In one sense, the job of a medical professional is to do everything humanly possible to ensure a patient good physical health. Yet the roots of medicine link the role of a doctor with that of a Healer. This connection begs the consideration of whether there is a difference between a disease-absent state and the condition of one who has been truly healed. Though any difference may seem small, its significance is distinctly highlighted within the perspective of whole person care.

The idea behind whole person care is that a person is not just the sum of their physical symptoms. Instead, the whole person care mindset emphasizes that each patient is both a body and a soul possessing emotional, social, and spiritual needs that influence their health as well. If such needs are not adequately met, scientific studies suggest patients will show a greater likelihood of psychological distress, behavioral maladaptations, and even heightened physical markers for disease. Consequently, offering to address all of the underlying components of each patient’s lament is nothing short of providing good medical care.

Practically, whole person care will take various forms since each approach is directed primarily by the patient and what they wish to discuss. It is not a form of proselytizing a set of certain beliefs; rather, it is simply a recognition of the evidence that supports greater health for those who possess a reliant recognition of God. Ethically, initiating a discussion on spiritual and emotional needs becomes an obligation since it could yield better results for patients burdened by stress or who possess ineffective coping strategies. Many of these patients are open to exploring the possibility of finding relief through gaining a clearer perspective on God and His plan for their lives. For patients with this desire, the healing that occurs can go much deeper than addressing mere physical symptoms; it touches on the universal human need for healing at the core level of one’s soul.

Jesus himself demonstrated a concern for a person’s need for deeper healing. Yet today’s prevailing medical culture is often no more focused on this need than the Samaritan woman he met roughly two thousand years ago at the well. While she only considered a potential physical solution to her thirst, Jesus settled for nothing less than providing her with the spiritual solution. He offered her life-giving water to bring freedom and peace in her soul. The challenge and privilege for medical caregivers today is the same. While a patient’s physical need is real, holistic healing can only be achieved by the regeneration of the inner being, as is best accomplished through trusting in God’s grace.
The METS Conference

The preceptorship kicked off with a week long conference that was attended by healthcare professionals and students. The conference laid the foundation for the practice of whole person care by examining various topics, including: having a “kingdom mentality,” being called for a purpose, and living a Spirit-filled life.

Conference speakers shared encouraging stories about their own practice of spiritual care. Judy Hunt’s stories demonstrated how a little faithfulness can transform an entire town. Georgia Cohen taught us how to break down religious and cultural barriers by focusing on a relationship with Christ rather than on religion itself.

Spiritual Care has been shown to be so effective that it is even mandated by the Joint Commission on the Accreditation of Healthcare Organizations. Often patients’ medical problems result from destructive behaviors which result from faulty beliefs about themselves and false worldviews. Spiritual care addresses these deeper issues of beliefs and worldviews. As patients’ eyes are opened to their purpose in life, it empowers them to overcome unhealthy behaviors.

The conference culminated with a practicum during which conference members went to the units of Loma Linda Medical Center and took spiritual histories of patients. These histories included probing questions such as, “How has your illness affected the way you see yourself?” and “Where do you see God in your illness?” Conference members were surprised and encouraged to discover how open patients were when discussing these matters. Many members were excited to begin practicing spiritual care when they returned home.

A Sampling of Speakers

Suzi Snyder, MD served as a medical missionary to Kenya with her family for many years. She addressed student’s curiosities about pursuing long-term missions.

Yang Chen, MD is the founder of the Medical Strategic Network (MSN). He stressed the importance of discipleship and shared his amazing testimony of his battle with lung cancer.

Rick Langer, PhD has served as an adjunct professor at several universities. Rick showed how Christian principles, such as man being made in the image of God, applied to the field of bioethics.

Kent Hutcheson, PhD served as a missionary to Southeast Asia and was integral in the foundation of MSN. He emphasized how God can multiply small acts of faith beyond anything that we can imagine.

Dave Tellez, MD is a critical care doctor who founded a Christian clinic in Phoenix, AZ. He stressed the importance of seeing our workplace as a ministry.

Other speakers included Ana DePuy, Harvey Elder, Stacie Hocke, Bob Mason, Doug Richards, Jon Rittenhouse, Stan Shu, and Sidney Wu.

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“With the knowledge I have gained from this experience, I have been equipped to be a better soldier of faith!”

-Sam Southworth, RN
Indianapolis, Indiana

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“This preceptorship has definitely exceeded my expectations and goals.”

-Yayra Amenudzie, RN
Ontario, Canada

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“But in your hearts honor Christ the Lord as holy, always being prepared to make a defense to anyone who asks you for a reason for the hope that is in you; yet do it with gentleness and respect”

1 Peter 3:15
As practitioners we must be prepared to navigate the deep conversations that will arise when providing whole person care. Patients will be seeking truth, forgiveness, love, and acceptance. Some may ask, “What makes you, a physician, qualified to speak on spiritual matters?”

The reality is that we, as Christians, are a royal priesthood (1 Peter 2:9). We have been given the authority to act in Jesus’ name, and with the help of the Holy Spirit we are made able to do God’s work. As such, we become ministers in the vocation to which God has called us, whether in the medical field or otherwise. The more we understand the Gospel and are willing to trust and obey the Lord’s lead, the better able we are to share with patients and to meet them where they are at in their own spiritual walk.

Throughout the summer, theologians, pastors, and medical faculty covered the basics of faith in Christ as well as key components of the growth of God’s kingdom: discipleship and evangelism. We were taught how crucial it is to set aside time to study the Bible and to pray no matter how busy our schedules become. The lectures, combined with shadowing doctors and time in the hospital, helped us grasp the reality of our callings to medicine and revealed to us just how relevant our faith is to our own careers.

The intentionality of the program and the rigorous schedule yielded close bonds between students. We learned the value of unity in the Body of Christ and built up one another as brothers and sisters. It was a blessing to see how God worked uniquely in each individual, every person having different life experiences to share. The friendships formed will serve as a valuable support network in the years to come. This loving and uplifting community was formed in the context of our daily fellowship with one another. For example:

- Worshipping and praying together at both scheduled and spontaneous times
- Going into the hospital “two by two” to speak to patients
- Attending small group meetings, where we each shared our life’s story and discussed the book “Search for Significance,” by Robert McGee
- Making personal mail boxes in which we could leave notes for one another
- Serving on committees to coordinate various activities of the preceptorship
- Going on adventures as a group to give our brains a break

“And let us consider how we may spur one another on toward love and good deeds.” Hebrews 10:24

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“God used this preceptorship to confirm His purpose for my life: to be a nurse with a Kingdom mentality.”
-Laurie Fiess, RN
Stockton, New Jersey

“It was so encouraging to be surrounded by Christ-followers who truly wanted to serve God with their lives.”
-Danielle Brothers, wife of a medical student
Loma Linda, California

“God has taught me so much about the freedom I have in Christ’s sacrifice for us.”
-Ann Oh, dental student
Cleveland, Ohio

“I can’t wait to go back to school and share what I’ve learned!”
-Kristen Steele, physician assistant student
Vincennes, Indiana
“Iron sharpens iron, and I think that praying together and encouraging one another has been so refreshing as we realize we’re all in this for God’s glory. Friendships with the doctors and staff in the METS program as well as with the students have made me realize how vital each member of the body of Christ is…God has used the friendships, personal growth, and experience facilitated by the preceptorship to make a significant impact on my life… I am committed to being used by the Lord to make a return on it for God’s kingdom.”

-Brad Morris, medical student
Atlanta, Georgia

The Spectrum of Preceptorship Students:
9 Doctors in training
8 Future RN’s
3 Physician Assistant students
2 Pharmacy majors
1 Aspiring Dentist
1 student of Physical Therapy
1 Pupil of Psychology
1 Teacher and Supportive Wife

“How beautiful are the feet of those who preach the good news!”
Romans 10: 15

“I’ve never felt more loved than I did in these precious weeks.”
-Helena Torres, pharmacy student
Indianapolis, Indiana

“This really is a summer that lasts a lifetime. Through this preceptorship, God has taught me more about himself and how to make a medical practice a medical ministry.”

-Adam Keesling, medical student
Wichita, Kansas

“The METS preceptorship has truly added to my Christian walk. It has deepened my understanding of God’s love. I am excited to continue following Christ’s leading in my interactions with patients.”

-Rachel Jones, medical student
Loma Linda, California

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