

From the Director's Desk-

Sometimes people who visit our work here in the Sierra Madre wonder how it is that members of the dozen or so Christian denominations who work here manage to live in relative peace. Considering all the denominational bickering that often occurs in the US, I am surprised how little rancor is found here.

Some researchers say that there are over 6,000 Christian denominations in the United States. Most of these denominations arose from a split from another denomination over some disagreement of doctrine or church policy. If divisiveness is our spiritual tradition, then how can forty persons from such differing backgrounds – from Mennonite to Pentecostal - manage to work together here in the Sierra.

I once had a pastor who said, “Any friend of Jesus is a friend of mine.....but boy does he have some strange friends.” That pastor is now head of a large mission agency focusing on the Muslim world. I don't think that it's an accident that someone with such a “tolerant” view of other Christians' theological beliefs should end up in missions. Christians tend to overlook denominational differences more readily on the mission field than off it. That is not to say that missionaries do not have strong personal theological opinions; my observation is that missionaries tend to be some of the most opinionated and theologically stubborn people that I know. But on the mission field denominational bickering is viewed as a luxury that often cannot be afforded.

There is a long history of interdenominational cooperation in missions. Henry Martyn, the famed linguist and Anglican missionary to India was greeted by Baptist missionary William Carey as he arrived in Calcutta in 1806. During the 19th century, the London Missionary Society was an interdenominational organization that sent missionaries such as Dr. David Livingston to the mission field. On the home front, Ruth Graham, the daughter of Presbyterian missionaries in China who baptized her as an infant, refused to be rebaptized as an adult despite marrying the most famous Baptist of our time: and that interdenominational alliance was certainly productive for the Kingdom.

It isn't that I think that theological differences between denominations aren't important; and I certainly don't buy into the current climate of political correctness which states that all opinions are equally valid. Often these differences speak to the very core of our individual faiths, and therefore can be very important to each Christian. However, on the mission field Christian workers tend to realize that there is a job to be done; and that bringing persons to a saving knowledge of Jesus Christ is primary, and convincing these same converts to embrace a particular denomination is secondary. “War breeds strange bedfellows”, and mission work is nothing less than war.

St. Augustine said, “In Essentials, unity. In non-essentials, liberty. In all things, love.” Missionaries do

tend to embrace this viewpoint, but it does raise the question as to what is “essential” and what is “non-essential”; and runs the very real risk of compromising one's faith in the name of unity. There are differences of beliefs that can be so important, that they constitute a legitimate cause to part ways. On a few occasions in the history of our mission, I have had to make the painful decision to dismiss a fellow worker because his beliefs had crossed a line to the point where they were affecting the quality of the work here and the unity of the believers; but this has been a rare event. As I have said, these denominational differences are important, and often represent the efforts of good minds grappling with the essence of the Christian faith. I love a rainy day discussion over coffee where I can defend the obvious superiority of my amillennial, Calvinistic, Covenant theology over those wimpy Armenian, Dispensationalist, post-tribber ideas that so many of my fellow workers have. But at the end of the day we close ranks and go back to the work of presenting Christ to a lost people. The time is short here on Earth, and I figure that I have an eternity of coffee drinking to figure out which denomination (if any) got it right.

Blessings - Michael Berkeley, M.D.

P.S. – for a list of what we think is “essential” please visit our website at [www.mexicomedical.org](http://www.mexicomedical.org) and go to the “What we believe” tab.

### *Birth Center Opens*

The Birth Center is open for business. June 25th saw the first birth attended at the center by midwife Shelley Rivera. The Birth Center serves as a training center for the Tarahumara midwife program in which Tarahumara women are trained to attend births in their own communities. At present, it is estimated that only 10% of Tarahumara births are attended by someone with any level of obstetrical training, which contributes to the Tarahumara having the highest maternal mortality rates in Mexico. Shelley and her co-workers plan to improve that dreadful statistic with a community based program aimed at training a corps of Tarahumara midwives.



*Shelley attends the first birth*

## OUR MISSION

Mexico Medical Missions strives to provide high quality integrated health care to the indigenous people of the Sierra Madre Mountains of Northern Mexico, proclaiming the transforming love of Jesus Christ.

This mission statement reflects our desire to imitate Jesus who once described His own ministry as, "The blind receive sight, the lame walk...the deaf hear... and the Good News is preached to the poor." Jesus always integrated the preaching of the Gospel with acts of love and mercy; and our prayer is that we could follow His example in word and deed.



**Mechanic Dave Hardin and the Compair 8**

Our new air ambulance has been in service since February. Already we have transported patients for two eye surgery outreaches and carried health teams to various remote villages. The immediate need is to rehabilitate many of the landing strips in the Sierra in order to use the plane to its full potential.



The well drilling program continues. Our last well in the community of Yeposo was a gusher - 30 gallons a minute of artesian flow from the well. A community struggling for water now has an abundance.



Orthopaedic surgeon Mike Berkeley continues to treat the bone and extremity problems of the indigenous people of the Sierra. Most problems that he sees are trauma, burns and congenital deformities.

## REFLECTION ON CHRISTIAN COMMITMENT

"No doubt the gospel is quite free, as free as the Victoria Cross, which anyone can have who is prepared to face the risks; but it means time, and pains, and concentrating all one's energies upon a mighty project. You will not stroll into Christlikeness with your hands in your pockets, shoving the door open with a careless shoulder. This is no hobby for one's leisure moments, taken up at intervals when we have nothing much to do, and put down and forgotten when our life grows full and interesting... It takes all one's strength, and all one's heart, and all one's mind, and all one's soul, given freely and recklessly and without restraint. This is a business for adventurous spirits....

... A. J. Gossip (1873-1954)



**Education is the basis of Community Health Evangelism**

## COMMUNITY HEALTH EVANGELISM TRAINING

Mexico Medical Missions is committed to implementing Community Health Evangelism (CHE) in the Sierra Madre. In May we sponsored a five day CHE course for our health workers which emphasized training Tarahumara workers to help us in reaching their own communities for Christ. For more information on CHE please visit [www.lifewind.org](http://www.lifewind.org).

### *What we're Praying For*

Here in the Sierra Madre, we have many tasks remaining for the rest of the year. The Birth Center is open, and Shelly Rivera is planning to expand the training program into more villages. But to succeed Shelly will need another midwife to help her in the work.

The hospital has a strategic decision to make. Since we began our work seven years ago, we have cared for Indians and Mexicans alike, but the increasing workload and small staff means that we may need to limit our services to just the Indigenous population who are far poorer than the Mexican community. This will be a difficult decision and needs to be approached thoughtfully and prayerfully.

The aviation program is off to a good start. The plane still requires a few modifications to completely adapt it to the high altitude, short runways that we must use in the Sierra Madre. The aircraft hangar is finished, but we still need to finish the living quarters of pilot Mark Egolf and mechanic Dave Hardin.

Dagoberto Gallaga, Carmen Reyes and Narcisso Cuevas, the three Mexican general practitioners that staff the hospital, do yeoman's service caring for the sick and injured patients that arrive here. But they do need the help of a pediatrician to assist with the care of the increasing number of sick children that we are seeing. We continue to search for a pediatrician to join us here in Samachique.

Implementing Community Health Evangelism programs remains the primary goal of the mission. We need more workers to join us in this effort if we are going to reach more communities with the Good News.