

# SOWING & REAPING

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CREATING GOSPEL OPPORTUNITIES THROUGH MEDICINE

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# A WORD FROM THE DIRECTOR

Matthew 4:23 provides this summary of our Savior's Galilean ministry: "And Jesus went about all Galilee, teaching in their synagogues, and preaching the Gospel of the kingdom, and healing all manner of sickness and all manner of disease among the people" (KJV). This verse tells us that Christ's ministry was itinerant ("went about"), verbal ("teaching ... and preaching"), and physical ("healing"). The next verse reveals that His healing ministry brought crowds near to Christ: "The news about Him spread throughout all Syria; and they brought to Him all who were ill, those suffering with various diseases and pains" (Matthew 4:24, NASB).

On one specific occasion after Jesus healed a leper, "... the news about Him was spreading even farther, and large crowds were gathering to hear Him and to be healed of their sicknesses" (Luke 5:15, NASB). Healing brought crowds both to *hear* and to *be healed*.

These texts and many others teach us that our Lord's boundless compassion extended to both spiritual *and* physical needs. He Himself combined the alleviation of physical suffering with the proclamation of the truth that brings eternal salvation. Many of God's servants still "go about" teaching, preaching, and bringing physical healing. Their fervent desire is to cure people's bodies and, through their loving and compassionate care to have the opportunity to introduce them to the One Who can heal—forever—the sin-sick soul.

This issue of *Sowing & Reaping* highlights medical missions. I had the privilege of interviewing Dr. Jack Mitchell, GFA's medical missions coordinator, for the first article. In the other articles, you will read of the Lord's use of medical missions to open doors in a restricted access nation and to be the first evangelistic step in the planting of churches in rural Zambia. The prayer column contains specific prayer requests from medical missionaries and medical team members to enable you to pray effectively for these outreaches.

May the Lord use this publication to stir *all* of us to pray and *some* of us to get involved personally in medical missions, so that multitudes might experience the love and compassion of Jesus and find salvation in Him.



**JON  
CROCKER**  
EXECUTIVE DIRECTOR





# A VISIT WITH THE DENTIST

## JON CROCKER INTERVIEWS DR. JACK MITCHELL

Dr. Jack Mitchell serves as GFA's medical missions coordinator. I had the privilege of interviewing him about his calling, the focus of GFA's medical missions program, and his vision for the future.

### How did the Lord call you into medical missions?

The Lord saved me in 1987. Shortly after that, for various reasons, I left the dental office where I had been working and began working in nursing homes using portable dental equipment. My wife and I were praying that the Lord would direct us to a way we could serve Him. Through Romans 1:16 God stirred my heart, and I told Him that I was willing to serve in whatever way He would direct, even if it meant giving up dentistry. At the time I was also using the portable equipment in my home to provide free care to traveling missionaries. In 1994 a missionary to Senegal asked if we could travel there to help because many were fearful of local dentists due to the increase in HIV. We didn't have a lot of money, but we prayed and the Lord provided. We enjoyed that month of ministry but thought we'd never do it again. The next year a missionary to Papua New Guinea made a similar request and we went. That trip was filled with difficulties, but we saw that we could trust the Lord to provide financially and overcome every obstacle as we followed His leading. We were also impressed there with how the Lord used dentistry to bring people into contact with the Gospel. We returned home convinced that God was calling us to full-time medical missions.

### How do you define medical missions?

Medical missions is the use of medicine to bring people

into contact with the Gospel. Many so-called medical missions aren't really missions. The Gospel must be the primary focus; otherwise, it's simply humanitarianism. That's not bad, but it's not *missions*.

### What are the goals of medical missions?

To help people with their physical needs, to bring them into contact with the Gospel so they will be saved or desire to know more, and to connect patients with local believers for follow-up and discipleship. We always partner with national believers or church-planting missionaries and try to help them fulfill the Great Commission.

### What are the benefits of using medicine in missions?

It gives an opportunity to interact with people on a personal level. Not only are we sharing the good news of a loving Savior, but we are also simultaneously showing His compassionate care in a tangible way. People's gratitude for physical care often leads to a greater openness to hear and consider our message. Another benefit is the access that medical missions gives to places that restrict traditional missionary activity. We once worked with a missionary

who had tried to get into a local health facility for ministry but had always been denied. When we planned to visit, the missionary inquired again and offered to bring a doctor and a dentist, and that facility opened its doors to us and even invited us to return in the future.

### What are some dangers in mixing medical work and evangelism?

Both historically and currently, the idea of medical missions has often degenerated into the "social Gospel," or as I've mentioned, into simple humanitarian aid. When

*"MEDICAL MISSIONS IS THE USE OF MEDICINE TO BRING PEOPLE INTO CONTACT WITH THE GOSPEL."*

medical professionals see these impoverished places with unspeakable suffering, we want to alleviate as much of that as possible. That's a wonderful instinct, but it sometimes shifts the focus from sharing the Gospel to treating as many people as possible. We must keep the Gospel central! This is a way to do what Jesus Himself did.

### **What brings you the most fulfillment as a medical missionary?**

By far the greatest joy is seeing people saved! People come to see the nurse, the dentist, or the doctor, but it's difficult to put into words the thrill when the person who brings a patient in says, "This person just accepted Christ as Savior." The Bible says there's joy in heaven. There's also joy in the dentist's office when someone gets saved as a result of a toothache! We are grateful to God to see long-term results of our short ministries. On several occasions our two-week medical trips have resulted in churches being planted. Another source of great joy is seeing team members, especially first-timers, learn what God can do through their medical training.

### **What medical missions opportunities are available through GFA?**

We offer several two-week trips each year to hold evangelistic clinics. We also have places with established medical ministries where we can send interns for six to eight weeks or short-term missionaries for one to two years. Of course, we're always looking for those who want to be involved full-time. We are thankful for many opportunities, but we could do more with more laborers!

### **What is your vision for GFA's medical missions program?**

If we had others who could lead in this area, we could offer more trips and even have two going at once. I'd love for those who are burdened for medical missions to think immediately of GFA as a place where they could participate in a medical ministry that keeps the focus on the Gospel.

View upcoming teams at [gfamissions.org/medical-missions](http://gfamissions.org/medical-missions). For more information or to express interest in medical missions, contact Jack Mitchell, DMD, at [drjack@gfamissions.org](mailto:drjack@gfamissions.org) or (978) 397-1693.



## HOW TO PRAY FOR TEAMS

Medical missions trips come with many, often overwhelming, logistical challenges. We depend on God's faithfulness to direct us and to smooth the way (1 Thessalonians 5:24; Proverbs 3:5-6). Intercessory prayer is also vitally important! Please pray for **discernment** about documentation, such as licensing, that each country requires for us to treat patients. Pray for **understanding** of the requirements for bringing medicines and supplies into the country. Ask God to give us **favor** with customs officials as we bring supplies. We need great **travel mercies** with smooth, on-time flights, connections of team members, and no lost luggage. Pray for **unity** in our teams, particularly that we may be a blessing to those we serve. Most importantly, pray for **Gospel proclamation**, that the Word would have free course and be powerfully proclaimed during clinic times.

BY

**DR. JACK**

**MITCHELL**

MEDICAL MISSIONS COORDINATOR





# THE BUDDHIST MONK'S TOOTHACHE

The idea of using healthcare to access countries resistant to Christian missionaries is not a new one. For hundreds of years, Christian medical professionals have been able to penetrate barriers to the Gospel set up by governments or religious leaders. Addressing the desperate physical needs of people, particularly in third-world countries, continues to be a key to entering locked doors with the Good News of Jesus Christ.

This was our experience when we ministered in a restricted access city of Southeast Asia that is 99% Buddhist. Some of the earliest American missionaries established a mission here in the 1800s but moved on saying it was a very difficult area. Around 200 years later, Bible students tried again, making no impact. Another Bible college student, Jon,<sup>1</sup> felt the Lord calling him there, and he too encountered severe persecution, resulting in his family being evicted five times.

In 2016 my husband, Jack Mitchell, took a survey trip with three other GFA missionaries, and he heard of Pastor Jon's effort to bring the Gospel to this people group. Contacting Pastor Jon, Dr. Jack asked if he could help by bringing a small dental team. The answer was a definite yes. Plans were made, and in 2019, Dr. Jack and I traveled to this foreboding city to assist Pastor Jon with his church-planting efforts.

A few believers had been reached through Pastor Jon's ministry, but they had all undergone tremendous persecution as well. Saul, a local fisherman, was one of them. He and his wife opened their home for a Bible study that Pastor Jon was teaching. Neighbors had come and heard the truth of the Gospel. Soon, though, word reached the headmen of the village and the resident Buddhist monk. These men came to Saul's home with shovels and began digging up the boundary marker to his property. Saul was told that if he continued to allow his home to be used for a Bible study, they would take his property from him. The Bible study ceased, ending this Gospel-sharing opportunity. Pastor Jon told us of this and of other thwarted attempts at evangelism in the area. We hoped that our dental ministry could somehow make a difference. Pastor Jon limited our ministry to six days in widely spaced villages around the city to keep a low profile. There had been strong opposition to the ministry in some of these locations in the past.

BY

**JENNIFER  
MITCHELL**

<sup>1</sup> Names have been changed to protect privacy.





**“WE PRAYED THAT PEOPLE WOULD HAVE TOOTHACHES SO THAT THEY WOULD BE COMPELLED TO COME FOR CARE AND WOULD HEAR THE GOSPEL MESSAGE!”**

As plans proceeded for the trip, Pastor Jon told Dr. Jack the people were so anti-Christian that he was afraid no one would come for care. It might be a wasted trip for us. So we did something we had never done before. We prayed that people would have toothaches so that they would be compelled to come for care and would hear the Gospel message!

On the first day of ministry, we went to Saul's modest home and began setting up our equipment upstairs in a loft room open on two sides to the elements. A few neighbors arrived seeking care. Pastor Jon began registering them as patients and began to share the Gospel with them. As we looked up, we saw men, headed by a Buddhist monk, coming through Saul's yard and entering the house downstairs. Pastor Jon looked at us and quietly said, "I'm not sure what is going to happen here." He was obviously concerned as they climbed the stairs to the loft. When they reached the top of the stairs, Pastor Jon asked if he could help them. We all held our breath. The monk spoke up and said, "I need to see the dentist!" A bad toothache had driven him to come to a Christian's home to seek care from a Christian dentist. Pastor Jon wrote down his name and the names

of the other men. He showed honor to the monk by telling him he would be the first patient seen. Pastor Jon then returned to the presentation of the Gospel that he had begun before the men arrived. The monk and the other men sat down and quietly listened to Pastor Jon present the Gospel message as they waited for treatment.

We were able to work there all day while the Gospel was shared. There was no resistance from the men who had once threatened to take Saul's property from him, and there was no resistance at any of the other clinic sites.

This is medical missions: compassionately addressing the physical needs of lost people in order to tell them of their spiritual need for salvation in Jesus Christ. Please pray that the Lord would raise up more doctors, nurses, and dentists who would use their training so the Gospel might go forth, even in restricted places.





# BUILDING TRUST THROUGH MEDICINE

In August of 2013, I entered the remote village of Chijayezo to gain permission to lead a Bible study with the hope of planting a church there. Upon gaining the proper permission from the chief and the village headman, I began to meet the people of the village. Each time I went to the village, I brought a notepad and a pen and asked to interview as many individuals as I could. As we sat under a tree, the interview time was used to find out important information pertinent to the person and the area around Chijayezo. As an outsider I needed to know who in Chijayezo was regarded as wise, educated, hardworking, friendly, etc. Typical questions would be, “When the chief comes, which ladies cook for him, and who is called to meet with him? Who typically has the best harvest, and who is good at caring for cows and pigs?” As I compiled my interviews, I noted which names kept appearing.

There were many obstacles that hindered me from having large crowds come to meet with me. People are skeptical of outsiders, they have no reason to trust what I am saying, and

many religious groups spread false stories. Fortunately, I had thought long about how I would cope with this. One month after first meeting the people of Chijayezo, I hosted a dental team led by Dr. Jack Mitchell. While Jack pulled teeth, I would sit under a tree and share the Gospel. As I met with people one on one, I would ask their names. Because I had done these interviews, I already had a list of the most respected people in the area. When I met someone whose name was on my list, I already knew much about him or her. This helped me talk to the person intelligently and invite him or her to join our Bible study.

On December 1, 2013, we held our first official church service as Calvary Baptist of Chijayezo. There were 27 people present. The majority of the people who had been pointed out to me were the most respected people in the village. Having these individuals as a part of our ministry convinced others in the community that it was all right for them to come. Nine years later we have over 120 members in the church in a village of only 250 people.





We continue to use medical missions as a means of growing the church and seeing new works started. In 2017 we hosted a medical team at the church site in Chijayezo. Our people now began to assist me in the work. Members were busy doing evangelism, interpreting, and cooking for those who were working. The medical team used their abilities to share the love of Christ by doing what I cannot do. It has been well said that, “The Gospel is only Good News if it gets there in time.” People are helped physically, which gives me more opportunity to help them by sharing the Gospel and teaching them the Bible.

A month after the 2017 team left, a small group of leaders from the village of Muma attended a Sunday morning service at Chijayezo. They had come to ask me to begin a work in their community. They invited me to come and see the village and meet the people

there. When I arrived, 110 adults were waiting to greet me. I began a Bible study that very day and started interviewing people to gather information. Five months later we hosted a medical team on property that the village had given to me to start Calvary Baptist of Muma. Today this church has over 120 members as well.

Since 2013 we have hosted nine medical and dental teams and have seen over 5,000 patients, all who have heard the Gospel presented. The church people are thrilled to host these teams and continue to benefit from the large crowds that a medical team can draw. “And there followed him great multitudes of people from Galilee, and from Decapolis, and from Jerusalem, and from Judaea, and from beyond Jordan” (Matthew 4:25, KJV).

***“THE GOSPEL IS ONLY GOOD NEWS  
IF IT GETS THERE IN TIME.”***



BY  
**TODD  
BEAMAN**  
MISSIONARY TO ZAMBIA





# PRAY FOR MEDICAL MISSIONARIES

## **Carol Loescher, OBGYN in France**

Your prayers are felt tangibly on the mission field! I am involved in medical missions in several countries. I volunteer in the maternity department in a hospital in Togo, and that entails complicated deliveries and surgical interventions. In community settings, the lack of resources and treatment modalities makes it hard to diagnose and treat patients. Please pray for wisdom and skill to face the challenges. Funds for these endeavors are necessary, so pray that God would supply the needs. Travel is involved, so your prayers for safety are greatly appreciated. Most importantly, pray for spiritual healing in addition to physical improvement. The Gospel is our chief concern.

## **Rachel Langendorfer and Cynthia McGuire, Family Nurse Practitioners in Papua New Guinea**

Situated in the highlands of Papua New Guinea, South Simbu Baptist Medical Clinic seeks to open the doors for Gospel witness while meeting the physical needs of people in many surrounding communities. Pray for wisdom in evaluating and responding to a wide variety of medical conditions, in the context of limited resources, while taking each opportunity to demonstrate the love of Christ and highlight the power and sovereignty of God in each person's life. Pray for the patients and their families to listen closely to the Gospel message that is preached before clinic each day and for God to open their understanding to what it means to believe in Christ alone for salvation.

## **Luke Bachman, student nurse**

After traveling on summer medical missions teams to Africa (Togo 2021, Zambia 2022), I would ask people to pray two verses specifically:

“Finally, be strong in the Lord and in the strength of His might” (Ephesians 6:10, NASB).

This powerful exhortation prefaces the explanation of the armor God provides for each of His soldiers. My daily temptation on these trips is to trust in my own strength. Faith recognizes each challenge faced on the trip as primarily spiritual, no matter how it might appear in my own sight. Simply providing medical assistance to people has no intrinsic, eternal value, but when done through a Christ-centered medical missionary, it has great eternal value.

“Above all, keep fervent in your love for one another, because love covers a multitude of sins” (1 Peter 4:8, NASB).

One of my favorite highlights on each trip is rich fellowship with coworkers, missionaries, and nationals. The many conversations and relationships leave a lasting and formative impression on me. While exciting, these trips are no vacation. The often intense and tiring nature of them encourages a selfish and critical spirit toward those around me. Fervent love for one another is a daily need in these settings.







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