

Pharmacy Practice and Communicating the Gospel

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A number of years ago, I was meeting with a young architect who expressed interest in serving overseas in missions. As we talked about his desires to engage his architectural skills in a mission context, he made a very interesting statement. He said, “I can design a building or a town in a way that the Gospel will be communicated for current and future generations.” This was a very intriguing thought

and caused me to wonder about its application outside of architecture. As a result, I have considered how does this concept apply to pharmacy and pharmacy practice? Does the way that I practice pharmacy communicate the Gospel of Christ? As pharmacists who are Christians, this idea should be carefully considered. It was these thoughts that prompted the theme for this issue of Christianity and Pharmacy.

Before considering these questions further, there needs to be clarity on what is meant by the Gospel. Is the Gospel simply a sin management process, a declaration of Christ’s death and resurrection (I Corinthians 15:1-7), or something more? While the Gospel does entail forgiveness of sin, based upon the death and resurrection of Christ, it really is much more than these items. Jesus repeatedly placed the emphasis on things like healing, justice, righteousness, freedom, and compassion when He was asked about His mission and whether or not He was the Messiah. As we know, the Gospel transforms lives and thinking. It causes us to place a great priority on the ideals exemplified by Christ. Incorporating these into what we say and do as followers of Christ enable us to communicate the Gospel not just through words, but through everything we do. In fact, the ways we live and act are in many ways more powerful statements than what we say about the Gospel. This is true not only for our personal lives, but also for the way in which we practice pharmacy. Therefore, the challenge for us is how to incorporate the Gospel into our lives and professional practice in a way that makes Christ known.

These ideas and concepts can become very practical in the profession of pharmacy and go beyond our mindset or the way we treat others. Several months ago, we relocated to Iowa and I had to identify a new pharmacy for my prescriptions. I chose a smaller independent pharmacy near my home. Having given some thought to the issue of communicating the Gospel, I was impressed by the way the layout and design of this pharmacy seemed to be a barrier to the goal of directly interacting with patients and in this way, making the Gospel known. The pharmacy was designed like most pharmacies. There was a high counter, behind which the pharmacists and technicians worked. On one side was a lower counter with a cash register and on the other side was a counseling room as is required by Iowa law. While the pharmacist was very friendly, and came out from behind the counter to greet me (She did not know who I was.), the layout of the pharmacy seemed daunting and an obstacle to receiving any real care or interaction with the pharmacist. It seemed to communicate that real care is hidden from those who come in the pharmacy. The only real interaction that did not have a major barrier was paying for the prescription. In many ways the design of the pharmacy prevented communicating the compassion and care expressed in the Gospel. We need to consider how the design of a pharmacy impairs making all aspects of the Gospel known and what can be done to change this.

Another aspect important to communicating the Gospel is highlighted in the lead article of this issue. Fifty or more years ago, the diseases that most individuals had were at least viewed

as the result of circumstances outside of the individual's control. With advances in our understanding of the causes of certain diseases and the development of chronic diseases that are more closely tied to lifestyle choices, the majority of diseases treated today result directly or indirectly from choices an individual makes. Diabetes is closely tied to obesity and lack of physical activity. Heart disease is often the result of poor dietary habits. Various diseases of the lungs are the result of tobacco smoke. Several infectious diseases are the result of uncontrolled sexual activity. Even injuries from various accidents result from choices like operating vehicles while intoxicated or poor decisions that place a person at great risk (e.g., diving into shallow water). Due to the volitional component of these diseases, it is very easy for individuals to feel responsibility for the disease and experience great feelings of guilt. A clear message of the Gospel is freedom from guilt. How do we as pharmacists who follow Christ make the freedom from guilt known to our patients? Are we personally bound by guilt in our lives in a way that prevents communication of freedom from guilt impossible? Do we take the time to understand our patients to the point that we are able to express this freedom to individual patients? All of this takes significant time and effort, and necessitates a change in the models we have for pharmacy practice. However, it is critical if we are to make the Gospel known, expressing the compassion of Christ.

Another obvious way that the Gospel gets communicated is through an attitude of service that is built on love of God and love of others. Two examples come to mind in trying to express and understand this concept. The first is Jesus' last act with His disciples in the upper room. Facing death and with

full knowledge that Judas, one of his disciples, would betray Him in just a few hours, Jesus becomes a servant and washes the disciples' feet. He did not simply become any servant in the typical Middle Eastern household; he became the lowest servant, the person handling the dirtiest part of the body. The second example is how our Christian predecessors were known. From the earliest years after Jesus' ascension, Christians were known for the love and service they expressed. In early Rome, they rescued all sorts of marginalized and abandoned infants, children, and adults. During the devastating outbreak of bubonic plague in Europe, it was the Christians who cared for the sick even at great personal risk. It is this type of service that our patients need to see, service that gives without expecting something in return and service that is given even at great personal risk. In these activities our patients can see and know the difference the Gospel makes in the way we live and interact with others. Are we willing as pharmacists who are Christians to take these risks and make these sacrifices to care for the patients entrusted to us?

A final example of how the Gospel can be communicated is in the way that we treat all of our patients, without concern for their background, race, ethnicity, economic condition, or relationship with God. Throughout the Old Testament, God continually urged Israel to treat foreigners with respect, to make His name known to foreigners, and to care for foreigners. In the New Testament, Jesus continually proclaims the Gospel to individuals outside of the Jewish nation. One of the clearest examples of Jesus' intent in making the Gospel known to people outside of Israel is Luke 4. After standing up in the synagogue, reading a passage from Isaiah, and undeniably

applying the passage to Himself, Jesus gives 2 examples of how the Isaiah quote applied. One example was the miraculous provision of food for a woman from Sidon, and the other was the healing of the Syrian commander, Naaman. Both individuals were not Jews, making it clear that God viewed foreigners with the same care, compassion, and sense of justice as He did Jews. The truth of what was being communicated about Jesus' purpose, and in essence the Gospel, was not missed by His Jewish audience. They sought to kill him. Communicating the Gospel in a professional pharmacy context requires the same approach as Jesus. We must not consider some patients as better than others or provide unequal care based upon the background of an individual patient. In a larger context, it means that we become concerned and intervene in the disparities of healthcare between various racial, ethnic, and economic groups of people. Making sure the Gospel is communicated effectively necessitates us to approach and treat all patients with equal love, respect, and care.

The reach and extent of the Gospel goes far beyond the simple truth of Christ dying for sin and conquering death through His resurrection. The ramifications of this truth impacts everything we are, everything we think, and everything we do. If we are to change our practice of pharmacy in a way that communicates the Gospel, we must be humble, committed to Christ, seek the Lord's guidance, and remain intellectually strong to identify the right questions. Every situation and encounter should be evaluated with the question, "am I effectively communicating the Gospel?" When Christ is lifted up, all people will come to Him. The challenge is great, but the results will transform lives.