realized the significance of this silence. If God had guaranteed the salvation of my family, I would have neglected my duties as a husband and a father. I needed to continue working with my family to do all I could to make sure they will be in heaven. In the end it would be a personal decision of each one of my family members.

One last request I had was, if You really want us to go to Bolivia, You will have to convince my wife and my children that You are calling, because I will not drag them to Bolivia against their will.

After praying this prayer, we had a family board meeting. I asked each family member, Are you willing to go to Bolivia? Yes. The vote was unanimous.



God has continued to provide the people we need; for example, educators, builders, and accountants, as well as the skills I need. I've never been a public speaker, but by relying upon God I have preached to large and small crowds. I have found that God provides at the moment of need.

During this time, as I studied the Bible and the Spirit of Prophecy daily, I was also convinced that this world cannot last much longer, and that Jesus is coming soon. I thought that we had enough in our savings to last us five years. But we ran out after two years. What was amazing about this was that the same month we ran out, God began to provide. People we never expected would help us, even strangers, began sending funds.

We also learned early on that we couldn't always treat people for free. If the health program or training was offered at no charge, people came for the wrong reasons or didn't value the training. They did not participate and weren't there to learn. One young man had killed someone. He was there to hide, not to learn.



I have also found that wealthy people need to pay a lot of money in order to appreciate a service. I have attended seminars on how to provide for the rich and famous. They want to be seen alone and receive individual, personalized attention. You have to socialize with them to get close to them. They can be hard to reach but what they really need is genuine friendship.

Everyone is concerned about health. Many think they already know about health. They read about it online and they join clubs. They think they know how to care for themselves. We as Seventh-day Adventists have what no one else has. We have a beautiful package that improves not only physical health but brings peace and joy to people's lives and relationships, and even their work. This is what makes our message distinctive, powerful and effective in reaching people of all classes.

When patients call us, they say, "We hear that you see patients with cancer or diabetes," to which our staff are instructed to say, "I'm sorry, but we don't heal here. We don't cure anyone."

"But so and so said you do."

"Well, actually, we don't cure anyone, but we know Someone who can cure, and that is God. We pray, and share the word of God, and teach people how to live according to the laws of health, and allow God to do the healing."

This explanation helps people know that we offer a distinctive service. Usually they come because someone recommended our



program. We do no marketing. We have space for 12 people, but can comfortably accommodate eight. We have never lacked for patients, and they come from diverse religious backgrounds.

The principal requirement for all our workers is that they love God and that they love people. If we don't have that we won't have what we need to help others. We had also cultivated relationships like this with our patients in Montana.



When we announced that we were moving to Bolivia, many of our patients said, “I will go to Bolivia to see you. I don’t trust anyone else with my dental care.”

I refused to give them my contact. I explained, “I won’t be doing dentistry there.” I was changing careers. But the point is, they valued the relationship so much they were willing to travel to another country to continue receiving our care.

That was 15 years ago. Since then, God has led in the establishment of Instituto Quebrado León, a lifestyle center and medical missionary training program in Bolivia. The training program is essential in order to have the right quality of staff to work in the lifestyle center. When students come to our school, they are often very self-centered. But over the course of two years, we see big changes in their lives as they learn to live for God and for others rather than themselves. Some choose to stay and work at our center. The most valuable staff are those who share the same cultural background as the people we serve.

Our lifestyle programs consist of 10- and 21-day sessions. Many times the patients need more time to hear the spiritual messages. But after a few days their minds tend to be clearer on a more healthful diet and exercise plan. We have worships morning and evening as well as classes on physical and emotional health. We notice how quickly they improve. Pain improves on a plant based diet combined with a little exercise.

We are also offering a new program especially for Seventh-day Adventist pastors. As leaders in their churches, they can do much to influence their church members regarding the blessings of healthful living.

Under construction now is a new lifestyle center that will better suit our needs. Additionally, we will build individual cabañas for people who prefer more privacy.

One day, one of the students who had completed our program



Dosung and Anita Kim, with their three young boys, were enjoying country living in the mountains of Montana when they heard God's call to serve as missionaries to Bolivia. A year after their arrival, the medical missionary training school, Instituto Quebrada León, was founded.

Situated on a beautiful 400+ acre property with mountains, streams, and a variety of trees, the Institute offers a combination of classroom instruction, practical application, and manual labor.

Currently, Instituto Quebrada León's primary source of income is through donations, however, the team is working to become self-sustaining through its agricultural program and bakery.

The more than 50 students who train there each year learn how to heal, teach, and preach as Christ did, mingling with people from all walks of life. They actively engage in church life, give Bible studies in homes, sell books door to door, work in the garden and kitchen, minister to guests in the lifestyle center, and teach one-month LIGHT courses in different churches. Through this means they are equipped to minister as Christ did in fulfillment of the gospel commission. "Every true disciple is born into the kingdom of God as a missionary"—Ellen White, *Christian Service*, p. 9.

came to me with tears in her eyes.

"What's wrong?" I asked.

"I am just so happy because while I was studying here, my life has changed. So has my mom's, and a few months ago my dad was baptized into the Seventh-day Adventist church.

"My mom and I have been praying for him for years. God answered our prayers! He is so good. Thank you for coming to Bolivia and starting this school." We hugged each other and praised God for His goodness.

What Jesus said is true: "The harvest is plenteous, but the laborers are few." We are doing all we can to train laborers so there can be a greater harvest for the kingdom of God.

When I graduated from dental school I never imagined where I would be today. But God's hand has been evident in the establishment of this missionary center. Seeing lives changed for eternity fills us with joy and satisfaction. We hope and pray that many more such centers can be established around the world as a means of sharing the light of the gospel and the blessing of health.

God does not call us all to the same line of work or the same sacrifice, but each of us may pray, "Lord, what would you have me to do?" And as we surrender to Him, He will answer that prayer.



Compassion, Care, and Burnout

by Daniel Binus, MD



DANIEL BINUS, MD, MPH, is a psychiatrist and the founder and medical director of Beautiful Minds Medical in Auburn, California.

During my psychiatry residency I observed two basic types of practitioners. One group was empathetic and caring. Their faces expressed genuine concern and kindness for their patients, but they also looked tired and worn out. Helping people with serious mental and emotional needs was taking its toll. I wondered if these doctors might eventually need psychiatric care themselves.

The other group seemed to handle stress better, but they were also more aloof and calloused. Psychiatry can be very draining. These doctors were good at guarding themselves, but it didn't seem like they connected as well with their patients.

Neither of these practice styles appealed to me. I didn't want to be wiped out emotionally but I did not want to become hardened to suffering either. I wanted my practice to be different. I wanted to experience joy in caring for my patients. I wanted to pour myself into helping these people and allow healing to occur without destroying my health or my relationships with God and my family.

These observations led me to study the life of Jesus. No one has ever had to endure more stress or strain than He did. Despite the constant demands of the multitudes, He was able to balance the physical and emotional demands inherent in a healing ministry.

But how? To outward appearance He worked so relentlessly that his family feared He would die from overwork. They tried to get Him to take a break. Yet, amazingly, Christ didn't suffer from compassion fatigue or burnout (as an aside, compassion fatigue and burnout are related but they aren't the same).

How did Jesus manage to stay mentally well under such intense demands? He prioritized "temple care" of His body and mind. He lived to bless others each day, but even more important was the time spent in communion with His Father in heaven. From those quiet hours of early morning communion He received instructions about how to spend His time each day. Christ is our example in all things. And if there is one thing we should prioritize over any other, it is having a daily, living spiritual connection with God. We cannot compromise on that. And that is what I have done chosen to do throughout my career. "The Saviour's life on earth was a life of communion with nature and with God. In this communion He revealed for us the secret of a life of power."—Ellen White, *Ministry of Healing*, p. 51.

Spending time with God recalibrates me day by day. When I get off kilter, I spend more time with God to regain balance. That is the only way we can have wisdom to say no or yes to different demands and then strength to carry out His plans. Most physicians and health care providers tend to be people pleasers. We need that divine strength from outside ourselves to live our lives in full surrender to Christ.

Spending quality time with God is one of the eight laws of health, and it is imperative that we incorporate the other seven, including Sabbath rest, going to bed early and waking up early, and making sure to get enough sleep and exercise. Diet is really important, too, and I'm blessed with a wife who is a great cook who prepares healthful meals.

Most doctors are not aware of these simple strategies that help prevent burnout. And unfortunately, physician burnout is at an all-time high of 63% according to a January 2023 report by the American Medical Association. With



such high rates of burnout, more and more doctors are simply choosing to retire early. But this poses a larger threat for the entire healthcare industry.

There are 12 factors that were identified in 2020 as driving physician burnout. They can be summarized in four categories as follows:

- 1) Regulatory issues.** These include standards, laws, charting, health care insurance, coding and documentation, HIPPA, and prior authorization. Doctors carry a huge burden of administrative responsibilities.
- 2) Reluctance to seek treatment.** The requirements for board certification and being monitored by state medical board for licensure make doctors less likely to seek treatment for burnout.
- 3) Malpractice.** With changes in the health care industry, more doctors are working for hospitals now instead of private practice, which leads to less control over the work environment.
- 4) Shifting values.** Our society is also experiencing huge shifts in values. These divergent interests lead to a loss of control and autonomy, and these changes have also impacted the patient-physician relationship. Sometimes doctors find themselves in the difficult situation of being controlled not only by their employer but also by their patients demanding what they want from their doctor.

How can we manage our lives in such an environment? Here are a few suggestions.

- 1) Control/autonomy.** Do as much as you can to control how you practice medicine and how you manage your time. Treatment decisions should be between physician and patient and God and should not be externally controlled. Insurance companies want to dictate the lowest cost strategy. That can be really frustrating. As much as possible, develop ways to share your work load by employing people who can help free up your time. Use extenders and hire personnel to do paper work. Ideally, own your own practice. I wouldn't have it any other way. We are answering to God. We can mold it to His plan. That's a big deal.
- 2) Priorities.** Rank in order the things that are most important to you: God, spouse, then children. We know this but how does one implement that priority list? We need to schedule sanctuary time with our families. Sabbath provides the perfect opportunity for this; however, sanctuary time during the week with your spouse and your children is also needed. Also, your work environment should be congruent with your philosophy of healing.
- 3) A sense of fulfillment.** This is very important. Being busy and stressed in and of itself may or may not lead to burnout. Research shows that it's not always stress that makes people's health worse, it is the perception of that stress. Gallup conducted a poll looking at the levels of stress around the world. They found that the happiest people are stressed but not depressed (by family, work). Work can be unfulfilling if you are only treating symptoms. Conversely, if a doctor can get to the core issues and help patients find emotional and physical healing, then work is meaningful and fulfilling.



It's important to practice where you can be creative under God's guidance rather than just stuck doing a job. I have not experienced burnout in my practice even though I work very hard. It's rewarding to see positive changes in my patients as they cooperate with our care and treatment plans.

Other areas of fulfillment include spending significant time with family outside the office—enough time to experience recharging. It's also fulfilling to connect with your colleagues.

Research shows that patient outcomes are impacted by the interconnected relationships between patients, employees, and colleagues. To nurture meaningful relationships with colleagues, we meet together each Tuesday morning to read and discuss the Great Controversy or other inspirational books such as the *Ministry of Healing* or the *Desire of Ages*. This is a wonderful way to set the spiritual tone of the office.

We try to be intentional about doing other healthful activities that foster a sense of team spirit. Last year, we had a goal to walk around the world by keeping track of our miles. I walked or ran 2,551 miles in 2022. As a team we walked around the world with 0.5 miles to spare!

Burnout is a complex condition with more than one cause, but it is curable. Becoming aware of the factors contributing to burnout is a first step; and adapting specific lifestyle strategies can facilitate restoration and healing by God's grace.

Burnout: an officially diagnosable condition

By Maria Porras

In 1974, psychologist Herbert Freudenberger defined "burnout" as the consequence of severe stress and high ideals in "helping" professions in the health care field.

This term is used for any stressed-out, career-driven person that is overworked.

The World Health Organization (WHO) included burnout in its International Classification of Diseases (ICD-11), a diagnostic tool for medical providers with an updated definition effective in 2022.

Though the American Psychiatric Association has yet to add burnout to the DSM-5 (its official manual), it is starting to assess the topic seriously.

Burnout rates before COVID were 43%. Since COVID, burnout rates climbed to 60%.

Burnout costs up to \$190 billion every year in healthcare costs.

Workplace stress accounts 8% of national spending on healthcare.

Tips to Combat Burnout

1. Take PTO (paid and personal) time off. Take time to rest.
2. Know your limits.
3. Practice saying NO to say YES to self-care.
4. Get support.
5. Begin creating change.

Causes and Treatment of Burnout

By Maria Porras

Perceived Stress

Perceived stress is exactly what it sounds like—what we each experience as “stressful,” also known as “psychological stress.” Perception is different for all. How much stress have you experienced in the last year?

1. Relatively little stress
2. Moderate stress
3. A lot of stress

Strategy:

1. Eliminate unnecessary stressors by setting boundaries.
2. Increase stress tolerance (physically, not solely psychologically).
3. Manage stress response through mindset work.
4. Utilize Cognitive Behavioral Coaching by asking, Is it true? Is it helpful?

Physical Stressors

- Food sensitivities
- Gut microbiome imbalance
- Dieting or long term under-eating
- Too much aerobic exercise
- Processed and high sugar foods
- Cutting carbs, prolonged Keto diet
- Poor sleep habits

Strategy:

1. Balance nutrition: the brain needs 20-40% nutrients just to function
2. Utilize vitamin and mineral support.
3. Use wholistic techniques that get the body back into balance such as hydrotherapy, sauna and massage
4. Identify and remove food sensitivities
5. Support hormones
6. Engage in restorative exercise
7. Practice good sleep hygiene

Blood Sugar Imbalances

- Blood sugar is an often overlooked cause of stress unless related to diabetes or similar conditions, but it is a major contributor to stress.
- Imbalanced blood sugar levels trigger hypothalamic-pituitary-adrenal (HPA) axis dysfunction, impacting insulin levels and hunger and satiety hormones resulting in a feeling that you are never quite full. This also triggers increased cravings for sugar and salty processed foods and emotional eating. It causes irritability and anxiety, as well as mood rashes, depressive symptoms and cortisol spikes.
- Imbalanced nutrition can lead to blood sugar irregularities. Foods that promote this include processed foods; fruit without fiber; high density, fatty foods; and lack of balanced nutrients.

Strategy

1. Eat in an orderly fashion, eat enough, and eat well!
2. Improve the quality of the foods you are eating at every meal.
3. Balance macronutrients and focus on healthy proteins, fats, and fiber.
4. Support the body's HPA axis through lifestyle management and supplements, including:
 - Vitamins B1, B5
 - Omega 3s (preferably plant-based)
 - Magnesium
 - Vitamin C
 - Zinc
 - Amino acids

Poor Sleep

- Our circadian rhythms are mostly controlled by light. As the sun rises and sets, we rise and set.
- Disruption happens when we are exposed to light at the wrong time of the day (not enough in the morning and too much at night), especially when it is “artificial.”
- Today's problem: ALL DAY light (screens and electricity).
- Melatonin and cortisol are the main hormones affected.
- Cortisol wakes us up and works best in the a.m.

Strategy

1. Follow nature: get the right type of light at the right time of day.
2. Practice sleep hygiene habits.
3. Reduce energy drinks, caffeinated products and other stimulants.
4. Spend time outside. As little as five minutes makes a difference!
5. Get sunlight upon awakening and no screen time 2-3 hours before bedtime.

Restored

by Eugene Pantangco, MD, MBA



EUGENE PANTANGCO, MD, MBA, is married to Ruth, a registered nurse. Together with their two children, Nicolas and Celyne, they live in Colfax, California. Although Dr. Pantangco continues to live with the permanent sequelae of this near fatal diagnosis, he remains active for whatever the Lord has in store for the rest of this life.

On an early morning in 2014, I suddenly awoke. It was about 2 o'clock on the morning. The pain felt as if an alien parasite was gnawing on my spine between my shoulder blades then sneaking its way up my neck to the base of my skull. The pain was excruciating. It must be just a muscle cramp or spasm, so I thought. I got up and rushed downstairs to the kitchen medicine drawer. I quickly gulped the NSAID gel caps as my dependable go-to remedy. It did nothing. A second later, my legs began to weaken, and I fell to the kitchen floor. I crawled on my hands and knees back up the stairs to wake my wife. The pain, the Pain, the PAIN! was all I could cry out.

In general, I can tolerate physical pain, but this was different. I was biting my t-shirt collar and my tears were flowing. I begged my wife to find someone to watch the kids and call 9-1-1! My breathing labored and I struggled to speak. The receiving ER doctor was shocked, but competent. He announced what I already knew. I was experiencing acute ascending paralysis of unknown etiology. From the waking moment of pain an hour or so before to my arrival in the ER, I became paralyzed from my neck down. The MRI revealed an epidural hematoma compressing my spine at cervical level C3-4. "I've never seen this before," he remarked.

The rest of my life changed after waking up that early fall morning.

Up until that period in my life, I was a spiritually lost "church pew warmer" who was more focused on my career as a board-certified gastroenterologist than on my walk with God. All my life I had been competing to be at the top, to go to the best schools, and to land the best positions. My career pursuits consumed my life. I was



commuting long distances, working long hours, and managing my own practice or department. The pace of work was insane and there was no break or reprieve in sight. While outwardly I was going through the motions of being a model son, physician, father, and so on, inside I wondered why I didn't feel fulfilled.

Now that I was incapacitated there was plenty of time to think and reflect. The neurosurgeon performed a laminectomy evacuating the clot, but I remained quadriplegic for months. Fortunately,



through God's mercy, I was able to gradually recover. When I first regained minimal sensation in my hands, I wondered, Will I walk again? Will I ever perform another colonoscopy, endoscopy, or ERCP? Will I be able to ski or ride a bike with my kids? Will I be able to walk my daughter down the aisle on her wedding day? Will I ever hold my wife in my arms or feel the softness of her hands again?

During the months spent in the rehabilitation unit, I had to learn to do everything again—dress myself, brush my teeth, sit and stand without falling, then eventually walk with assistance; everything I took for granted had to be relearned. Although I regained those basic skills, the physical deficits necessary to perform my career, my "identity," was irretrievable. I would never again be able to practice as a highly trained physician specialist. I eventually learned to cope and accept this role change. Now my activities center on being a husband, father and an illustration of a second chance gifted by the Lord.

Looking back, stress in its most complete sense played a role in what happened to me. The mental challenges of patient care delivery along with the physical demands of repetitive, tedious procedures delivered a cumulative toll on my body, holistically. Health care jargon would describe my stress accumulation and event as an "acute on chronic" illness. I had been an altruistic, efficient and productive human being my entire life. This was due in part to the "No Excuses! - I'll show you" attitude I learned from a Midwest upbringing combined with an ethnic culture emphasizing hard work and education as foundational priorities.

In my early formative years, I had a self-preservation attitude that proved successful for me and got me past failures in my life. In times of success, however, instead of giving credit and glory to GOD, I congratulated myself. This cycle repeated itself for years and my self-confidence turned into arrogance, but what grew larger than my ego was my spiritual blindness.

I am truly grateful and blessed to be alive, to communicate and participate in daily normal activities I once took for granted. Today, my vulnerability is more self-evident in how I approach challenges. I see myself simply as a human who lives in a sinful world, I no longer have to try to be perfect or without fault. Humility is now part of my recovery while my ego must surrender.

Prayer is my go-to remedy these days; I consistently use it to bring my burdens and worries to someone else, my GOD.

He has always been there. Ironically, I've had this lesson taught to me since Adventist elementary school. Why did it take such an extraordinary experience for me to understand that prayer is valuable? After praying, my mind and body have decompressed from the stress of expectations I had placed on myself for unclear reasons. God willing, I plan to continue on a journey of physical recovery and spiritual healing.

Swimming with Crocodiles

by Yury Bondarenko, MD, MPH

Adapted from a presentation given Friday, March, 3, 2023, to Loma Linda University School of Medicine Annual Post-Graduate Convention alumni at the Loma Linda University Church. Used by permission.



YURY BONDARENKO, MD, MPH, is director of the *Angelia Mobile Medical and Dental Clinic in Ukraine.*

In war, it is very important to keep a sense of humor.

So I'll start with a little funny story that some of you must have heard.

A rich wealthy man held a luxurious party at the back of his mansion, where he had a pool that doubled as a home for live crocodiles, which he loved to collect.

The millionaire who also had a beautiful daughter suddenly thought up a dangerous idea to stir things up.

At the beautiful occasion, the millionaire took to the stage and stated his proposition that he would give a million dollars or his single daughter to anyone who could swim safely across the pool filled with the fiery animals.

Immediately, as the rich man finished his speech, there was a loud splash as a man jumped into the water.

He screamed and swam with all his strength towards the other end while he received cheers and encouragement from the crowd.

Fortunately, the young man made it out of the swimming pool alive with his shirt all battered and some slight injuries on his body due to scratches from the crocodiles.

The millionaire who was so impressed commended him for doing a great job and passing the test. He added that he didn't think anyone could survive the life-threatening trial.

Holding his end of the bargain, the millionaire asked the tired young man if he wanted his





beautiful daughter or a million dollars.

The young man angrily answered that he didn't need his money or his daughter but wanted to know who pushed him into a pool filled with crocodiles.

Who would have thought the young man was swimming just for his life!?

My dear friends and colleagues!
Someone pushed our country into a pool of crocodiles.

To Survive.
Pushed Me, our team of the Angelia clinic, our families, pushed into the war.
We didn't choose war.
We didn't believe [in it] and we didn't want [it]. We didn't plan [it].
We just ended up in the water with crocodiles.
We're in a war.
But not only us.
There are thousands and millions of Ukrainians.
Many of them are [in] much [more difficult circumstances] than us.

We have to swim as a team in this pool of war and, at the same time, provide comprehensive care to those who are bitten, wounded, dying.
War is a very difficult experience.

It's catastrophic. Stress you can't get away from.
Imposed violence.
Great collective violence.

Along with the rockets—anxiety arrives.
And along with the power and water cuts, peace and regular life are turned off.

But we swim, swim hard, adapt and, as usual, help those who are worse off. We swim in this crocodile pool not for awards, not for money, and not for recognition.

We swim because we are doctors. We are nurses. We are medical professionals surviving and helping [at] the same time. Because we are children of God.

What makes us alive and work in a country where there is a war?
What gives us the strength to get up in the morning and move on?
After all, the medical profession is already a very stressful job.
What gives us the strength to go twice a week to a mobile clinic in other cities, sometimes very close to the mouth of a crocodile?—I mean very close to the front line.

How can you save yourself in such conditions and not go crazy, not burn out, not be disappointed?

What inspires us?
What is our resource?

The first is the knowing that best place to be [is where] you are needed the most.
Two thousand years ago, Jesus Christ was in the hottest spot in the universe—the Earth—a place where He was needed the most.

He is our teacher. We have learned and are learning at His feet. At his school. In his Alma Mater.

Loma Linda is where we were taught this. [We were] taught not just to heal the heart of the patient,
But make the heart beat joyfully.
We were taught not just to treat the kidneys and their filtration capacity,
But learn to filter what is happening around.
We were taught not just to treat vision,
But to teach our patients to look at the invisible.
"For what is seen is temporary, but what is invisible is eternal."
And no war will take away the eternal from you.

We were taught not just to heal an insomnia, but to find a reason to fall asleep with a clear conscience and endless trust in the One who guards your sleep.



We have been taught to not just treat depression because of lost homes, jobs, and maybe lost loved ones.

We were taught to show to our patients what cannot be lost. A resource that will not run out, unlike relationships and loved ones that can leave our lives.

We were taught to point a patient to eternal mansions there, to work from which you want to live, and which you will not lose. We were taught to teach the patient to get to know and communicate with the closest One that no one will take away from you—with Jesus.

We were taught to make man whole. Thank you, Loma Linda!

So, it helps us to live in this world of war, realizing one's need and to be exactly where it hurts the most. And where you are needed like nowhere else.

There are many suffering people and places in Ukraine. Therefore, we need more medical equipment. To save more effectively those who are in the pool of war. We need more brave doctors,

those who are not afraid to jump into this pool of war to save more and more and more.

The second is—in Ukraine are miracles all around. Permanent wonders. Prayers answered.

We rejoice at the miracle of the release of the prisoner from Mariupol - one of our patient's son in law. We prayed for this miracle for 10 months.

We rejoice for the guy who survived during the shelling on Saturday few weeks ago. We prayed for him at this same time on this very Sabbath and the Lord spared his life.

We rejoice for the brother of our colleague who walked five kilometers, wounded, and survived.

We are happy for the patients of our mobile clinic.

One guy helped at the mobile clinic. He was accidentally invited to do an ultrasound. He did not want to because nothing hurt him. It turned out to be cancer in the initial stage. He was operated on and he lives. And there have been many such accidental early-stage cancer diagnoses this year, as well as many calls of gratitude

and tears of joy from these patients and their families.

My favorite miracle is the story of an over 70-year-old patient who went through 60 years with a cotton ball and two wax plugs in his ear. He did not know about it. Sixty years ago he was diagnosed with unilateral deafness, and all his life he thought he was deaf. Our ENT doctor "accidentally" looked at him. It was an unplanned patient.

Every time our mobile clinic goes to a city where there are shellings, we are always safe; there is always no shelling. It may be [happening] in another part of the city, but not where we serve our patients. [There are] visible and invisible miracles. We record the ones we see in our gratitude diary.

This is a memory resource. It inspires to serve further in the war.

The third is—a continuing sense of God's presence. A clear feeling that God is near. Guardian angels are nearby. God is here. And that's exactly what we are dreaming of, right? It feels like you are surrounded by a constant prayer presence. God is near. Yes, war is ugly, sin is terrible.

"But where sin abounded, grace did much more abound."

God is near. You are talking to Him. You have a relationship. And it's soothing.

The fourth is

—conscious suffering.

Yes, it's hard for us.

Yes, it's not easy for us.

But we know for what and why we suffer.

Let me read a quote from one book:

"God never leads His children otherwise than they would choose to be led, if they could see the end from the beginning, and discern the glory of the purpose which they are fulfilling as co-workers with Him. Not Enoch, who was translated to heaven, not Elijah, who ascended in a chariot of fire, was greater or more honored than John the Baptist, who perished alone in the dungeon. 'Unto you it is given in the behalf of Christ, not only to believe on Him, but also to suffer for His sake.' Philippians 1:29. And of all the gifts that Heaven can bestow upon men, fellowship with Christ in His sufferings is the most weighty trust and the highest honor." —Ellen G. White, *The Desire of Ages*, p. 224.

Above all gifts—The Greatest Honor is to suffer in fellowship with Him.

Eternity is worth suffering temporarily.

Hear me please:

—Eternity with God is the only reason why it is worth enduring suffering, limitations and hardships.

Especially since life goes by so fast, so fast that the memory will eventually forget all the most painful.

As one of my professors said: the best quality of memory is to forget.

And Uncle Alzheimer can help with this.

No matter how difficult it was for us, there, in Heaven, I firmly believe in it—we will say: we got to Heaven so easily! This is a look beyond the horizon, my



friends!

Look over the war.

Look above.

Look at what will be.

No one can take eternity away from you, so it's worth waiting for more.

This is the difference between vision and myopia.

The fifth thing that helps us to live during the war with an open heart and not closed is

—Sincerity to yourself, your family and God.

Sincerity, frankness, genuineness. The family will appreciate it.

God also appreciates [it].

Sincerity is useful to me—to be honest with myself.

War takes off the masks.

War takes away your political correctness.

War makes people simple and open.

In war, you are who you are.

Sincerity is the best brand of a doctor, husband, dad, mom.

Sincerity is must have issue for relationships, and sincere relationships are needed in war. They help to live as safely as possible in such conditions.

As a Christian psychotherapist I often advise patients who have a war in the

family to be gentle and sincere. This is salvation from evil. Tenderness and sincerity is the soft and effective weapon of victory, the tool of healing.

Of course, there is also a physical, social endless resource that no one will take away from you: these are cardio workouts, and a homemade waterfall—a shower for 15 minutes under running water. This is hugs for 15 seconds continuously. It's singing, a lot of singing. Just sing, sing in the shower and in training. Anywhere.

It is important that the resource is infinite. A resource that no one will ever take away from you is the fire of the Holy Spirit in you, which will never go out. It burns and does not burn out. He is burning, not you. His role is to burn, and my role is to be a jar for the Fire.

If you understand this, professional burnout is impossible.

This is you, a weak person who needs fire in the soul.

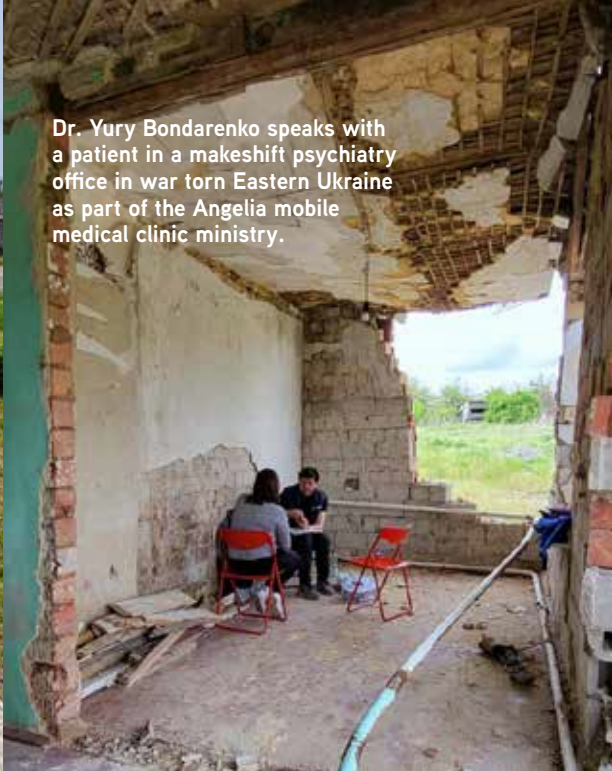
This is you, a smart but weak doctor because you are a human being.

A man who gets tired, needs strength.

There is a God who does not get tired. He is your Fire and your Strength.

God who will never leave you.

He is a resource that is always available.



Dr. Yury Bondarenko speaks with a patient in a makeshift psychiatry office in war torn Eastern Ukraine as part of the Angelia mobile medical clinic ministry.

And that means you're not alone. And you are not alone.

You know, I grew up without a father. Of course, God blessed me with a wise grandmother, a workaholic grandfather and a tender mother. But I grew up without a father, or so I thought.

But I didn't know a simple truth: Father has always been for many years nearby. And I didn't know.

As when Jacob exclaimed: Truly God is present in the place of Sem, but I did not know. And I didn't know.

He swims with us and with our guardian angels in this terrible pool. He is here. He is nearby. He saves us, and our patients through us. He chose us, saved us, and saves them through us.

He performs a feat in this pool of war, full of waves of pain and red with blood. War is a place for heroism.

The prophet Isaiah wrote: "He shall see of the travail of his soul, and shall be satisfied" Isaiah 53:11: He will look with satisfaction at the feat of His soul.

I want Him to look with joy of satisfaction. I really want my Father to look at the feat of his soul and smile, because He is my Abba Father. For the Father to say, well, it's not in vain that I raised you, and for my Lord Jesus to look at me with joy.

And He said—(well, not in vain) not in vain I died for you.

I want God to be happy. He deserves it. I want my life, our clinic to be part of His feat. And then I'll feel good. I will say, It is well with my soul. It is well, it is well with my soul.

We all know very well, dear colleagues, this our feeling of satisfaction and happiness when the patient feels better, when he is saved, when he is happy.

Yes, it's hard now. Yes, it's very hard right now. Yes it's a narrow path. But I love this way. I am grateful to Him, And it's conscious suffering. And it's not heavy, because eternal life is already coming 'Cause He's leading the way.

He is here. He leads.

As sung in one of my old favorite psalms, written in Siberia during the communist era:

Live for Jesus, die with Him, Can you wish for a better way? Worth the fight, worth the fight It is worth giving your life for this.

We in Ukraine are waiting for the last day of the war. We are waiting for the end of the war on this planet. We live and work. We are waiting for the last day when it all ends, And it will be Victory Day. His victories, All glory to him.

But it's still a war And His warriors are singing

*I have decided to follow Jesus
I have decided to follow Jesus
No turning back
No turning back*

Thank you very much.

Personal Investment

by Scott C. Nelson, MD



SCOTT C. NELSON, MD, serves as medical director of Haiti Adventist Hospital and as associate professor of orthopedic surgery, Loma Linda University School of Medicine.

After serving in the Dominican Republic for five years, my wife Marni and I were considering our next move, asking for God's guidance. We had some options and returning to Southern California was not our first choice. A book about my maternal grandfather, a surgeon in Africa, *Bwana Munanga* (aka medicine man in Kiluba) from Pacific Press, influenced us to move overseas. And now another book, *For God and C.M.E.*, about my great, paternal great-grandfather Percy Magan was reminding us about the mission of Loma Linda and influencing our move back to the United States.

Disaster strikes

In 2010 we had decided to return to Loma Linda from the Dominican Republic. Just before this transition, an earthquake struck Port au Prince, Haiti's capital. I had been to Haiti many times, but had no idea how bad the situation was. Less than 48 hours later, I walked into one of the deadliest disasters in world history. There were more orthopedic emergencies than anyone could imagine.

Haiti Adventist Hospital (HAH), in Port Au Prince, the closest major hospital to the epicenter of the quake, was still standing, but was run down and in a state of disrepair. This is a well-built hospital that was founded in 1981 and at one time had a great reputation. But as outside support dwindled, the hospital was left to fend for itself. With dependence only on local resources, poor people had been turned away for years, conditions were deplorable, and the hospital had been barely functioning. Unfortunately, this state of deterioration is a reality in many Adventist mission hospitals.

But with tragedy comes opportunity. This disaster brought unprecedented resources to Haiti and to HAH. It was time to restore the hospital mission

which is "to continue the healing ministry of Jesus Christ by providing quality care to all classes of people." Institutions, donors, and volunteers responded to this disaster by helping HAH give emergency treatment to the overwhelming number of victims. A longstanding need for orthopedic surgery in Haiti was suddenly magnified. And HAH was able to step up in an unprecedented way. Since that time the growth and reputation of the orthopedic program and the entire hospital has continued to grow.

Long term commitments

One lesson learned is that short term service is no substitute for the long term commitments that many missionaries made in the past. The value of building relationships, learning a language and integrating into a culture cannot be replaced by doing surgery for a week and donating some materials. Fortunately, during the years following the earthquake there were several who did make long term commitments to HAH, and with support from Loma Linda University the process of restoration continued to move forward.

Over the next several years while working at LLU, I made multiple short term trips to HAH every year to support the orthopedic surgery program. I was quite content with my balance of comfort, safety and short term mission trips. But Marni was not. She was ready to move back to Haiti. In 2017 when the return of the missionary surgeon at HAH coincided with our youngest son moving off to college, the call to move to Haiti was loud and clear.

My most important role is to be a bridge between people with resources and those without. I am grateful to be part of a worldwide movement. Ephesians 4:16 says, "From Him the whole body, joined and held together by every supporting

ligament grows and builds itself up in love, as each part does its work.” Ligaments are important. Connections are important. We each have been given unique gifts and by putting them together amazing things can be accomplished that would otherwise be impossible. In spite of faster travel and unlimited communication, many Adventist mission hospitals unfortunately are less connected than they were in decades past. Because of this, service is sometimes mediocre and poor people are often turned away. Today that is no longer the situation at HAH. Many people from near and far are collaborating in unique ways. There is a renewed sense of purpose, staff morale is increasing, the love of Christ is being shared, and miracles are happening every day.

Officially, I hold the titles of medical director and orthopedic surgeon. But in addition to surgery and clinical activities my duties include supervising maintenance and construction projects, fundraising, sourcing equipment, fixing equipment, and a multitude of administrative tasks. Marni has no official job description, but she fills in the gaps and there are many of them. These include taking care of visitors and managing household matters, as well as helping many employees and their families.

There are multiple Seventh-day Adventist churches within a short walk of our hospital. These churches are full of people and full of energy. People may wonder, why be a missionary in a place where there are so many believers? Missionary work is not only about winning new converts. Supporting our members and the surrounding community, giving love and service to others around us, is the example that Christ gave us.

Challenges

Many wonder how we survive financially. This is a constant struggle in a resource depleted country. Our first goal to restoring

the financial health of our hospital was to focus on our mission. There are three important components: 1. Sharing the love of Christ 2. High quality service 3. Making care accessible to all. None of those three goals seem to be a direct route to financial success—maybe even contrary to success. Our first move was to lower prices and increase accessibility. Initially this was not a popular move amongst some of our employees—some of whom had not received a paycheck for months. Nowadays patients are paying less than ever, and many are treated for free. Amazingly, hospital revenue is higher than ever. Increased volume and efficiency have more than offset the financial sacrifices from increasing accessibility. Our financial situation remains a delicate one, but the Lord is blessing us in so many ways.

If you have heard about Haiti recently, I am quite certain that it has not been good. Fortunately, this is not the entire story. Nonetheless, security concerns are something that we are taking seriously. We treat gangsters, opponents of gangsters and victims without discrimination or questions. Many days we have multiple gunshot victims in our emergency room. Machine gun fire is heard in the background day and night, but usually not quite close enough to be truly frightening. Our house is on the compound of the hospital, which provides us with some level of security. We don’t move about unless absolutely necessary. Hundreds of people are kidnapped every month in our city and more civilians are being killed than in the Ukraine. More than 30 doctors have been kidnapped in Port au Prince in the last year including two doctors from our hospital. These situations are extremely stressful. Friends and family at times have pleaded with us to leave. But we know from many stories in the Bible that the Christian life may involve danger and duties that are difficult to perform. Every day we must listen and watch for God’s clear guidance as it is often not synonymous with our own desires and judgment.





Many hospitals in Port au Prince are barely surviving and the role of our hospital is more important than ever. Patients in our surrounding area are no longer able to go safely to other hospitals downtown because of the civil unrest. Even the Doctors Without Borders hospital near us was closed down several months ago after several security breaches which involved unauthorized gangsters coming in to finish off opponents. This has led to HAH become a regional trauma center and referral hospital.

Vision and the future

Our ultimate goal is for the hospital to flourish in a way that will bring glory to God in greater and greater quantity. We are in the midst of recreating administrative infrastructure as well as restoring the physical plant. This is part of a master plan that first involves renovation of the entire existing facility. Most of this has already been accomplished. This year we hope to finish that phase with renovation of our patient rooms and pediatric ward. The plan eventually involves adding some inpatient and outpatient space as well as some staff housing. Modernization with our new digital x-ray system and a large oxygen generator have improved efficiency and allowed us to more effectively implement our mission. This year we hope to continue that process with the addition of a solar system that will dramatically decrease fuel expense and protect the environment.

The ultimate goal is to have a hospital that is sustainable, but not necessarily self-sustainable. International collaboration and resources are essential for allowing us to provide high quality care to those who need it most. As a worldwide church that has a health care ministry, we need to support our mission hospitals much more intentionally. And personally, our role will continue in Haiti for the indefinite future.

For those wishing to serve

This life is not easy but the rewards are plentiful. Eternal rewards aside, the joy and excitement here and now go way beyond the burdens and frustrations. We are so blessed to be on the front lines witnessing amazing things, working with wonderful people and thinking about life in a different way. I would encourage all who want to be involved to seek out the unique gifts and resources that God has given you and ask how you may contribute. I am certain that he has a calling for each and every one of his children.

Roots

My great, great grandfather Percy Megan immigrated from Ireland at 16 years of age when his family disowned him because he didn't fit the family mold. He came from an affluent family, but his father took part of his inheritance to pay a rancher in Nebraska to train him to work. The rancher was abusive but nonetheless Percy persevered. In the course of time he befriended a family nearby who invited him to attend a series of evangelistic meetings. Percy's early childhood exposure to religion had left a bad impression on him. He expressed his disdain for religion by showing up at the Bible prophecy meetings in his dirty work clothes and seating himself on the front row.

But God was drawing Percy's heart and before long he was baptized. Upon hearing the news his father stated, "I never want to see you again." Meanwhile, Ellen White had taken notice of young Percy and offered him a guest room in her family's home. Under her influence Percy developed an interest in education and evangelism. In 1881, he went on a two-year trip around the world looking for locations that would be suitable for expanding the health and education ministries of the Adventist church.

He later founded Emmanuel Missionary College (renamed Andrews University), and after that helped to establish Madison College, a medical missionary training school outside Nashville. Seeing the importance of medical ministry, at age 41 Percy decided to go to medical school himself. After finishing medical school in Tennessee, he was called to Loma Linda where he first served as dean of the medical school and then president until 1942. In those days he helped out a young medical student named Olavi Rouhe, an immigrant from Finland, who later became my grandfather. Olavi went on to work in Africa for many years at Songa Mission Hospital. I first visited him there when I was eight years old.

My early exposure to surgery in Africa fueled my interest in becoming a missionary surgeon. I became an orthopedic surgeon and eventually we moved to the Dominican Republic where I worked for Cure International, which operates children's orthopedic hospitals around the world. It was a blessing to work in this Christian environment with people from other faith backgrounds. But this also served to strengthen me in my own roots and give me a greater appreciation for Adventism and our health ministry.

At-the-Door Connections

by Cristian Villegas, MD



CRISTIAN VILLEGAS, MD, is a physical medicine and rehabilitation resident at Loma Linda University Health. He and his wife Shelina lead the lay ministry *At-the-Door*.

Knock, knock.

The door opens slightly. A young woman is standing inside.

“Hello, my name is Cristian and this is my friend _____. We are from the Loma Linda community and we’ve been visiting you and your neighbors recently to connect with people in the area, provide hope, and encouragement. In fact, we have been praying for this specific community. In this day and age, we believe that everyone has become so disconnected, and people can be going through difficult times and others not know it. We are realizing that we don’t know unless we ask. How are you doing? Is there anything that you need?”

Using this simple approach, a team of Loma Linda volunteers has been connecting, praying and sharing the good news of Christ’s soon return since 2014. This outreach, known as “At the Door,” has developed a unique, relational approach to door-to-door ministry that is more about personal connection than simply passing out literature or finding Bible study interests.

Since the ministry began under the leadership of Andrew Chung, MD, the entire city of San Bernardino has been reached, and in 2019, the team started working west from South Waterman Avenue towards Colton.

Cristian Villegas, MD, and his wife Shelina have been leading *At-the-Door* since 2017. Dr. Villegas is a resident physician in physical medicine and rehabilitation at Loma Linda University Health and Shelina is a photographer.

“Our goal,” Villegas states, “is to reach people by using Christ’s method alone. We seek to connect with them on a personal level through prayer, conversation and assessment of their emotional and spiritual needs. We have modified our approach to take more time asking questions and listening. We tailor what we offer according to the person’s needs or interests.”



At-the-Door volunteers meet on Sabbath afternoons to assemble literature packages and have training. On average, there may be four to six volunteers, but sometimes there are as many as 15-20. They share what they have learned and practice what to say. The formula includes three things.

- 1) **Prayer.** Some volunteers stay behind to pray, and those who are going out pray together before and after each home visit.



- 2) **Connect.** Volunteers are there to listen and show they care.
- 3) **Invitation.** Depending upon the person's interest, they may be invited to pray or to receive some literature or to attend a Bible study.

Afterwards, the volunteers reconvene to share their testimonies and experiences.

Villegas states, "About a year ago we met a man named Joel at the door who shared with us about his struggles. We had prayed with him and encouraged him. We exchanged contact information since he had questions. He wanted to know how to be saved, and he joined us for a Bible study the very next day. One year later, almost the very same day, he joined us in going door to door! He told everyone, 'Jesus loves you. He changed my life. He can change yours.'

"My experience going door to door has really helped me in making spiritual connections with my patients," Villegas says. "I now feel

much more comfortable talking to my patients about spiritual things and offering prayer."

Anyone is welcome to join the group on their outreach project. The only qualifications are that you can pray and speak, Villegas says.

At-the-Door partners with Advent Hope and with the Mentone Seventh-day Adventist Church, which help supply literature for their ministry, and utilizes the Glide app to track their progress and keep record of interests.

Called to Medical Ministry

by John Shin, MD



JOHN SHIN, MD, is president of AMEN, and an assistant professor of medical oncology at Loma Linda University Health. He has a burden to share Christ with cancer patients. His research focus is on immunotherapy clinical trial development and the effects of lifestyle interventions in cancer treatment. His wife Elisa is a dentist by training, and they are blessed with three children: Sophia, Charis, and Kyle.

"I want to get rebaptized." My father's words caught me off guard so I asked him to explain.

"I didn't know what baptism really meant the first time," he said, "so now I want to do it right."

We were at a lifestyle center because of my father's brain cancer, and we were coming to the close of a two-week residential program during which we ate a plant-based diet, did simple exercises, and listened to spiritual messages. The physician at the center visited with my father each day, and he made it a point to end each visit with prayer. Although my father's brain cancer continued to progress, the combination of Spirit-filled messages, healthy living, and Christlike medical care enabled my father to comprehend spiritual truths like never before. As a result, he developed a desire to rededicate his life to God, and although in the end my father's cancer took his life, it was not before he sealed his decision for the Lord. This experience helped me realize that the true purpose of medical ministry is not simply to restore health, but rather, to "prepare the way for the reception of the truth for this time."—Ellen White, *Medical Ministry*, p. 238.

When framed in the context of serving as an entering wedge for the gospel message, medical ministry takes on a new significance that differentiates it from purely humanitarian efforts. Ellen White states that "there will soon be no work done in ministerial lines but medical missionary work"—*Counsels on Health*, p. 533. This is why AMEN's mission is to motivate, train, and equip healthcare professionals to conduct effective medical ministry. Far from being just another avenue of ministry, the gospel medical missionary work is the only form of ministry that will continue until the end of time, and this means that everyone regardless of background needs to be involved. However, healthcare providers are naturally positioned to be the tip of this spear, and AMEN seeks to empower them to become catalysts

for medical ministry in their local churches and communities.

In order for the medical work to serve as an entering wedge for the gospel, we must never separate the practice of medicine and ministry. Jesus set this example by using acts of healing to communicate life-changing spiritual truths. The restoration of physical health served as a bridge that led people to accept Jesus as their personal Savior. If you separate the presentation of the gospel message from the medical work, medicine becomes a bridge to nowhere. In fact, Ellen White states that "when the gospel ministers and the medical missionary workers are not united, there is placed on our churches the worst evil that can be placed there."—*Medical Ministry*, p. 241. Christ did not come to this world to turn sick sinners into healthy sinners; He came to enable those who were dead in trespasses to live. We are called to do likewise, and that is why one of AMEN's primary objectives is to help healthcare providers and ministry workers to understand the importance of working together. Like twin blades in a pair of scissors, the one cannot function without the other, and whether it is through our free medical clinics, provider resources, or networking events, AMEN will always seek to blend medicine with ministry.

AMEN's success as an organization and reason for existing has always hinged on its ability to inspire healthcare professionals to dedicate their lives and careers to God. Whether you are a student just starting your training journey or a senior practitioner about to retire, AMEN's goal is to help you to walk in the footsteps of the Great Physician. My prayer is that in the midst of all the busy-ness and noise that constantly fill our lives, we will not lose sight of our higher calling to be healers of both body and soul. As we follow Christ's method and minister to the needs of others, we will find our own needs being met, and we will realize that the redemptive process of the gospel medical missionary work always begins with us first.



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Adventist Medical
Evangelism Network

PO Box 2528
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amen
Adventist Medical
Evangelism Network

EMAIL
conference@amensda.org