As a Christian chiropractor, I knew that my purpose in life was to glorify God and practice chiropractic, but beyond this general goal, practical day-to-day application was often hit and miss. I tried to glorify the Lord in the clinic by doing a number of things such as playing Christian music, having Scripture verses written on a white board in each treatment room and making tracts available for those searching for answers about God. One of the questions on our initial history form asks if a patient would be open to prayer with a staff member or doctor. We try to stay sensitive to a person’s need outside of just physical. We have also attempted to help patients either initially come to know the Lord or grow in Him in a deeper and more personal way. Thus, our family has tried to have the atmosphere of a Christian business and express the love of Christ to each person, whether that person is a Christian or not.

However, I really didn’t think anything more about my purpose in life until I read a book that emphasized that God made each person unique with a unique purpose to fulfill, and if a person can find that purpose, decisions will become simpler, and life will become much more fulfilling. I felt that I should start going on short-term medical missions. I sensed that this would be the beginning of a regular thing as the Lord leads and not just a “let’s go on one and see if it fits my taste or not.” As I looked at what was available in the CCA publication, I decided that my first trip would be with Adam Reed, D.C. to Guatemala.

Two things make a mission trip with Dr. Reed exceptional. The first is that a whole medical team participates together. Thus, the chiropractic aspect is one part of the team that delivers healthcare. Like many in our profession, I cherish the idea of different disciplines working together for the good of suffering humanity. The second is that not only is the physical need of the patient attended to, but also the possible spiritual need of each patient or patient and family is addressed as well.

On our team, there were two medical doctors, two dentists, three chiropractors, a nurse practitioner/nurses, medical assistants, individuals trained in the dispensing of eyeglasses, and others to dispense medication. My daughter, Deborah, has an interest in medical missions and was able to join the team as well. There were also a number of young people who helped fill in the gaps. The total team was about 25 people. The ministry that the CCA supports and Dr. Reed is a part of, Caring Partners International, works directly with local churches and church volunteers in foreign countries. On clinic days, patients would wait outside of the building and form a line. When a person was admitted into the building, he/she would be greeted by a church member and taken to meet a “gatekeeper,” who was an MD, nurse practitioner, or nurse. That professional would determine which stations the patient would go to, and the church volunteer was given an order with the different symptoms and stations noted. The patient would then be escorted through the various stations, which could be small classrooms or a curtained partition. Each station had an interpreter. Throughout, all the health disciplines functioned together as a team.

Prior to the completion of the care, each patient or patient and family was taken to a station where a church volunteer would sit down one on one and present the Gospel and take time to pray with them. Dr. Reed emphasized to us that this station was the most important station of all.

continued on next panel,
At the end of the first day, I asked to speak with Dr. Reed. I expressed to him that I had treated one man who had sciatica for 35 years. His low back was quite stiff, and, when I palpated it, I was confident that he had significant degeneration. As I treated him, I wondered, “What can one or two adjustments do for that man?” When I mentioned my thought and apparent discouragement to Dr. Reed, he responded that although the man came in for a physical need, he was able to hear the Gospel and may have had his eternal spiritual need met. This line of thinking reminded me how, in the New Testament, people would come to Jesus to have a physical need met, but He was always looking at the spiritual condition of the person.

During the period of 4 1/2 days, over 1500 patients came through the clinic. Of course, not all received chiropractic care, but with three chiropractors on duty, we saw about 50-75 patients/day. Almost all had never received a chiropractic adjustment before. One of my patients was an 8 year-old boy with back pain that was brought in by his mother. As I was examining his back, Deborah mentioned to me that his eyes were crossing. Since I had recent success with several children who had a similar problem in our clinic in Oregon, I checked his upper cervical vertebrae and the Cl was out in left field. I adjusted both areas. The most common patients were ladies who came in for neck, shoulder, low back, and bilateral knee pain. I found that these problems were almost pandemic in Guatemalan adult females. The neck pain came from carrying bundles on their heads. The low back and knee pain came from walking on uneven ground all of their lives as well as wearing shoes that lack cushion or arch support. Also, quite a few patients who, as pedestrians, had been hit by cars or were injured riding a motorcycle.

At the conclusion of each day, we spent time together as a group, and members could share memorable incidents of the day. I shared about the boy with the crossed eyes, and how I felt that I should continue to pray for him. Dr. Reed responded that each of us might have patients that make that impression on us. Many gave praise reports at the end of each day, and the camaraderie of the entire medical team was amazing. Additionally, over 350 conversions to Jesus Christ were reported. Since the church people were actively involved, there was contact established for follow-up related to discipleship training.

The last day was a time for rest and relaxation in Antigua, a city known for its scenery. We were able to become tourists and go to the market together to buy souvenirs, as well as eat at a very nice restaurant that evening for final closing words and reflections.

As a result of this experience, my life has been changed in a number of ways.

1. For years, there have been two verses in the New Testament that have caused me to wonder how to address them. The first is Matthew 25: 40, “And the King will answer and say to them, ‘Assuredly, I say to you, inasmuch as you did it to one of the least of these My brethren, you did it to Me.’” The second verse is I John 3:17, “But whoever has this world’s goods and sees his brother in need and shuts up his heart from him, how does the love of God abide in him?” I believe that I found the answer to both of these statements on the mission field in a Third World country.

2. Every act of kindness, whether it be spoken words, loving pat/embrace, medication, or an adjustment can be enough to soften a person’s heart to be open to receive the Gospel.

3. There are many good organizations, Christian or not, that provide humanitarian aid. However, if humanitarian aid is solely provided without the presentation of the Gospel, that aid only addresses the temporary physical need of the individual. But if the Gospel is provided along with other aid, the
mental and spiritual needs can also be addressed with eternal lasting benefit.

4. My God-given purpose in life has become clearer. I yield the final say to God, but I feel my present purpose in life is to help bring others to come to know Christ through my gifts, talents, and money. Since I came home, I have been able to form a purpose foundation with four different areas in which I can minister. Additionally, since this purpose has become clear in my mind, I can now see what things for me are God things versus what things are good things. In other words, I can decide to support a ministry that aligns with my purpose. In regards to a ministry that does not completely align with my purpose, I can make a choice to either support it or not without feeling guilty or wondering if I made a bad choice.

In closing, the uniqueness of having a total medical team working together, as well as addressing each patient’s spiritual need made this trip to Guatemala a memorable one and has given me a desire to go again as the Lord directs. Dr. Reed is a very special individual and loves chiropractic. In fact, he stated that his wish in the future is to have 3 or 4 chiropractors going on each trip, so that DCs can be gatekeepers and direct the patient to the appropriate stations.

If you would like to have a life-changing experience or your God-given purpose in life clarified, consider going on a short-term mission trip or make it more of a regular routine. See you on the mission field!