Sending Out a New Generation of Missionary Doctors

INSIDE: ANGOLA | KENYA | MEXICO | NEPAL | NIGER

A MINISTRY of SAMARITAN’S PURSE®
DEAR FRIEND

THIS YEAR our Post-Residency Program reached a milestone as we have now placed more than 200 doctors and dentists on the mission field since 2004. God has given them the desire to use their medical skills for His glory, and we are excited for the opportunity to help them fulfill that calling.

During their two-year assignments, the Post-Residents and their families will immerse themselves in new cultures. They will be stretched, both professionally and spiritually. And the experience of practicing medicine in an overseas mission hospital will equip them for the next step of signing on with a long-term sending agency.

Looking for missionaries who happen to be doctors is our primary aim, as we send forth Christian men and women who will attend to the well-being of their patients’ souls, as well as their physical health. As an orthopedic surgeon serving at Tenwek Hospital in Kenya (see page 15) expressed so eloquently: “The relationships I build with my patients and residents, and the opportunity to share Christ’s love in the midst of challenging circumstances, will be the true fruit of the ministry.”

Is the Post-Residency Program the next step for you? I encourage you to seek God’s will and to be open to the amazing ways He can use you to impact lives in Jesus’ Name.

“...His own special people, that you may proclaim the praises of Him who called you out of darkness into His marvelous light” (1 Peter 2:9). God bless you.

Sincerely,

Franklin Graham
President, Samaritan’s Purse

“He heals the brokenhearted and binds up their wounds.”
—PSALM 147:3

Franklin Graham accompanies Dr. Stephen Kelley on a tour of the new Memorial Christian Hospital, a World Medical Mission partner hospital in Bangladesh.

“FAITHFULLY SERVING AMONG THE TARAHUMARA”

Franklin Graham

HOW DO I GET INVOLVED?

Listen to our podcast featuring Post-Residents who are preparing to serve overseas:

samaritanspurse.org/postresidencyprogrampodcast

SAFETY:

COVER PHOTO: In Galmi, Niger, Dr. Katie Hoyt wants to help improve the health of mothers and their babies who often lack adequate nutrition.
POST-RESIDENCY PROGRAM

Calling Missionaries Who Happen to Be Doctors

When World Medical Mission began sending Christian doctors on short-term service trips in the late 1970s, we envisioned supporting undermanned mission hospitals with a steady stream of medical volunteers. The volunteers would take a few weeks away from their busy practices back home and donate their skills to treat patients and train personnel overseas. Sometimes they filled in for missionary doctors who were on furlough. Their contribution to the physical and spiritual care of the patients was highly valued, but a great void in staffing persisted.

That growing need became apparent as mission organizations were unable to recruit young doctors to replace career missionary doctors who were retiring. As their staffing numbers dwindled, mission hospitals were faced with difficult decisions to scale down services, turn their facilities over to the government, or even shutter their doors altogether.

The Post-Residency Program was borne out of this need. We realized that many young doctors who felt called to serve on the mission field delayed that decision. Debt was a primary reason. Another was the desire to gain experience and become established in their areas of specialty. Unfortunately, most of these physicians never made it to foreign soil.

After much discussion and prayer, the leadership of World Medical Mission and Samaritan’s Purse sought to develop a program that would pave the way for doctors fresh out of residency to go almost immediately to the mission field. The two-year assignment would enable them to get a feel for missionary life, and the experience would help them determine if this was the direction they should take for the rest of their medical careers.

In 2004, we sent our first Post-Resident to serve at a children’s hospital in Afghanistan. Since then, we have placed more than 200 physicians and dentists in 39 hospitals in 31 countries.

The program sharpened its focus several years ago when a career missionary doctor in Kenya brought to our attention that our aim was a bit short-sighted.

“We were informed that the real need to keep mission hospitals operating depended on full-time doctors, not two-year doctors,” said Dr. Richard Furman, co-founder of World Medical Mission. “They appreciated the two-year help, but the real need was for physicians who would give their lives for ministry.”

After some soul-searching, the Post-Residency Program was tweaked to focus on doctors and dentists who are committed to full-time missionary service. That calling entails being a servant of Christ and minister of the Gospel first and foremost.

“Our hope is that doctors will fall in love with the people they serve and the work they are doing,” said Post-Residency Program Manager Gail Gambill. “We want this experience to be a bridge to a career. Sending skilled doctors who will pray with their patients and share the love of Christ is invaluable.”

Praise God, the number of young medical professionals who remain on the field after completing the program has risen to 83 percent!

During their service with Samaritan’s Purse, physicians receive a stipend and other financial assistance. Our staff also help with the transition to a long-term mission sending agency.

“Our doctors and dentists and their families are part of our family. We are here to serve them as they serve their patients on the mission field,” Gambill added. “We continue to hear from past Post-Residents who tell us about new additions to their family or contact us for prayer.”

In 2020, 16 new Post-Residents were preparing to serve at mission hospitals in Africa, Asia, and the South Pacific. One of those doctors, Ben Roose, is a general surgeon who will be going to Kibuye Hope Hospital in Burundi.

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Where Have Our Post-Residents Served?

COUNTRIES AND HOSPITALS

AFGHANISTAN
CURE International Hospital—Kabul (closed)
Hope Family Medicine

ANGOLA
Centro Evangelico de Medicina do Lubango
Kalukembe Hospital

BANGLADESH
Memorial Christian Hospital

BURUNDI
Kibuye Hope Hospital

CAMEROON
Mbingo Baptist Hospital

DEMOCRATIC REPUBLIC OF THE CONGO
CME Nyankunde Hospital
Vanga Hospital

ECUADOR
Hospital Vozandes—Shell (closed)

ETHIOPIA
Myeongdang Christian Medical Center Soddo Christian Hospital

GABON
Bengolo Hospital

GHANA
Baptist Medical Centre-Nalerigu

GUATEMALA
Hospital Shalem

HONDURAS
Hospital Loma de Luz

KENYA
Chogoria Hospital
Kapsowar Hospital
Kijabe Hospital
Tenwek Hospital

LIBERIA
ELWA Hospital

MACAU
Hope Medical Group

MEXICO
Hospital Mision Tarahumara

NEPAL
United Mission Hospital Tansen

NIGER
Gulmi Hospital

NIGERIA
ECWA Hospital Egbe

PAPUA NEW GUINEA
Kadija Nazarene Hospital

PERU
Diospi Suyana Hospital
La Fuente Centro de Salud Integral

REPUBLIC OF THE CONGO
Pioneer Christian Hospital

UGANDA
Uganda Heart Institute

TOGO
Hospital Baptiste Biblique
Hospital of Hope

ZAMBIA
Mukinge Mission Hospital

ZIMBABWE
Karanda Mission Hospital

“The Spirit of the Lord God is upon Me, because the Lord has anointed Me to preach good tidings to the poor; He has sent Me to heal the brokenhearted.”

—ISAIAH 61:1

SINCE 2004
Drs. Willy and Jessee Bustinza followed God’s call to the remote, rugged mountains of Mexico.

FAITHFULLY SERVING AMONG THE TARAHUMARA
Jesse was a child living in the jungle of southern Mexico when God first planted in her heart the seeds of medical missions. She became burdened for those without access to quality healthcare as she watched her missionary parents, who served with Habitat for Humanity, care for people who often showed up on their doorstep sick or injured and needing a ride to the nearest medical facility several hours away.

Meanwhile, God was also working in Willy’s heart and growing in him a desire for international missions through the spiritual legacy of his family. After his father planted churches throughout Peru, he dreamed of starting a Christian school for children in poverty. Willy’s father met Jesse’s parents in Peru, before they moved to Mexico, and through their work with Habitat for Humanity, they helped him build a small cinder block school. That’s when Willy and Jesse met for the first time—as 3- and 5-year-olds in Peru. They would remeet again years later when Jesse went to Peru on a mission trip, and God began joining their hearts together for an incredible journey.

COMING HOME
Willy and Jesse went to college together in Oklahoma and married soon after. They were each working in their chosen area of medicine, yet neither of them could shake the sense that God wanted them in medical missions.

So, the Bustinzas enrolled together in medical school at Oklahoma State University—another step on their journey of walking in obedience and faith. “Our story shows the Lord in every step of the way,” Willy said.

After the Bustinzas finished medical school, they applied and were accepted to the Samaritan’s Purse Post-Residency Program. They were the first Post-Residents at Hospital Mision Tarahumara in Mexico’s Copper Canyon in Chihuahua State, and the only physicians in their specialties in the entire Canyon. Willy is a general surgeon and Jesse is a pediatrician.

For the Bustinzas, returning to Latin America was like a homecoming, and for Jesse especially, as her parents have spent nearly 20 years serving among the indigenous Tarahumara people.

SERVING THE UNREACHED
The Tarahumara live in isolated villages, caves, and cliffs tucked away and hidden deep within the Sierra Madre. They fled to the mountains in the 16th century to escape conquest by the Spaniards and have remained in their isolated living conditions ever since.

“People don’t seek medical care early on. Health literacy is very poor,” Willy said. “They see the hospital as a last resort.”

The Copper Canyon has one of the highest malnutrition rates in the world, with the mortality rate for children younger than age 5 at nearly 50 percent. Heartbreakers by the deadly consequences of malnutrition, Willy and Jesse invited a local Tarahumara believer to join their team and help them work with malnourished children in the hospital. They provide backpacks full of supplies for these children and their families that include nutritional supplements, school supplies, toys, and personal hygiene items.

Nutrition education is also an important focus during their medical and evangelistic outreaches to people living in remote villages who cannot come to them. To reach a healthcare facility, the Tarahumara often must walk for hours—or even several days—along treacherous and rugged mountain terrain. Even then, they cannot financially afford medical care.

Isolated living conditions also make Gospel access difficult, as most Tarahumara have never heard about Jesus Christ and hold to strong animistic beliefs. “The Tarahumara have lived in fear from outsiders and endured lots of oppression,” Jesse said. “There is a lot of spiritual darkness and bondage.”

The Good News is often shared in both Spanish and Tarahumara at Hospital Mision Tarahumara. Because of an illiteracy rate of about 98 percent, patients also receive an MP3 player with Christian songs and portions of the Bible. To date, more than 8,000 MP3 players have been delivered to families in over 200 remote villages across the Copper Canyon. “Many Tarahumara are listening to the Gospel message for the very first time,” Jesse said.

“Isolated living conditions make Gospel access difficult, as most Tarahumara have never heard about Jesus Christ and hold to strong animistic beliefs.”

Willy and Jesse have also launched an evangelism project in partnership with Samaritan’s Purse and Hospital Mision Tarahumara. The project provides funds for electronic tablets that are loaded with Bible stories and videos in the local dialect and are shown to Tarahumara hospital patients and those who attend village outreaches.
Faithfully Serving Among the Tarahumara

GOD AT WORK

The Bustinzas’ steadfast faith in the Lord carries them through difficult times and medical emergencies—which are frequent in this isolated part of the world. On one occasion, a Tarahumara woman in her 30s arrived with a rapidly growing basketball-sized tumor on her right femur. She explained to hospital staff that all of her family and neighbors had deemed her cursed.

When the woman could no longer walk she became desperate, spending all her money for herbal remedies that did nothing to stop the tumor’s growth. She had to send her 9-year-old son to the market to try and sell her handwoven baskets so they would have money for food.

The Bustinzas and the hospital staff praised God after surgery removed all of the tumor and the young woman was able to return home. She now has a second chance at life, and she is able to care for her son and to sell her handicrafts.

“These surgeries are literally life-changing,” Jessee said. “Many patients arrive at Hospital Mission Tarahumara in search of physical healing, but also leave with a deeper inner healing after an encounter with a loving God.”

The Bustinzas continue to devote their lives to serving God in remote Mexico because their heart’s desire is to see the Tarahumara come to faith in Jesus Christ. Please pray for Willy and Jessee, and for the many Tarahumara people who still need to hear that God loves them.

The Tarahumara live in isolated villages, caves, and cliffs tucked away in the Sierra Madre. “There is a lot of spiritual darkness and bondage,” said Jessee.
Bearing the True Fruit of Ministry

BY DR. JOHN WESTON

Dr. John Weston is an orthopedic surgeon serving through the Post-Residency Program at Tenwek Hospital in Kenya with his wife, Ali, and their children, Gabriel and Grace.

We often imagined how our work and lives would look in the future. As we were preparing to graduate from medical school, we asked ourselves, "What will our lives look like, and how will we pursue our interests?" We knew we wanted to have families, but beyond that, neither of us knew what that would mean for our careers. Ali went to physician’s assistant school and I to medical school at the University of Toledo, and we worked hard toward our degrees.

Around that time, I revisited a blog which I found from the Bearing Ministry. It chronicled the story of Dan Galat and his family as he served as a missionary orthopedic surgeon in Kenya. I emailed Dan, who is himself a former Mayo Clinic resident. He encouraged us to visit, and in 2016, Ali and I both traveled to Kenya. Tenwek and Kijabe have orthopedic residencies designed to train orthopedic surgeons who are also Christian disciples and are committed to serving in a mission hospital in sub-Saharan Africa following completion of their training. During our time in Kenya, we sensed God’s call on our lives to serve at one of these hospitals in a full-time capacity.

During this time, God steered us toward 2 Corinthians 4 and 5, where Paul explains his motivations for being a missionary. A few verses in particular impacted me, including 2 Corinthians 5:14-15: “For Christ’s love compels us, since we have received a ministry, that as the Spirit by the resurrection of Jesus Christ has made us ministers of the new covenant, how is it that you thus do not minister?” (HCSB).

God reminded me that He gave me the ability to become an orthopedic surgeon so that I could serve Him and His kingdom, not just pursue my own interests. Paul explains his motivations for being a missionary. A few verses in particular impacted me, including 2 Corinthians 5:14-15: “For Christ's love compels us, since we have received a ministry, that as the Spirit by the resurrection of Jesus Christ has made us ministers of the new covenant, how is it that you thus do not minister?” (HCSB).

God reminded me that He gave me the ability to become an orthopedic surgeon so that I could serve Him and His kingdom, not just pursue my own interests. As Ali and I prayed about the implications of this, we once again sensed God’s call toward cross-cultural missions. Around that time, I revisited a blog which had captured my attention in medical school. It chronicled the story of Dan Galat and his family as he served as a missionary orthopedic surgeon in Kenya. I emailed Dan, who is himself a former Mayo Clinic resident. He encouraged us to visit, and in 2016, Ali and I both traveled to Kenya.

In our 2016 trip, we spent one week with Dan at Kijabe Hospital, and then another week at Tenwek Hospital in Bomet, where Dan spent his first seven years of ministry. The really neat thing about both of these hospitals is that not only do they provide desperately needed healthcare in Jesus’ Name, but they are also teaching hospitals. Both Tenwek and Kijabe have orthopedic residency programs designed to train orthopedic surgeons who are also Christian disciples and are committed to serving in a mission hospital in sub-Saharan Africa following completion of their training.

During our time in Kenya, we sensed God’s call on our lives to serve at one of these hospitals in a full-time capacity. God has since confirmed that call in numerous ways, and provided an avenue for us to serve at Tenwek through the Post-Residency Program. This two-year program is designed to transition graduating residents and fellows directly to the mission field following completion of their medical training.

My role at the hospital consists of providing much needed orthopedic surgical care to the patients at Tenwek, and teaching and discipling residents in the process. Tenwek treats many patients affected by orthopedic trauma, including a large number of patients severely injured in motor vehicle accidents. Thus, much of my time is spent providing fracture care. There is also a growing demand for hip and knee arthroplasty, and I hope to make this a significant portion of my practice as well. However, at the end of the day, the most important aspect of my job will not be creating perfect X-rays or good orthopedic outcomes (although I really like both of those things). In reality, the relationships I build with my patients and residents, and the opportunities to share Christ’s love in the midst of challenging circumstances, will be the true fruit of the ministry.
If you ask Matthew and Liberty Harris about the latest “coincidence” in their lives, they will respond with a big chuckle. It seems that one improbable event after another has shaped the course of their lives. Matthew’s parents are pastors and Liberty’s are missionaries, and their ministry work has taken them to far-flung places all over the world. Yet their lives intersected before they were even born, as Matthew’s father and Liberty’s mother grew up on the same street in Texarkana, Texas.

“We don’t quite remember the first time we met, but the Lord saw fit to bring us back together when I was just starting out in university and Liberty was finishing up high school,” said Matthew. “Our friendship formed from there.”

With Matthew living in Oklahoma and Liberty in Alberta, Canada, their long-distance relationship continued and led to marriage five years later. During that time, God was also preparing them for service in medical missions.

“It’s really incalculable the series of relationships, churches, lay leaders, physician mentors, spiritual mentors, and opportunities that God has intersected with our path over the years to direct our steps and weave the story of our lives,” Matthew said.

Matthew completed medical school at the University of Arkansas, and the young couple moved to Philadelphia for Matthew to pursue training in general surgery. Although they knew overseas missions was in their future, they didn’t know what next step to take after residency—until they were introduced to World Medical Mission’s Post-Residency Program.

Neither had ever traveled to the Himalayas, but for some inexplicable reason God had time and time again placed mental pictures in both of their hearts of the Sherpa/Nepali/Tibetan peoples. Gradually they began to realize that God was sending them a message.

“We were ecstatic when we saw that one of the World Medical Mission partner hospitals was in Tansen, Nepal. For us, this was not coincidence, but absolute confirmation,” recalls Matthew.

In the Post-Residency Program application, the Harrises wrote their three

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preferred placement countries—“Nepal, Nepal, Nepal.”

As the saying goes, the rest is history, and Dr. Matthew and Liberty Harris arrived at United Mission Hospital Tansen in January 2020. The facility was established in the late 1950s and is located about 185 miles west of the capital city of Kathmandu.

‘A GATEWAY TO YOUR CALLING’

Healthcare in rural Nepal presented Matthew with new challenges, as he witnessed cases he had previously only read about in textbooks. Common medical events include traumatic fractures from people falling out of trees, severe burns from open household fires, and farming-related injuries such as getting clothing or body parts caught in rice culling machines.

“There was a man recently attacked by a leopard in a neighboring region. He amazingly fended off the animal with a large stone and his bare hands!” Matthew said. “He lived to tell about it and came to our hospital for treatment of his superficial wounds. He had a full recovery.”

Although COVID-19 has paused many of the community outreach activities, Liberty has found her niche volunteering in an after-school program. Due to social distancing, their current classroom is a hillside behind Tansen’s nursing school. During normal circumstances, the couple say the hospital compound is a “rich community of life” where families gather regularly for dinners, birthday celebrations, and fellowship. They also attend a Nepali church and take turns hosting Bible studies for the missionary and Nepali doctors.

Acclimating to a new culture and language is an exciting adventure, and the Harrises express deep gratitude to the Post-Residency Program staff for helping them to navigate an array of hurdles successfully. The staff work closely with the Post-Residents, matching their medical specialties to hospitals who need their expertise and guiding them in the logistical process. They also provide financial assistance and undergird the doctors and their families with prayer and emotional support.

“As missionaries we can pour our hearts into the work, knowing that Samaritan’s Purse has our back,” explained Matthew. “My encouragement to any young doctor interested in pursuing medical missions is to consider the Post-Residency Program as a gateway to your calling. I believe the program makes it possible for young missionary doctors to walk, so that one day they will be able to run.”

For Matthew and Liberty, their journey of service has just begun, and they look forward to experiencing God’s overflowing grace as they follow Him in obedience.

“I’m in awe that the Lord would allow us to be here in this amazing place to serve Him, to do what we love,” reflected Matthew, “and then I fall in love with Nepal and its people all over again.”

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Below: A stunning view from Pokhara, Nepal, of the rugged Himalayan Mountains. Below Right: A friend’s baby sleeps peacefully in Liberty’s arms. Matthew visits with a burn patient. He has treated injuries caused by everything from home accidents to wild animal attacks.

Below Left and Above: Hinduism is practiced by 82% of Nepal’s population. Buddhists make up an additional 9% of the population, while Muslims comprise 4%, and Christians 1.5%.
Long before they met during residency training in Fort Worth, Texas, Steve and Katie Hoyt felt called to serve in Christian ministry. However, neither had planned to go into the medical field.

Steve was studying to become a pastor. Katie was interested in social work.

“Someone gave me the book Jesus MD by David Stevens. God showed me through that book I could help people AND share the Gospel,” said Steve. “I changed to pre-medical and went on a few trips to Africa to experience missions. I decided to do family medicine, to have as broad a training as possible.”

Katie switched to medicine as well, specializing in obstetrics and gynecology. After discovering they both felt called to the mission field, the young couple turned to the Post-Residency Program for help getting there.

“We highlighted Galmi as an option because we felt like God was drawing us there. He had put it in our hearts, one, to be in an unreached place, and second, where there was high maternal mortality. My skills could be used in that way,” Katie said.

The Hoyts moved to Niger in January 2018 and quickly realized the immense need for those skills. In a country of 23 million, there is only one doctor per 30,000 people.

Galmi Hospital is a 184-bed facility in the southern part of the country that primarily serves people from the Hausa, Fulani, and other regional tribes. Many of the patients come for treatment of HIV or diabetes.

“Patients will wait days to see you, because there is such a shortage of good care. And there’s an even bigger need for the Good News,” said Steve.

One of those patients was a teenage girl named Adaobi (name changed). An insulin-dependent diabetic, she had been in the hospital for an extended stay receiving treatment. Her family took her home when her condition stabilized, but had to bring her back a month later. With no electricity in their village, they were unable to properly store Adaobi’s insulin in the desert heat.

The staff taught her how to give herself insulin. They also devised a way for Adaobi’s family to keep the medication cool at home by placing it in a plastic bag in a jar of water, wrapped in a wet cloth. Adaobi has to return monthly to receive a fresh supply of insulin at the outpatient clinic.

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Nigerien villagers gather outside to hear a presentation of the Gospel by a local pastor and some of the Galmi Hospital missionary medical staff, including Drs. Glenn Maas and Steve Hoyt (pictured far left).
about Jesus. As they came to understand the Gospel message, both prayed to receive Him as their Savior. “We want to follow Jesus,” they said. Upon discharge, the hospital gave them a solar-powered radio (fitted with SD cards that include the Bible in Hausa and the “JESUS” film) to help their family and neighbors learn more about Jesus. Adaobi especially prays that her father will come to faith in Jesus too.

Later in 2018, Dr. Glenn Maas, his wife, Sonja, and their four children joined the Hoyts at Galmi. They are among a growing group of missionary doctors who are coming to the hospital through the Post-Residency Program.

One general surgeon arrived in 2020, and World Medical Mission is sending two physician couples to Galmi in 2021. In addition, the hospital staff includes two doctors who are graduates of the Post-Residency Program and have been serving long-term for several years.

“I’m a big fan of the program,” said Stephen Montgomery, the retired director of Galmi Hospital. “From our perspective, it’s just fabulous to get young doctors fresh out of training, fresh out of residency, out into a field placement, where they can bond and explore missionary medicine in a developing world context.”

Maas was not accustomed to the degree of suffering and death he saw upon his arrival at Galmi. The family medicine physician/obstetrician says it’s still hard to accept.

Of his first impressions, Maas says, “I was put in charge of the emergency room. In America, ER was not something I liked. I don’t like to see the patients waiting. Wow, the need here is beyond the ability of any human to meet, ever.”

But Maas is encouraged as he helps to bring new life into the world and to venture out with Steve Hoyt and Hausa translators into nearby villages to visit former patients. Their outreach has borne fruit as seeds are planted for the Gospel.

Dr. Katie Hoyt performs an ultrasound on a mother-to-be. She specializes in obstetrics and gynecology at Galmi Hospital.

> “It’s just fabulous to get young doctors fresh out of training, fresh out of residency, out into a field placement, where they can bond and explore missionary medicine in a developing world context.”
Bringing the Good News to Galmi

On one occasion their team drew a crowd as the village elders beckoned them to sit down and share Bible stories. As they spoke of Jesus raising Lazarus from the dead, one of the elders commented that he had heard that Biblical account during a stay he had had in the hospital. Others in the crowd nodded. The team continued to share the Good News and invited the people to follow Christ.

With their two-year terms now completed, the Maases and the Hoyts feel God is calling them to return to the mission field, this time on a long-term basis. Both families are currently in the United States raising support.

“God gave us a strong vision and calling. This is not just a passing phase that we’ll get out of our system, come back home, and settle into the American dream,” Katie said. “God can always change the plan, but as far as we know, this is what He has called us to do.”

Dr. Megill came to Galmi 11 years ago through World Medical Mission’s Post-Residency Program.

Dr. Maas attends to a patient in the women’s ward. He is grateful for the opportunity to be a witness for Christ in the hospital and in surrounding communities.
Dr. Lena Gamble always knew that someday she would become a medical missionary. "My dream is to travel about in a Jeep with my black bag, heading to places off the beaten path and loving the people I meet while caring for their physical needs," she wrote in her application to the Post-Residency Program. "I have prayed and prayed over this dream, and I know that this is a desire that God has placed into my heart."

Kalukembe, Angola, is figuratively and literally a world away from Gamble’s hometown of Washington, D.C. Although she likes the high energy of city life, she welcomed the escape from asphalt and traffic gridlock.

Since December 2019, the family medicine physician has served at Kalukembe Hospital in the southwestern part of the country, and more recently at Centro Evangelico de Medicina do Lubango (CEML), where she was asked to set up a COVID-19 isolation and treatment ward.

Adapting to a new language (she went to Portuguese language school in Portugal before moving to Angola) and learning the nuances of practicing medicine in Africa brings daily teachable moments, but Gamble embraces the challenges.

"It’s very humbling, because it’s not possible to know everything," she said. "Sometimes we have to seek alternative solutions to a patient’s medical problems based on our available resources. That can be frustrating."

In Angola, Gamble has become well acquainted with diseases like tuberculosis and malaria that she never encountered during her residency training.
her medical school training. Working alongside veteran missionary doctors has helped her gain a wealth of knowledge and hone her skills. Above all, she has learned to rely on God and trust Him for patient outcomes.

“I tell my patients, ‘I can give you medicine, but only God can heal. So let’s pray.’ That gives reassurance to us both.”

Overcoming challenges is what Gamble has been doing her entire life. She grew up in a low-income neighborhood in Washington, where school dropout rates were high and academic success stories were few. But Gamble’s parents sought every educational opportunity available for Lena and her three siblings, including after-school instruction and summer enrichment programs.

At age 14, she attended a summer science program for youth at Georgetown University. “It gave me an idea of what I could do with science and how I could use it to impact people and change lives,” she said.

In 10th grade, Gamble was thrilled to go to NASA’s famed space camp in Huntsville, Alabama, exposing her to even more career possibilities. But by then she had already set her sights on becoming a doctor.

“I wanted to practice medicine for free among people who couldn’t afford it,” she recalls. “At that time I didn’t know if that would involve serving in the United States or overseas.”

Gamble graduated from Xavier University of Louisiana and received her medical degree and a Ph.D in molecular pathology/virology from the University of Alabama at Birmingham.

Also an athlete and an avid professional football fan, Gamble played two seasons in a women’s football league for the New Orleans Blaze and the D.C. Divas. One of her favorite positions was linebacker. With her diverse skills and accomplishments, Gamble possessed the tenacity to do anything she set her mind on. However, it wasn’t until her sophomore year of college that she fully committed to pursuing God and His purposes for her life.

Her first mission trip—to Haiti as a 4th year medical student—confirmed that calling to serve the rural poor overseas as a family medicine doctor. During residency she returned to Haiti and followed that trip with challenging assignments in South Sudan and Zambia.

“I guess I like being far away from civilization,” she says with a laugh. “I still feel that way. Serving people in a rural missions hospital gives me the opportunity to share the Gospel and to meet physical needs. It’s the perfect mix of ministry and medicine.”

At age 14, she attended a summer science program for youth at Georgetown University. “It gave me an idea of what I could do with science and how I could use it to impact people and change lives,” she said.

In 10th grade, Gamble was thrilled to go to NASA’s famed space camp in Huntsville, Alabama, exposing her to even more career possibilities. But by then she had already set her sights on becoming a doctor.

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Now Gamble is able to make an impact on the lives of the people of Angola. She also values the friendships she has established there, especially with Drs. Daniel and Priscila Cummings and their family. The Cummings, an emergency medicine physician and an OB/GYN, came to Angola through the Post-Residency Program in 2012 and decided to stay after their two-year assignment was completed.

“The Cummings have been my mentors and friends and co-workers,” she said. “We are here for each other.”

Gamble usually goes to bed around 9 p.m. (what she calls “missionary midnight”) and is up by 4:30 a.m. to have a quiet time of prayer and devotions before she launches into another busy day.

“It’s fulfilling at the end of the day to know that I’m making a difference,” she added. “And I’m having fun doing it.”
IS GOD CALLING YOU TO SERVE INTERNATIONALLY AS A CAREER MEDICAL MISSIONARY? Samaritan’s Purse offers physicians and dentists a unique opportunity to follow in the footsteps of the Great Physician through our World Medical Mission Post-Residency Program.

World Medical Mission launched the program in 2004, enabling Christian physicians and their families to serve overseas immediately following their residency or fellowship. During their two-year assignments, these dedicated men and women work alongside medical missionaries, sharing the love and compassion of Jesus Christ with people in need. World Medical Mission provides logistical and financial assistance to help encourage and prepare young doctors in all specialties to become long-term medical missionaries.

WHAT ABOUT MY STUDENT LOANS? We are prepared to assist you as you raise support to cover your basic student loans.

DO I TRANSITION TO A SENDING AGENCY? From the outset of your acceptance into the Post-Residency Program, our staff will assist you in finding a mission sending agency that is the right fit for you and your family. We can help you make a seamless transition to a long-term sending agency and minimize the time spent at home raising support and completing the necessary sending organization requirements between assignments.

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WHERE COULD I BE ASSIGNED? Assignments will be in established mission hospitals and clinics in Africa, Asia, the South Pacific, Latin America, and Caribbean islands within the network of World Medical Mission Partner hospitals.

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Also I heard the voice of the Lord, saying:

WHOM SHALL I SEND, AND WHO WILL GO FOR US?

UNITED MISSION HOSPITAL
TANSEN, NEPAL

— ISAIAH 6:8

IS GOD CALLING YOU TO SERVE?

LEARN MORE about the Post-Residency Program at samaritanspurse.org/prp. You can also call 1-800-528-1980 and ask to speak with World Medical Mission staff or send an email to postresidencyprogram@samaritan.org.