

get trained so that I'd be prepared for when that girl needed me, I get shivers to this day. The point of this story is twofold: 1) any person, even those with the highest medical training, can have mental health issues; and 2) there are practical steps we can take to be prepared.

If you are reading this article and you are struggling with mental health issues yourself, there are phenomenal resources available to you. And please know this one simple truth: you are not alone! There are many others who struggle too; and more importantly, there are people who care and will take the time to help you. If you are not struggling, I strongly encourage you to take mental health crisis training so you can be prepared for a mental health emergency.

In school, we are learning to utilize the PHQ2 depression test questionnaire (<https://www.hiv.uw.edu/page/mental-health-screening/phq-2>) in every patient interview to screen for our patient's mental wellbeing. I believe this is an important initiative and I hope it becomes universal for all patient interviews.

Finally, I want to reflect on our biggest mission as Christians. We are called to go into the world, preach the Gospel (Mark 16:15) and love each other because we are all made in the image of God. Pharmacy is one path that we choose to live out this mission. While we may not always have an opportunity in these instances to pray or talk about our faith, the love and care we show for those with mental disorders – as well as our normalization of discussions around mental health – is still showing God's love. Medications and therapies can help stabilize brain chemistry, but the knowledge of God's grace and love for us works wonders we can't begin to imagine. I hope you will take these steps, be prepared, and wait expectantly... trusting that God will give us divine appointments to help others, if we are only willing!

"For it is by grace you have been saved, through faith—and this is not from yourselves, it is the gift of God—not by works, so that no one can boast. For we are God's handiwork, created in Christ Jesus to do good works, which God prepared in advance for us to do." Ephesians 2:8-10 (NIV)



Luke Nesbitt is a 3rd Year pharmacy student at the Medical University of South Carolina in Charleston. He is the current President of their CPFI student organization. He grew up in Greenville, South Carolina and attended Clemson University for his undergraduate studies. His career goal is to one day work in an ambulatory care clinic. When he's not studying, Luke loves to be with his church/community group, explore Charleston, and go golfing.

Can I Really Use my Pharmacist License to Spread the Gospel Message? By Bryan Hammons

I was 45 years old and had a corporate job with absolutely zero patient interaction. Actually, the last role where I had patient interaction was in retail pharmacy 17 years prior. How could I possibly use my profession to spread the Gospel?

That was the challenge I faced in 2007, after going through a Bible study on Matthew chapter 28. Matthew 28:19 (NIV) says, *"Therefore go and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit."*

All nations. Yes, I could donate financially to organizations that work to share the Gospel around the globe. However, this Bible study challenged us to take our profession and use it as a vehicle for sharing the Gospel. Being a pharmacist is a profession that I felt was God-ordained in my life. No one in my family was in the medical profession; but in my high school years I sensed that pharmacy was right for me since it's in the healthcare field but requires less years of education than a physician.

So, I began to ask different people, "How do I use my profession of pharmacy to spread the Gospel?" Some

people didn't have any good ideas, while others said, "Don't try, just give money to Gospel organizations." Finally, someone asked, "Have you ever done a medical mission trip? It's a real thing, you should Google it."

Now, I had been on mission trips before. I traveled to China several years earlier, and I had served in my church's youth ministry by doing mission trips and camps with them. But medical mission trips? I had never heard of such a thing. So, I Googled "medical mission trips" and the first result I got was Global Health Outreach (GHO).

After some research I learned that GHO is the missions arm of the Christian Medical and Dental Association (CMDA). Wow – this sounded like the organization for me. After discussing it with my wife, we decided that a short-term medical mission trip was the right fit. I began to search their mission calendar for trips that would fit with my upcoming work schedule. I landed on two possibilities: Afghanistan and Moldova. After telling my wife about the options, she replied, "Congratulations! You're going to Moldova!"

GHO does a great job of describing the full scope of the trip, such as who they partner with locally, the logistics,



expenses, and more. However, the most important thing for me was that they provided the contact information of the trip leader. I still had many questions; and after an email exchange with the leader, we spent time on the phone, and he answered all my burning questions. That's when I knew that God had guided me to make the right decision. At that point I completed the necessary paperwork and paid the deposit, officially booking my medical mission trip to Moldova in April 2008. While I knew nothing about Moldova, I was excited to have this opportunity to serve in a pharmacist capacity.

I prepared for the trip by familiarizing myself with the formulary we would use. The formulary was pretty small and mostly generic. Since there were antibiotics for reconstitution on the formulary I downloaded a reference on the dosing schedule for children. During the trip if I had a question the prescribers were always eager to collaborate.

One thing I learned is that the role of a pharmacist is vitally important on medical mission trips. So many people have told me that pharmacists are the most under-represented health professionals on these trips, and it's true. Yes, nurses and other support staff can (and in many cases do) staff the pharmacy. But 2 Timothy 2:15 (NIV) says, *"Do your best to present yourself to God as one approved..."* (emphasis mine). The patients who are served in the clinics deserve to receive the best care that can be provided by the best individuals, and that includes having an actual pharmacist in the pharmacy. Also, when nurses or non-medical personnel have to run the pharmacy, it takes them away from the unique and important tasks that they have been called to do.

I met so many wonderful, like-minded people from all over the U.S. on this trip. Spending up to 14 days in close quarters can create friendship bonds that last a lifetime. After a day of orientation in-country and meeting folks from our host organization, we traveled to the first of the two villages where we would serve for the week. The village was very rural, with little or no healthcare presence. But the townspeople were so hospitable, grateful, and welcoming. Local women were hired to cook our meals, which were

usually eaten together in a church or school. GHO clinics are always set up in a location that's known to everyone in the village, such as a community center, school, or church.

Another tremendous blessing was being housed by the local people, who were so warm and accommodating. Through those relationships, I just fell in love with the people of Moldova, which is the poorest country in Europe. But what they lack in resources, they certainly make up for in hospitality. It was a thrill to see my host family arrive at the clinic, looking for their pharmacist guest and coming over to say hello to me.

A typical day started with a group breakfast followed by a devotion and testimony, and then we would open the clinic. The first day or two would not be very busy; but as the week progressed and word spread, we would arrive in the morning to find long lines of people waiting to be seen. We ran the clinic from 9am to 12 noon, then again from 1pm to 4pm, taking a break for lunch. Closing the clinic at 4pm allowed for ample time of interaction with the people in the village, facilitated beautifully by an energetic group of young people serving as our interpreters. Depending on our location in the country, either Romanian or Russian were spoken, and our interpreters were fluent in both languages. After dinner each evening, we had a time of praise and worship; then we shared the blessings of the day before retiring to our host home.

This routine was repeated Monday through Friday in two different villages. Hundreds of patients were seen and cared for, and medication was dispensed. But most importantly, the Gospel message was shared and we prayed with many people. I was able to see with my own eyes that medical care, including a pharmacy component, can definitely be used as a vehicle to spread the Gospel message. When the villagers saw that complete strangers from another country were giving their time and money to visit and care for them, they were willing to listen to our stories and testimonies.

This...THIS is what I was made to do.

That was 2008. Fast forward to 2021. I just returned from my 16th trip to Moldova. Sometimes it was a medical trip, other times it was a service trip, and most of the time (especially recently) it has been to further relationships between Moldovans and Americans who are living full time



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.



Bryan Hammons currently serves as a clinical account manager for Cigna. A 1984 graduate of Southwestern Oklahoma State University, he has held various roles in the managed care industry since 1994. He and his wife of 38 years, Deanne, who is also a pharmacist, live outside Fort Worth, Texas. They have 2 children and 4 grandchildren. He can be reached at bryan.hammons@att.net.

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”.¹ Clarkston, with a population of approximately 8,000 residents, is located just outside of the Atlanta beltway.² 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.”³ 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