

in Moldova and are involved in some ministry capacity. And it all started with a Google search and that first medical mission trip as a pharmacist.

Since beginning my trips to Moldova, I have also served as a pharmacist on mission teams in Haiti and the Dominican Republic with the organization Mission of Hope. On those trips, I once again witnessed lives being changed – both the lives of the townspeople as well as my own. I learned that yes indeed, we can make a difference for Christ with our pharmacist license.

I found CPFI probably a couple of years after that first trip. I think it was mentioned to me by another pharmacist and that's when I learned of the link between CPFI assisting GHO in helping to send pharmacists on their trips.

If you have never served on a medical mission trip, I encourage you to pray about it. If God puts the desire on your heart, then take that first step of faith and ask Him to help you find the right organization to partner with. I highly recommend GHO from my own personal experience, but there are other reputable Gospel-centered medical mission organizations. In 1 Peter 4:10-11 (NIV), it says, “Each of you should use whatever gift you have received to serve others, as faithful stewards of God’s grace in its various forms... If anyone serves, they should do so with the strength God provides, so that in all things God may be praised through Jesus Christ. To him be the glory and the power for ever and ever. Amen.” Using Google, our gifts, and God’s grace and guidance, we can do our best to make disciples of all the nations.



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# Ministering to a Multi-cultural Population through Vaccinations

By Nguyen D. Nguyen and Timothy D. Veenstra

In June 2021, the Lord allowed me to take part in the Cedarville University School of Pharmacy (CUSOP) mission team that traveled to serve people in Clarkston, Georgia. The trip was in cooperation with Ethnē Health, a Christian community clinic whose mission is to “deliver comprehensive, high-value healthcare through a culturally sensitive, neighbor-centered medical home that advances Jesus’ love and justice”.<sup>1</sup> Clarkston, with a population of approximately 8,000 residents, is located just outside of the Atlanta beltway.<sup>2</sup> Over 20 years ago, Clarkston was identified as a convenient settlement area for refugees from many different countries because of its location along major transit lines and highways that could take people to and from downtown Atlanta. The influx of refugees created an ethnically diverse city that has been called “the most diverse square mile in America.”<sup>3</sup> More than 50% of the persons residing in Clarkston were born outside of the United States. The local high school contains students from over 50 countries and the city’s local mosque has over 800 attendees.

The main purpose of the trip was to administer COVID-19 vaccinations, but it became so much more as we were able to interact with people from many different backgrounds. The tasks included collecting patient consent forms, educating patients about COVID-19, the safety and efficacy of the COVID-19 vaccines, and finally preparing and administering the vaccinations. During the process of administering the vaccines, I learned a lesson on how God can use our weaknesses for His glory (2 Corinthians 12:10). Although it may sound surprising coming from a student who hopes to soon become a pharmacist, the sight of needles and blood used to cause me great anxiety. It sometimes made me wonder if pharmacy was the right career for me. Having experienced this fear, however, allowed me to empathize with others who were wary of getting vaccinated. Disclosing my personal anxiety made them feel more comfortable and less reluctant to get vaccinated. Sharing this common bond not only resulted in their decision to be vaccinated, but it also put a smile on their face. Approximately 160 COVID-19 vaccinations were administered over the course of the trip.

The trip was much more than simply vaccinating people to protect them from the scourge of COVID-19. Much of the mutual benefit was gained through the personal conversations we had with the patients. For example, I listened to a refugee from Afghanistan tell the story of how he and his family moved to the US. He shared how hard it was to leave his home in Afghanistan and come to a new and unfamiliar country; but the support and hospitality of the local people (such as Ethnē Health and the foodbank) have been a tremendous help and comfort to his family. In

another encounter, I was able to provide a smoking cessation consultation to a patient who was waiting for the vaccine. She was aware of how COVID-19 could negatively impact her health as a smoker, but she felt alone in the battle to quit smoking. She was thankful to be able to share her story and her struggles with me.

As a group, the trip helped us to learn skills on how to interact with people from different cultures, and to practice communicating with people who did not speak English. For example, I had an interaction with a Muslim couple who only spoke Dari. It was interesting to ask the wife questions through a translator, but I also had to make sure I maintained eye contact with her husband. Another real-world skill that we practiced was educating patients – including those who did not speak English -- on the health services they were receiving. This skill was made extremely challenging due to the diversity of the people being served. At CUSOP, we were told to teach patients at a level that an 8th grader can understand. During this trip, I often had to think of words that were not only easy to understand but also easy to communicate across different languages.

Even though I was not able to directly share the gospel, I believe that our team demonstrated the love of Christ to the patients. I firmly believe that following God's command in John 15:12 to "love one another" will encourage patients to come back to the Ethnē Clinic. We pray that some of those who return will be curious about our Savior and ask the staff more questions. We believe that seeds were planted on this trip, and God can use those seeds to bring precious souls to a saving-faith in Him.

The Ethnē Health team was very happy and grateful for the help from our school. The trip allowed the CUSOP team to learn more about other belief systems and be challenged to grow in our own walk with God. We heard the testimony of Emmanuel, who was a Hindu until college when he put his faith in the Lord Jesus Christ. If Hindus convert, they are isolated from their family and friends and are considered as having brought shame to the family's name. His testimony demonstrated the earthly cost of abandoning the Hindu faith in order to become a true follower of Jesus, who said "whoever loses their life for my sake will find it" (Matthew 10:39 NIV). Understanding these challenges helps us be more patient and understanding when we share the gospel.

We learned from a Muslim teacher about restrictions that adherents to Islam must follow with regard to taking medications, especially during the month of Ramadan. During this religious month, patients are allowed to consume medications only if they are essential for the patient's survival. For example, drugs that improve a patient's symptoms (such as acetaminophen) must not be consumed, but certain antibiotics are permitted. This teacher also told us something that was personally very convicting: he explained that devout Muslims practice their faith by praying five times a day, fasting, memorizing the entire Quran, pilgrimage, and other acts of worship. This made me seriously consider how actively and consistently I worship and pursue God through prayer, Scripture reading, sacrificial giving, and other vital elements of our faith. I worship the One true Almighty God who desires a personal relationship with each of us (unlike Allah, the distanced and impersonal god of Islam). That truth should make me want to devote more of my time and resources to following Him, serving Him, and sharing Him with those who are lost.

As with most mission trips, we had a few opportunities for relaxation time. We marveled at God's creation during a visit to Stone Mountain, and we enjoyed delicious authentic culture foods (including Ethiopian, Vietnamese, Mediterranean, and Indian) which are virtually non-existent in "the land of the cornfields" known as Cedarville, Ohio. God used this trip to challenge me to grow spiritually and to think critically about the needs that surround us. It's not necessary to go overseas to make an impact for Christ. In fact, my favorite quote from the trip is this: "Think globally, act locally." Every pharmacist interaction with a refugee patient in the US has the potential to produce spiritual fruit beyond our imagination. Refugee patients who put their faith in Jesus can bring the gospel to people in their local community and native countries. The trip also allowed me to better understand people from different backgrounds and how to interact with them as a Christian healthcare provider. This knowledge is crucial for me to optimize patient care in the future, since pharmacists routinely interact with people from other cultures, whether they work in a clinical, hospital, industrial, or retail setting. Most importantly, the mission trip gave me a heart for Ethnē Health and international refugees. Talking with them face-to-face and listening to their personal stories is far more impactful than simply hearing about them on the news. God willing, I look forward to the next opportunity to serve the many people who need the help of CUSOP and the love of Jesus Christ.

## References

1. *Ethnehealth.org*. Accessed October 1, 2021.
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