

THE medical evangelist

A PUBLICATION OF ADVENTIST MEDICAL EVANGELISM NETWORK



- 9 | Partners in Ministry
- 13 | A Mother's Prayer
- 26 | From Music to Medicine and Medicine to Ministry

Like Father, Like Son

by Todd Guthrie, MD

The gospel ministry is needed to give permanence and stability to the medical missionary work; and the ministry needs the medical missionary work to demonstrate the practical working of the gospel. Neither part of the work is complete without the other. —Ellen G. White, Counsels on Health, p. 514.



TODD GUTHRIE, MD,
is an orthopedic surgeon
and editor of The Medical
Evangelist.

I always knew I wanted to become a physician. My dad was a well respected, caring, and competent general practice doctor and surgeon in our home town. Both of my older brothers chose medical careers, so it seemed like a natural fit for me.

In 1991, after 13 years of higher education and training, I was full of excitement as well as a little apprehension. Would I be up for the stresses and strains of private practice? Could I be like my father?

Gradually my confidence grew. I made mistakes, but I cared about my patients and learned the nuances of these delicate interactions. Seeing my patients restored to mobility and relief from pain was richly rewarding.

Many people experience a mid-life crisis. For me it was more of a mid-career crisis. After the stress of starting my medical practice had subsided and life settled into a routine, my thoughts turned to the broader questions of ultimate meaning and purpose. I wanted to have more compassion and care for my patients. I wanted to more fully reflect Jesus, the Master Physician.

At one point I considered becoming a part time pastor. Some physicians have, and I find that admirable. But I contented myself in affiliating with mission minded groups such as ASI (Adventist-

laymen's Services and Industries) as well as going on mission trips to Africa and Cuba.

Unexpectedly, in 2004, and because of my connection with ASI, I was invited to participate in the development of AMEN. Having now attended every AMEN Conference since its inception, I can testify that this association has brought more permanence and stability to my work and a deepening desire for the demonstration of the practical working of the gospel in my practice. God has used AMEN to help me grow.

AMEN conferences and resources have directed me to the Great Physician, Jesus Christ, and a clearer view of our heavenly Father whose love for us is everlasting. I sense the Holy Spirit blessing me with compassion and competence while truly caring for the sick and suffering. I am encouraged to point my patients to the ultimate source of healing by praying with them and encouraging them to trust in God for not only health, but everything.

As you read this issue, I pray you will be blessed by the heartwarming stories of how God is using AMEN to impact lives around the world.

THE medical evangelist

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The Medical Evangelist is the official publication of Adventist Medical Evangelism Network. The purpose of the publication is to equip physicians, dentists, and other healthcare professionals to be effective medical evangelists.

THE MEDICAL EVANGELIST STAFF:

EDITOR

Todd Guthrie, MD

MANAGING EDITOR

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DESIGNER

Susie Kuhlman

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Adventist Medical
Evangelism Network

9515 Lee Highway | Suite B-1021

Ooltewah, TN 37363

(530) 883-8061 | www.amensda.org

contents

- 2 | **Editorial:**
Like Father, Like Son
- 3 | **Contents**
- 4 | **A Call to Labor in the Great Cities**
St. Helena, California. June 22, 1910
- 6 | **Experiences in Gospel Medical Evangelism**
- 9 | **Partners in Ministry**
- 12 | **The First Conference Experience**
- 13 | **A Mother's Prayer**
- 16 | **From Zimbabwe to Hilton Head**
A young doctor reflects on her first time
AMEN Conference experience
- 21 | **Network Walk Takes an Unexpected Turn**
- 23 | **The Life Companion Search**
—addressing a need that's close to home
- 26 | **From Music to Medicine and Medicine to Ministry**
- 29 | **Our Journey of Care by an AMEN Physician**
- 31 | **President's Perspective:**
The First Experience

Cover photo: DENNY HONG, MD, MPH, FACP, and his family are currently serving as missionaries in rural western Kenya at Kendu Adventist Hospital. He completed medical school at Loma Linda University School of Medicine and is board certified in internal medicine and lifestyle medicine. He is married to Jayeon Hwang, and they have three children.

St. Helena, California. June 22, 1910

A Call to Labor in the Great Cities

by Ellen G. White

During the night of February 27, a representation was given me in which the unworked cities were presented before me as a living reality, and I was plainly instructed that there should be a decided change from past methods of working. For months the situation has been impressed on my mind, and I urged that companies be organized and diligently trained to labor in our important cities. These workers should labor two and two, and from time to time all should meet together to relate their experiences, to pray, and to plan how to reach the people quickly, and thus, if possible, redeem the time.

This is no time to colonize. From city to city the work is to be carried quickly. The light that has been placed under a bushel is to be taken out and placed on a candlestick, that it may give forth light to all that are in the house.

Thousands of people in our cities are left in darkness, and Satan is well pleased with the delay; for this delay gives him opportunity to work in these fields with men of influence to further his plans. Can we now depend upon our men in positions of responsibility to act humbly and nobly their part? Let the watchman arouse. Let no one continue to be indifferent to the situation. There should be a thorough awakening among the brethren and sisters in all our churches.

For years the work in the cities has been presented before me and has been urged upon our people. Instruction has been given to open new fields. There has sometimes been a jealous fear lest some one who wished to enter new fields should receive means from the people that they supposed was wanted for another work. Some in responsible positions have felt that nothing should be done without their personal knowledge and approval. Therefore efficient workers have been sometimes delayed and hindered, and the carriage wheels of progress in entering new fields have been made to move heavily.

In every large city there should have been a strong force of workers laboring earnestly to warn the people. Had this been



undertaken in humility and faith, Christ would have gone before the humble workers, and the salvation of God would have been revealed.

Let companies now be quickly organized to go out two and two, and labor in the Spirit of Christ, following His plans. Even though some Judas may introduce himself into the ranks of the workers, the Lord will care for the work. His angels will go before and prepare the way. Before this time, every large city should have heard the testing message, and thousands should have been brought to a knowledge of the truth. Wake up the churches, take the light from under the bushel.

Where are the men who will work and study and agonize in prayer as did Christ? We are not to confine our efforts to a few places. "When they shall persecute you in this city, flee ye into another." [Matthew 10:23.] Let Christ's plan be followed. He was ever watching for opportunities to engage in personal labor, ever ready to interest and draw men to a study of the Scriptures. He labored



patiently for men who had not an intelligent knowledge of what is truth. While we are not awake to the situation, and while much time is consumed in planning how to reach perishing souls, Satan is busy devising and blocking the way.

In view of the many neglected cities from one end of the United States to another, I am free to say that too much labor has been put forth in the plants in a few favored localities. Let not so large an expenditure of means and of time as has been devoted to Takoma Park be given to other places; for it will be used as an evidence that we do not really believe that the end of all things is at hand. Satan knows how to make use of every inconsistency, and he will influence men to point at us, and say, "They do not believe the things they teach."

O if I could but see the depth of experience coming to our people which they must have before they can enter heaven, then would I

be filled with grateful thanksgiving to God. I speak to our people, ministers, physicians, and all who profess to believe the truth. A work of thorough conversion needs to be done. Walk in the footsteps of Christ Jesus. Why do we not take heed? The Lord has long waited for us as a people who know the truth, to make that truth known to all possible who will hear and be converted.

I have faithfully written out the warnings that God has given me. They have been printed in books, yet I cannot forbear. I must write these same things over and over. I ask not to be relieved. As long as the Lord spares my life, I must continue to bear these earnest messages.

Ellen G. White

—*Manuscript 21, 1910, reprinted in full in Medical Ministry, pp. 302-303; 3 Selected Messages, p. 50; Paulson Collection, pp. 69-70.*

Experiences in Gospel Medical Evangelism

by Ernestine Finley with Mark Finley, DD



MARK AND ERNESTINE FINLEY

have served in ministry together for over 50 years. Ernestine is an internationally recognized author and teacher of Natural Lifestyle Cooking and wellness who is known for her gift of hospitality and her love for evangelism. Mark Finley, DD, serves as an assistant to the president of the General Conference of Seventh-day Adventists. The Finleys continue their worldwide outreach through the Living Hope School of Evangelism in Haymarket, Virginia, and conduct retreats for pastors at their Retreat Center. The Finleys have three children and five grandchildren.

My husband and I first became acquainted with gospel medical evangelism through Elders W. D. Frazee and John Tindall.

Elder Tindall initially studied law as a young man. He was a self-confessed agnostic in his early years. During his early 20s he had what he called the “gold fever.” He was in law school when he went in search of gold in the hills of Southern California. While he was staying in an old miner’s cabin, he heard an older gentleman reading from a chapter on the crucifixion of Christ from Ellen G. White, *Desire of Ages*. The story of the Cross broke his heart. He fell in love with the Christ who loved him so much. After his conversion, he was providentially led in contact with Seventh-day Adventists and began diligently studying the Adventist message. After extensive Bible study of the prophecies of Daniel and Revelation he became a Seventh-day Adventist.

Elder Tindall was very impressed with the Adventist understanding of the health message. He decided to go to Loma Linda College of Medical Evangelists and enroll in the medical missionary course. During this time Ellen White had a vision where she saw there needed to be a decided change in methods of evangelism.

Ellen White’s Vision of Gospel Medical Evangelism

“During the night of February 27 (1910), a representation was given me in which the unworked cities were presented before me as a living reality, and I was instructed that there should be a decided change from past methods of working. For months the situation has been impressed on my mind, and I urged that companies be organized and diligently trained to labor in our important cities.” —Ellen G. White, *Manuscript 21, 1910*.

In 1909, she had pled with the General Conference delegates, “There should be companies organized and educated most thoroughly to work as nurses, as evangelists, as ministers, as canvassers, as gospel students, to perfect a character after the divine similitude....gospel medical missionaries are needed now....Let little companies go forth to do the work to which Christ appointed His disciples.... Let them pray for the sick, ministering to their necessities and teaching them how to regain health and avoid disease.” —Ellen G. White, *Testimonies, Vol. 9, p. 172*.

“In this work physicians and gospel ministers are needed. We must press our petitions to the Lord and do our best, pressing forward with all the energy possible to make an opening in the large cities. Had we in the past worked after the Lord’s plans, many lights would be shining brightly that are going out.”—Ellen G. White, *Medical Ministry, pp. 301, 302*.

Elder Tindall Fulfilling Ellen White’s Vision

Elder Tindall heard Ellen White speak in person. After that Elder Burden, business manager of the college, and Roderick Owen, the Bible teacher, asked Elder Tindall to be the first one to answer the call of Ellen White’s vision.

In 1910, Elder Tindall developed a comprehensive six-week gospel medical evangelistic series with a team of Bible instructors, medical personnel and literature evangelists to work in San Bernardino, not far from Loma Linda.

Among those baptized were his wife and a gentleman who later loaned \$10,000 (\$250,000 in today’s money) to Loma Linda. At that time Loma Linda was in great need financially. A \$100,000 gift was given from a convert in his third campaign.



Elder Tindall conducted evangelistic meetings with outstanding success in major cities in California, Oklahoma, Texas, Indiana and scores of other cities across America. Hundreds were baptized as the result of his comprehensive, blended medical ministry approach. His early campaigns resulted in baptizing nearly 1,000 people. His greatest achievements were not in the numbers he had baptized but in the retention rate of 75-90%. This is almost unheard of today.

Elder W. D. Frazee eventually joined Elder Tindall's gospel medical evangelistic team. The average attendance at Elder Tindall's health classes was 500-700 while at the San Francisco Training School. His evangelistic meetings attracted around 1,000-2,000 attendees per night.

Later in life Elder and Mrs. Tindall accepted the invitation to become members of Wildwood Medical Missionary Institute. Elder Tindall spent much of the rest of his life as a mentor to his former apprentice W. D. Frazee and others, writing books and speaking. Elders Tindall and Frazee carried forth the vision of Ellen White by conducting gospel medical evangelism in some of America's great cities.

Finleys Mentored by Elders Frazee and Tindall

From 1970 to 1973, Mark and I spent three years learning about gospel medical evangelism from Elders Frazee and Tindall. The last meeting Elder Tindall attended was a blended ministry of gospel medical evangelism in the Chattanooga, Tennessee, area. Dr. Richard Hanson had a medical talk, I shared a nutrition demonstration, and Mark presented a spiritual message. I will never forget the indelible picture I have in my mind of what Elder Tindall said at the end of the meeting. He threw his arms

around Mark and said, "Brother Mark, this is what the prophet commissioned us to do. You are young, go and do it."

In 1974, we left Wildwood and developed a gospel medical evangelistic team in the Southern New England Conference. This little company of workers lived in our home. We traveled throughout the Conference conducting gospel medical evangelism for five years.

In 1979, we left the Southern New England Conference and established a gospel medical evangelism team in Chicago, Illinois. Throughout our ministry we have conducted gospel medical evangelistic meetings blending the three-fold ministry of education, health, and evangelism.

Prague, Czech Republic Gospel Medical Evangelism

Although we have conducted many health programs in preparation for our evangelistic meetings in the last fifty plus years and shared a health section in the evangelistic meetings, we did something a little different recently in the meetings in Prague, Czech Republic. Prague is one of the most secular cities in Europe. Because of this, our Adventist leadership wanted to try something different from a traditional evangelistic meeting in which the prime emphasis is on the spiritual alone.

The series titled "HOPE LIVES" began with a 45 minute health section, a 15 minute break, and then 45 minutes of sharing spiritual principles.

We wondered whether this would work! Would very many people even come? Would the fifteen minute break, then a transition to a spiritual emphasis work in the Czech Republic? By faith we believed God would honor our faith. The leadership in Prague



was excited about the possibility of this gospel/medical missionary approach.

Over four hundred people attended the opening night's meeting. A significant number of these were people with little knowledge of the Bible. It was exciting to see people interested in how they could live longer, healthier and happier lives. Many people talked to us after the meeting and shared how they wanted to make lifestyle changes.

The meetings in Prague were unique. They were somewhat different from traditional evangelism. At 6:30 p.m., guests were welcomed by the host and hostess. They were fantastic! They made the audience feel welcome, comfortable, and relaxed.

After the warm welcome we jumped right into the health portion. We started with the topic of people in the "Blue Zones" living to a healthy 100. We asked the question, what is the secret of living to a healthy, happy, energetic 100 with a clear mind?"

We talked about how lifestyle choices play a key role in the quality and length of our lives. We looked at the killer diseases in the Czech Republic, and how to reverse or reduce the risk of these worldwide chronic diseases. We shared that the "Blue Zone" centenarians practiced simple daily habits that enabled them to live a long, productive and happy life.

We presented how the "Blue Zone" secrets were all wrapped up in my book *Secrets to "Wellness."* These secrets are the true remedies outlined by Ellen White. They can be applied around the world for those that want to live a happy, healthy life.

We wondered if the people would stay after the health presentations since there was a 15 minute break before the Bible message. They did! Not only did they stay—they were fascinated

with how the spiritual presentations applied to their lives. For a society looking for hope, the biblical messages resonated with their deepest needs. The spiritual meetings included subjects like how to find life's true purpose, creation and evolution, the transforming power of God's Word, the origin of evil, understanding suffering, the second coming of Christ, finding real rest in the Sabbath, and the state of the dead.

As people attended the meetings each evening, many made eternal decisions. The life-changing power of God transformed lives. People found new hope. They discovered a new sense of purpose. Life took on new meaning. The attendance at the meetings continued to grow, with over 600 attending the closing meeting.

Gospel Medical Evangelism Opens Doors

Gospel medical evangelism opens doors for the proclamation of God's last day message. The three-fold ministry of Jesus is an effective method of working the great cities of our world. The Lord spoke powerfully through Ellen White when she said:

"If ever the Lord has spoken by me, He speaks when I say that the workers engaged in educational lines, in ministerial lines, and medical missionary lines must stand as a unit, all laboring under the supervision of God, one helping the other, each blessing each."
—Ellen G. White, *Testimonies, Vol. 9*, pp. 169, 170, emphasis supplied.

As we follow Heaven's counsel and practically implement the methods of Jesus, the prediction of God's last day messenger to the remnant will be fulfilled:

"When the cities are worked as God would have them there will be the setting in motion of a movement as we have not yet witnessed." —Ellen G. White, *Medical Ministry*, p. 304.

May this day be soon is my prayer.

Partners in Ministry

by Nicole Braxton



NICOLE BRAXTON

is director of AMEN Free Clinics.

In the heart of New York City and with support of the mayor, the Hanson Place Seventh-day Adventist Church launched a brand new 13-story multipurpose and urban housing landmark in Brooklyn. Now a vibrant hub for health and affordable housing, the building also includes units for the formerly homeless. The grand opening of Hanson Place ignited an even greater impact as AMEN Free Clinics joined forces with Pathway to Health, the Atlantic Union Conference, and the Northeastern Conference to deliver a powerful three-day free clinic, bringing hope and healing to the community.

Following this event the Hanson Place Church hosted a health evangelism series and baptized approximately 20 people under the leadership of Pastor Nigel Lewis. Praise the Lord!

At the clinic, 330 volunteers came together to serve more than 400 patients, delivering an estimated \$287,000 in free healthcare to the community in Brooklyn. AMEN Free Clinics is excited to return to Brooklyn for a follow up clinic, September 16-18, 2026.

AMEN Free Clinics welcomes the new dental manager, Dr. Timothy Oh, a dentist who has 20 years of experience leading mobile clinics through his own Maine-based nonprofit serving the underserved and underinsured.

Dr. Oh was first introduced to AMEN at the Topsham, Maine, clinic in February 2025. "It's incredibly rewarding to work



In 2025, AMEN Free Clinics transformed faith into action,

delivering approximately 12,000 free healthcare services and bringing hope and healing to communities across America. This was made possible only through the blessing of God.

AMEN Free Clinics has served alongside ministry partners such as It Is Written, the Michigan Conference of Seventh-day Adventists, Your Best Pathway to Health, the North American Division, the Lake Union Conference, as well as other unions, conferences and local churches from Maine to Baltimore, and more. Thanks to generous support, AMEN Free Clinics has provided healthcare services to more than 16,000 underserved and underinsured individuals since 2023, delivering an estimated \$4.7 million in free medical and dental care to those who need it most.

In 2026, AMEN Free Clinics is preparing to deliver free healthcare at approximately 12 clinic sites nationwide. We are incredibly excited about 2026 and the many lives we will have the privilege of serving in the year ahead.



with such a mission-minded team," he says, noting that "these large clinics are powered by a small handful of very hardworking people."

"I hope my experience with mobile dentistry and community outreach will further the mission of AMEN, and I hope to help AMEN run a high-quality dental program and deliver good care by providing an exceptional experience for patients and volunteers," he says. We praise God!

Are you ready to change lives by serving as the hands and feet of Jesus? Please consider making an impact by hosting a clinic, volunteering to serve, or donating on our website.

To learn more, please visit www.amenfreeclinic.org.



A Blended Ministry

By Ellen White

Medical missionary evangelists will be able to do excellent pioneer work. The work of the minister will blend fully with that of the medical missionary evangelist. Christian physicians are not to regard their missionary work as inferior to that of the ministry. A consecrated physician bears a double responsibility; for in him are combined the qualifications of the physician with those of the gospel minister. His is a grand, a sacred, and a very necessary work.

The physician and the minister should realize that they are engaged in the same work. They should work in complete harmony. They are to counsel together. By their unity they will bear witness that God has sent His only begotten Son into the world to save all who will believe in Him as their personal Saviour.—Ellen G. White, *Kress Collection*, p. 138.



The First Conference Experience

by Kianna M. Simmons-DeGraff, D.M.D.



KIANNA SIMMONS-DEGRAFF, DMD,

practices dentistry in Hixson, TN, where she lives with her husband and 11-year-old-son. She has been part of AMEN for more than ten years, and she appreciates opportunities to minister to her patients.

In 2015, God began to restructure my perspective and career. I had been in private dental practice for just under ten years, ministering in church and beyond. Now I was expecting our first child, and I was learning that my calling was so much more. I had never heard of AMEN, but a friend introduced me to the organization. Its mission intrigued me and aligned with what I had already sensed God was teaching me.

In October of 2015, my husband and I and our eight-month-old son attended our first-ever AMEN Conference at Hilton Head Island. The theme that year was CrossTraining.

To say we were blessed is an understatement. It was there that God cross trained me, as I came to see how my dental profession and business could blend with my calling and mission. From that time forward my practice was more than a career—it was also to be my ministry.

Highlights from that first conference included the dental breakout sessions, meeting many health care professionals who were combining ministry and practice, and the devotional morning meetings. At the plenary sessions God spoke to me in a profound way. I learned so much and was forever inspired and committed to a new practice philosophy that has touched so many lives and continues to do so—not just those of my patients, but their families and friends, my colleagues and staff, and even my own family.

As I returned to Hilton Head this past fall for the 2025 conference, it was a beautiful time to reflect on ten years of God's goodness, my own growth and His guidance since my first AMEN conference.



It was a real blessing to be back where it all began, reflecting on the past ten years and how that first conference has been a part of changing the direction of not only my career but my life as well.

This time I made a point to interact with as many new attendees as I could. I wanted to hear their stories, and discover how they came to be at AMEN.

In the pages that follow we will hear the inspiring accounts of two newcomers to AMEN.



A Mother's Prayer

by Giftson Charles Thommandru



GIFTSON C. THOMMANDRU

is from Andhra Pradesh, India. He attends medical school on the beautiful Island of St. Kitts.

I was born in an Adventist mission hospital in Andhra Pradesh, India. At the time, my father had just completed his theology degree at Andrews University and had begun his pastoral ministry in South India. My mother had also recently completed her education at Spicer Adventist University. They came from two different states, spoke two different languages, and came from two distinct cultures.

In India, people often expect couples to have children soon after marriage. A six-month period without news of conception can raise eyebrows, and a year is often enough to invite negative comments, gossip, and remarks such as, “God has not blessed this marriage.” It had been some time, and my mother began to experience some of this social pressure.

She prayed like Hannah and made a promise to God that if she were to give birth to a son, she would give him back to God and dedicate him to ministry. In India, determining the gender of a fetus is prohibited by law even today, and doctors who violate this law face imprisonment. In this setting, my mother had a dream that assured her she would have a son. Because of this, my parents

were confident that the child would be a boy. They prayed, named me Giftson, and dedicated me to ministry even before I was born.

Growing up, I always wanted to be a pastor like my father. However, my parents hoped I would become a doctor, as there was a great need for medical professionals in mission service. During my final years of high school (grades 11 and 12), I met a missionary doctor named Dr. Rajkumar Chavakula. I was amazed by how he combined medical practice with extensive ministerial work. I was deeply inspired by him and even worked alongside him in several programs. I also received some of my baptismal studies through his ministry. Through this experience, I was personally impacted and gained a clear understanding of true medical ministry. I realized that this was the calling God had placed on my life. My family and I prayed, and God miraculously opened doors for me to begin medical school at St. Kitts.

A new beginning—and setbacks

I was incredibly excited to travel to a new country, the island nation of St. Kitts and Nevis, and begin an entirely new chapter of my life. I had never even owned a passport—let alone boarded an airplane—



and the thought of it filled me with awe, anticipation, and joy. Transitioning to a new country with very limited finances and no idea of what to expect was a challenge. It wasn't easy at all. There were moments of struggles academically, financially and mentally. During those times, all I knew was to rely on God and hold on to faith.

Just when I thought I had reached the final stretch of the journey, I received a devastating shock: I had failed one exam. "Devastated" would be an understatement. I could not even process it. My mind was flooded with questions—why would God allow this at the very last stage? Had He left me? Was I no longer called? Had my purpose been canceled?

I was hurt, angry, and demanded answers from God. Slowly, I began to withdraw from daily activities. I felt numb and emotionally drained, unsure of what to do next. I had registered for AMEN long before this incident, but after the setback, I did not even want to think about God. I wanted distance—time away—until I could come to terms with my academic failure.

My parents prayed with me and encouraged me as best as they could, but my heart was still heavy with unanswered questions. When it came time to travel, I pushed myself mentally and said to myself, "Keep God aside for a short moment. Ignore your feelings and just go—you've already booked a non-refundable ticket, and you don't want it to go to waste."

Before they call I will answer

I left home at 12:00 p.m. for Robert L. Bradshaw International Airport in Saint Kitts. After checking in and settling down, I waited to board. A few minutes later, the airline announced that the flight was delayed by an hour. Hours passed, and at 5:00 p.m., they informed us that the flight had been diverted due to a storm. I waited in the airport with mixed feelings. The new departure time was set for 9:00 p.m., but when 9:00 p.m. came, the airline announced that the flight had been rescheduled for the following day.

In that moment, I felt as if it were a sign that I should not attend the conference, that God no longer wanted anything to do with me. I was disappointed, confused, and overwhelmed. I didn't want to go anymore. Yet for some reason I found the strength to persist. The next morning the flight finally departed. I was told that all my connecting flights would be automatically rebooked so I could reach Hilton Head Island without any trouble. However, when I landed in Miami, I discovered I had been rebooked to Savannah instead—and I would arrive close to 8:00 p.m., meaning I would reach the hotel only after that day's program had ended.

At that point my dear friend and mentor Dr. Kent Van Arsdell stepped in. He left the conference, drove to Savannah, picked me up at the airport, and brought me to the conference. What should have been a four-hour journey had become a grueling 33-hour ordeal. I was completely exhausted when I finally got into his car. Yet he arrived like an angel, carrying a box of the most delicious food from the AMEN conference. As I began to eat, he started streaming the conference on his phone while we drove. That was when I heard the testimony of Dr. Josianne Bailey-Abesamis. I was stunned by the striking similarities between her story and my own. It felt as if she was describing my life. At that exact moment—when I felt lost and questioned my calling—God placed before me the testimony I so desperately needed.

Tailor-made message

It was deeply reassuring to see that God had used her, that God had not canceled her purpose, and that He gives meaning and worth to our struggles, allowing them to be transformed into powerful testimonies. I was overjoyed and filled with renewed confidence. Many of the references she shared—and several of the sentences she spoke—felt like direct answers to the very questions I had been asking God. I was in awe of how perfectly He had prepared and crafted her sermon to meet my spiritual needs at that exact moment. It was clear that God was using her to speak directly to me, to answer my questions, and to remind me that I am still worthy to serve Him, even when plans fall apart.

While listening to the sermon, I could feel the hand of God in my life, despite my academic failure and the travel delays I had endured. It prompted me to pause and reflect on the little things in my life for which I am grateful: the very opportunity to attend the conference—which ultimately turned out to be an immense blessing—and even the delicious, nourishing meal brought from the conference while I was exhausted in the car. It truly felt as if God had come searching for me; He brought the conference to me at a moment when I was trying to isolate myself, sort through my struggles, and approach Him on my own terms. In that moment, I understood that God wants us to come to Him with our problems, to trust Him even when circumstances seem impossible. As the conference continued, the sermons, discussions, and fellowship built upon one another. I experienced a sense of love, encouragement, and community that I had not anticipated. I made wonderful friends and created lasting memories. Dr. Josianne's testimony in particular inspired me to return to my tasks with renewed determination and confidence. Her story reminded me that God's timing and purpose are perfect, and that He uses even our trials to shape and prepare us.

From this experience, I have resolved that, God willing, I will attend every AMEN conference I can. I want to continue learning, growing, and being reminded of His presence, guidance, and faithfulness in every area of my life.

Looking ahead

My dream is to become a medical missionary doctor and bring both healthcare and the gospel to places that cannot be reached



through preaching alone. I aspire to work alongside my father in India and support the mission in every way possible. Inspired by Dr. Jacob Prabhakar Chindrupu, I hope to become a surgeon who provides low-cost surgeries and organizes medical camps in rural and underserved areas, combining medical care with evangelism to make a lasting impact. I also aim to train local healthcare workers, implement preventive health programs, and promote health education to empower communities. By addressing both physical and mental health needs, establishing sustainable clinics, and collaborating with other mission organizations, I seek to demonstrate God's love through holistic service.

Ultimately, my goal is to allow God to fulfill His plan in my life and to do my part diligently so that one day I may hear the words, "Well done, my good and faithful servant."

From Zimbabwe to Hilton Head

A young doctor reflects on her first time AMEN Conference experience

by Ursula Nyamandi, MD



**URSULA NORA
NYAMANDI, MD,**

is a primary care physician from Harare, Zimbabwe, serving at Nyadire Mission Hospital in rural Mutoko. She is also working with the Union to establish a lifestyle center. She is passionate for God and soul winning, especially through health evangelism. She currently serves as health director of public campus ministries for Zimbabwe East Union Conference.

Lord," I prayed, "Please take me to this year's AMEN Conference." It was the end of June 2025. For the previous two weeks I had unplugged all digital connections after an intensely stressful year. During this digital break the Holy Spirit directed me to the AMEN YouTube page, and I found myself binge watching all the prior conference broadcasts. I couldn't get enough, like a chronically malnourished child who eagerly drinks the first therapeutic food they're offered.

I was raised in a Seventh-day Adventist family in the small town of Masvingo in Southern Zimbabwe. Our family was so religious, yet so fraught with brokenness. I wish I could say I went into medicine because of a clear calling or compassion for the sick. But in reality, well meaning older folk encouraged me in that direction, recognizing me as one of the smarter kids on the block. Additionally, with the country's declining economy and increasing rates of unemployment, medicine seemed like it would guarantee employment and a decent living. I dreamed of attending Loma Linda for medical school, but God led me to the then-only medical school in the country, the University of Zimbabwe (UZ).

Once enrolled at UZ, I joined the UZ Adventist Students' Association. Here I was exposed for the first time to medical missionary work through a curriculum called Student Missionaries Living Evangelism (SMILE). Our motto was "Part time students, full-time missionaries." On a student-led mission trip called zunde (adapted from a concept called Zunde raMambo where villagers work a piece of land to provide for needy families), I learned hydrotherapy principles which, though simple, produced immense results.

The Adventist community adopted the name "zunde" for the mission trips since the purpose

is to work in the heavenly Father's field. On one particularly memorable trip, we climbed several mountains in a day for two weeks in order to access the different ailing people scattered about the mountainous region. I ended up with blisters under the soles of my feet, but the pain was more than compensated by the joy of seeing the souls won to Christ.

Up until then I had experienced mission as part of a group, but I came to realize that having a personal burden for mission brings the test of discipleship closer to home. God helped me see that I needed to carry a personal burden for souls at all times, not just on mission trips. I came to see that I owed my Father more than just being a church member in good standing. He desired fruit from my life proportional to the light He had graciously bestowed.

I believe if we all maximized the divine appointments God sends our way, the coming of the Lord would be closer.

John Hyde (Praying Hyde) was a 19th century missionary whose ministry of intercessory prayer sparked a revival which brought thousand of souls to Christ in the Punjab region of India. Learning of his story led me begin praying as he had, initially asking the Lord to help me reach at least one soul a week. The Lord directed me to a mission field within reach—one to which I felt the church was apparently blind—my fellow doctors and medical students.

Reflecting upon the rate of backsliding in the clinical years, especially during the demanding internship period, seeing some seniors who used to be valiant soldiers for the Lord's cause leave the fold and become slaves to vices like alcoholism broke my heart. This prompted me to birth a little home ministry for medical students and fellow



interns, a place where they could unwind, connect with Jesus, and enjoy tasty, plant-based meals. The young people packed my small apartment week after week, often not leaving until almost midnight.

Despite carrying many responsibilities for my younger siblings' welfare, the budget of this home ministry was something I entrusted to the Lord, and He provided. We engaged as we discussed books, went on outings, and studied the Voice of Prophecy Bible lessons. This led to two graduations at the end of the school year, and baptisms resulted over time. One of the graduations took place while the executive secretary and president of our union were in attendance. As they witnessed the fruit of one doctor ministering to others, they felt convicted to send me as an overseas missionary. But I felt the Lord calling me to remain as a local missionary. New members joined our study group, and we developed the "evening missionary round" at the hospital, which consisted of sharing literature and offering prayer or providing food for families in need.

Over time I started feeling lost in medicine and had to fight the urge to quit; however, once I started the pediatrics rotation during my internship, the love for medicine returned. I found many

opportunities to share inspirational literature and minister to parents as well as children.

Ironically, I was at the only public hospital in the region that had a pediatric oncology department. All interns hated this service, but I fell in love with it. I even exchanged the bag I carried into the hospital for a larger one so I could carry more books to give away!

Additionally, I accepted the responsibility of leading out in the health work among students on public campuses in our union utilizing the SMILE curriculum and health expos.

A little less than two weeks after praying to attend the AMEN conference, the North Zimbabwe Conference called requesting me to enroll in the HEALTH (Health Evangelism and Leadership Training) program at Weimar University, and to me that was an assurance that the Lord had answered my prayer. Though I have many speaking engagements, this program cemented my desire to be a hands-on missionary. I have come to value every patient God sends me as my pulpit for the day.

I currently work at a remote hospital that belongs to the United



Methodist church where I see the poorest of the poor who struggle with teen pregnancy and inability to afford basic health care. I have filled that place with Adventist literature. I teach principles of health and have witnessed unending miracles.

While I've always prayed for my patients in private, at AMEN I learned that I can also pray with my patients in person! At the time of this writing, I saw a patient on whom I had performed a Caesarean section the year before. I didn't remember her, but she reminded me that I had prayed with her before the consultation. Sometimes it's the prayer that makes the difference, and sometimes it's the packet of mealie meal for a grandmother and her orphaned grandchildren, or assistance with the needed medicine supply that speaks most eloquently of the Father's love.

We need more varied health literature, and I have been praying for the ability to produce some in the vernacular language. We are working with my local church to host a free surgical camp for assisting albino children with skin cancer. I dream of starting an AMEN chapter locally, and God willing, soon we will have one.

At AMEN I was blessed by the Spirit-filled messages, the mission reports, and the opportunity to meet friendly, like-minded physicians. Now I am praying for the Lord to help me transition to being able to hold Bible studies with my patients. "The world needs today what it needed nineteen hundred years ago, a revelation of Christ."—Ellen G. White, *The Ministry of Healing*, p. 143.

AMEN Event Promotes Healthful Lifestyle

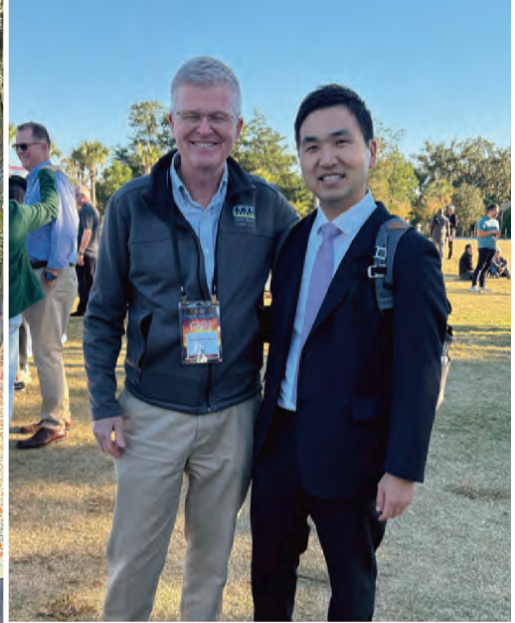
Low Country Celebration Park on Hilton Head Island served as a welcoming and picturesque site for the first-ever AMEN National Conference health outreach during its annual convention on Sabbath afternoon, November 1, 2025.

Karen Holland, DrPH, RN, health outreach coordinator, worked with a team from the Hilton Head Island Seventh-day Adventist church in cooperation with Rebecca Barnhurst, AMEN program director, and Dr. Johnny Ahn. The event drew a large crowd of interested community residents who interacted with more than 200 AMEN doctors and health care providers at the various health-themed stations. In addition, AMEN physical therapists provided free chair massages in a nearby open air pavilion.

AMEN families and children sang inspirational music and played instruments for community guests. A children's station drew interest from community children and families.

The NEWSTART®-themed event featured a table for each letter of the NEWSTART® acronym. Staffed by AMEN volunteers, each station offered healthful lifestyle tips and featured an array of delicious food samples including black sesame hummus, blueberry chia pudding with fresh berries, chickpea salad sandwiches, tomato basil soup, walnut chocolate chip cookies, roasted autumn veggies, and date bars. Recipes were provided by Teenie Finley and Karen Holland. AMEN attendees mingled with the community guests, answering health questions “as [those who] desired their good.” —*Ellen G. White, Ministry of Healing, p. 143.*





“It was wonderful to witness AMEN attendees from a wide variety of backgrounds unite in service to the Hilton Head community. Even the children took part by performing inspiring musical selections. The eagerness of community members to learn about health combined with the enthusiasm of AMEN members to share created an atmosphere in which all who attended left feeling uplifted and blessed. Some had wondered whether health ministry could have a meaningful impact in an affluent community such as Hilton Head, but this outreach event proved that the right arm of the gospel has the power to open doors to people’s hearts in every setting.”

— John Shin, MD, president, Adventist Medical Evangelism Network

Network Walk Takes an Unexpected Turn

by LeShel Taylor



LESHEL TAYLOR has a passion for working with youth and young adults. She resides in Jacksonville, Texas, with her husband, Dr. Eric Taylor, an AMEN board member.

So how do you reconcile that with finding a partner?"

Oh wow! Our conversation took a dramatic turn from our topic. When Eric and I discussed what we would talk about for our network walk at the AMEN Conference this past October, we settled on friendship evangelism. That was something with which we were both familiar. We had plenty of examples and lessons learned. We were eager to share what we knew, but also to learn from others' experiences.

On that Sunday morning, however, the conversation moved from friendships and allowing each person to develop their own unique relationship with Christ, to how does that work when you are looking for a life partner?

I looked at our network walk participants and then the one who had asked the question. They each looked at us eagerly for answers. I thought back to my years of being a single professional. I remembered the impatience I felt as I asked the Lord for a life partner. College came and went with no possibilities. I could admit there were times I tried to make it happen on my own, but I always knew it wasn't quite right.

When my close friend Janet called to tell me she met someone who she thought would be a good match for me, I was skeptical. What would make this any different? Reluctantly, I accepted the contact information and promptly filed it away among other things on my desk.

Months later, I felt the nudge of the Holy Spirit to revisit that contact information. I was willing, but settled in my mind that this would be just gaining a

new friend—that was it. I sent a generic email to Eric but didn't expect a reply.

That same day Eric was preparing to email Janet, my friend, to thank her and to explain he was not really interested in a long distance relationship. Before he could even draft his email, he received mine. And that, in turn, was the start of daily email conversations. Being on opposite coasts made emailing the smartest option at the time. Interestingly enough, we both separately had decided that we would not ask for pictures, but build our friendship to know each other's character first. Looks can change, but character remains the same. This may not work for everyone, but for my part, I trusted Janet enough to be comfortable with the idea.

While getting to know his character was important to me, I wasn't sure how to really go about this. I finally settled on asking if we could read something together. I reasoned that reading and sharing our thoughts would be the best way to know his heart. Little did I know that he was thinking the same thing. The very next email I received, he asked if we could read *The Adventist Home* together. I was speechless! This was one of many instances where we clearly saw the Lord leading us together.

Even though we could see God's hand leading, the relationship was not without difficulties. Seven months later, we faced our severest trial. On a trip to Redwood National Park, we were in a major car accident that left Eric fighting for his life. In the emergency room, they made it clear that they were hoping he would make it through the night. Once he was stabilized, everyday was a struggle to get him back to the life he knew. We had the support of family and friends who rallied around us. Even



still, the guilt and trauma were almost overwhelming. What could have caused the fracturing of our relationship with bitterness and hurt, was an opportunity for grace, mercy and the demonstration of God's love. For years afterward in our married life, we worked through such feelings that threatened to crush us under their weight except for the grace of God. Seven months after this event, we were engaged, and we married 15 months later.

This experience gave me the words I needed to share with our network walk friends. I advised them to stay true to their faith and not compromise for anyone. I acknowledged that this is very difficult if their relationship with the Lord is not solid. Placing their emphasis on Him is the most important of all relationships. As they meet and evaluate different prospective life partners, the Lord will make it clear who is right for them. The waiting is the toughest aspect in my experience, and I made sure not to trivialize their frustration. I suggested obvious steps such as making sure they are involved in an active church, and being open to trusted friends finding opportunities for them.

I answered their question, but the real question of how to find a life partner is not that easy to answer. Life is different for our young professionals and I think it is important to acknowledge this unique challenge. Those of us who are happily married can share our testimonies of God's leading to our partners and encourage those who are still looking to be open to the Lord's leading. But above all, we need to befriend them, support them in their walk with the Lord, listen to them and keep them in our prayers. That's the best answer I could give.

The Life Companion Search

—addressing a need that’s close to home

by Calvin Kim, DDS



CALVIN KIM, DDS

practices dentistry in Olympia, WA. He is the co-founder of ARME Bible Camp and F5 Challenge. He currently serves as ASi Pacific Union Vice President for Evangelism. He is passionate about inspiring others to live their best lives and winning souls into God’s kingdom. He is married to his beautiful wife Amy of 23 years and together they have two daughters, Charis and Caia.

As I travel fairly regularly for ministry and public speaking engagements, I meet a lot of people. Often times I will meet persons who are spiritual, mission minded, and carry themselves well. Then—come to find out—they are single. I think to myself, this person seems like a great catch. Then they tell me they do want to get married, and they are open to meeting someone. “Do I know of anyone?” they ask.

While I do know a lot of great, eligible, single Adventists, none would immediately come to mind. So I began a list on my phone titled, “Single Adventists,” and, inadvertently, I became an Adventist matchmaker.

I didn’t choose the matchmaker life, the matchmaker life chose me!

If God uses me to play a small part in the destiny of two people, I can only praise God from whom all great matchings flow.

While marriage is the second most important decision of our lives, second only to giving our lives to the Lord, few have received instruction on this most important matter and often leave marriage to chance, to a whim, or to feelings.

Satan operates in two directions. First, he encourages couples “who are wholly unsuited to each other to unite their interests. He exults in this work, for by it he can produce more misery and hopeless woe to the human family than by exercising his skill in any other direction.”—Ellen G. White, *Testimonies for the Church, Vol. 2, p. 248.*

Second, Satan works to prevent well-suited, godly men and women from uniting their interests in marriage. It has never been harder in earth’s

history to date or get married as it is now, and for multiple reasons of which I will highlight just two.

The first is choice paralysis. For thousands of years, people chose from a small village, a local church, or their high school or college class of perhaps 20 guys or gals, from which people could narrow down to their top two or three choices of those whom they would consider marrying.

Today, with online dating, ease of communication and travel, and social media, you can scroll and see all your friends’ friends. Your options are endless, which lead to choice paralysis. Constant second guessing, fear of settling for less, and a swipe mentality—which leads to a disposable view of people—all work against bringing people to a decision. More options have not created more marriages but more indecision.

Dr. Barry Schwartz, author of *The Paradox of Choice*, argues that having too many choices can lead to stress, lower satisfaction, and inability to make a decision. To underscore this point, no one had it easier than Adam. He had one choice, and it was take it or leave it.

The second reason why people aren’t marrying as often is that unrealistic standards and expectations have skyrocketed.

Social media, photoshop, filters, influencer culture, Hollywood, and pornography have produced attraction inflation, perfectionism, comparison addiction, and a belief that good relationships must feel like movies and real people can’t compete with digital illusions.

Hence everyone is looking for the perfect mate.

These issues are compounded by the fact that



very few have a correct understanding of what marriage truly is. The world teaches that marriage is a contract. A contract is a legal agreement between humans that is designed to protect self-interest.

It says, I'll do my part if you do yours. It's built on conditions. If one party breaks it, the other is free to walk away. But marriage in God's eyes is much deeper than that. Marriage is not about fairness, its about faithfulness!

Marriage as defined by the Bible is not a contract, but a covenant. While a contract is based on self interest, a covenant is based on surrendering self interest. It says, Even if you fail, I will remain faithful. It's unconditional, grounded in commitment.

In the New Testament, Christ's relationship with the Church is described as a marriage covenant.

"Husbands, love your wives, just as Christ also loved the church and gave Himself up for her" (*Ephesians* 5:25). That's not contractual love, that's sacrificial, covenantal love.

That's why wedding vows say things like: "For better or worse, for richer or poorer, in sickness and in health . . ." These are covenant words, not contract terms.

You're promising faithfulness regardless of the circumstances—not because of them.

As an amateur Adventist matchmaker, one of my primary goals is to help our Adventist single people recognize how important

marriage is and gain a correct understanding of the marriage vow.

When you truly know and understand the definition of marriage as a covenant, you recognize that love doesn't ask, "What are you bringing to the table? Instead it asks, "What am I bringing to the table to help my future spouse become more like Jesus?"

You realize the goal of marriage is not comfort but character, not escape but endurance.

A real challenge that applies to our young adults who are pursuing a professional career path are the years that pass while many are so focused on academia and getting into a good residency that they are not prioritizing marriage. In their late 20s, they now want to make marriage a priority, yet come to the harsh realization that many of the high-quality gals and guys have now paired up, and it is now slim pickings.

THEY REALIZE THEY ARE NOW LATE TO THE POTLUCK

In light of what I have observed and what I have learned, if you think that someday you may want to get married, then—at a minimum—in college you should begin to have serious and earnest reflections about marriage.

"If those who are contemplating marriage would not have miserable, unhappy reflections after marriage, they must make it a subject of serious, earnest reflection now....I wish I could make the youth see and feel their danger, especially the danger of making unhappy marriages."—Ellen G. White, *The Adventist Home*, p. 43. You need to begin praying that God would prepare you to be the right person for marriage and begin praying for your future spouse.

Your parents need to be praying actively for you and for your future spouse.

The Bible does not teach that marriage and work are to be treated as sequential priorities (career then marriage), but as intertwined responsibilities that must be worked on together with God as the ultimate provider and focus. This will improve your chances of finding a spouse that is best suited for you and with whom you can grow together.

“Two are better than one; because they have a good reward for their labour . . . and a threefold cord is not quickly broken” (*Ecclesiastes 4:9, 12*).

Other factors leading to difficulty in finding a life partner for Adventist singles include harboring unrealistic expectations and being too picky. One of the things I encourage our young adults to do is to limit the number of items on their check list to just three to five nonnegotiable items (deal breakers) and three to five preferences. Then use this shortened list as a filter.

Let’s say your current check list is 20 to 30 items long. We have now narrowed it down to just six to ten items to focus our priorities and reduce the number of options to consider.

Items that should be nonnegotiable for any Seventh-day Adventist seeking God’s will for a life partner include:

CORE VALUES

1) Faith. This is the first and most important non-negotiable. We have direct counsel not to be unequally yoked with unbelievers in marriage (see *2 Corinthians 6:14*, see also, for example, *Exodus 34:16*, *Deuteronomy 7:2,3*).

There is no shortage of Adventist men and women who became unequally yoked because the chemistry was just so good. Once married, the honeymoon thrill fades. Now they want to raise their children to love Jesus, but the biggest heathen influence in their children’s lives is their own spouse.

This tragedy can be avoided by heeding God’s Word.

2) Character. Is the person you’re considering marrying teachable and humble?

3) Temperament. How do they react to stress? How do they interact with family and friends? Are they emotionally mature?

4) Fundamental life goals. If you want to be a missionary in the 10/40 window and your prospective life partner wants to live on a farm in North Dakota, your life goals are not aligned.

5) Abuse and addiction free. Do not entertain a plan to marry anyone who exhibits abusive tendencies or behavior, or who is struggling with any addictions. Addiction destroys marriage.

Marriage is life’s multiplier. If they come in with abusive or addictive behavior, more often than not these things will only multiply and amplify during marriage.

PREFERENCES

Preferences are qualities that are nice to have, such as intelligence, a sense of humor, shared hobbies or talents, compatible height, or a particular career or income level.

It is important to note that preferences differ from nonnegotiable principles. The success of a relationship depends more on nonnegotiable things, such as a couple’s ability to be committed, to communicate, and to compromise than on having certain preferences met such as occupation, income, or height.

In conclusion, God intended marriage to be a foretaste of heaven. His original plan for marriage was that it would mirror His intention of becoming one with us. “‘For this cause shall a man leave his father and mother, and shall be joined unto his wife, and they two shall be one flesh.’ This is a great mystery: but I speak concerning Christ and the church” (*Ephesians 5:31, 32*).

An elderly man came to the nursing home every morning at 8:00 a.m. sharp. Rain or shine, he would bring flowers and sit beside the bed of his wife who had Alzheimer’s. One day a nurse asked him, “Why do you come every day when she doesn’t even know who you are anymore?”

The old man smiled and said, “She may not know who I am . . . but I know who she is. She’s the girl I promised to love, honor, and cherish—in sickness and in health—and I intend to keep that promise.”

Marriage was never meant to be as the world defines it—a social construct for companionship—marriage was meant to be a living portrait of the gospel.

This is the essence of a covenant marriage. It is a powerful demonstration of what God’s faithful love looks like to a watching world. God says, “I will never leave you nor forsake you” (*Hebrews 13:5*), and when that principle is revealed in marriage, the world will notice.

From Music to Medicine and Medicine to Ministry

by Denny Hong, MD



DENNY HONG, MD, MPH, and his family are currently serving as missionaries in rural western Kenya at Kendu Adventist Hospital. He completed medical school at Loma Linda University School of Medicine and is board certified in internal medicine and lifestyle medicine. He is married to Jayeon Hwang, and they have three children.

I was born and raised in San Francisco, California, a first-generation American to Chinese immigrants. My parents joined the Seventh-day Adventist Church when I was young and ensured that I attended Adventist schools throughout my life. Like many Asian American parents, they had clear hopes for my future: medicine, law, or engineering.

To their great surprise, I chose a very different path. I studied piano performance, with no intention of becoming a physician. My journey into medicine was anything but straightforward. It was not until after completing two years of music study that I decided to pursue a pre-med track. My piano instructor, a prodigy from the former Soviet Union, suffered from severe tendonitis and could no longer play for more than a few minutes at a time. Watching her struggle deeply affected me. I spent hours combing through medical literature, consulting friends, and relying on the limited wisdom of “Dr. Google,” hoping to find something—anything—that might ease her suffering. In that process, I realized how helpless I was. That realization sparked my desire to pursue medicine.

Because I had started late, my academic path was intense. I took biology, chemistry, and physics in my junior year, reasoning that if I could survive that year, I would be able to pass medical school. By God’s grace I graduated from Loma Linda University School of Medicine in 2015, completed residency training in internal medicine, and later a fellowship in global health and tropical medicine. Like many healthcare professionals, I entered medicine with the simple desire to help people and relieve suffering. During medical school and residency, I worked in homeless and refugee clinics and participated in numerous international health electives. While these humanitarian experiences were meaningful, I felt that something was missing.



That gap became clear during an AMEN (Adventist Medical Evangelism Network) conference, where I was introduced to the idea of the physician as a minister—not only a provider of physical healing, but also a spiritual caregiver. At the time, this concept felt foreign. But after many conversations and prayers with my wife, we became convicted that God was calling us to something deeper. We felt called not only to practice medicine, but to serve as health evangelists—integrating spiritual and physical healing and intentionally sharing Christ through our work.

We asked the Seventh-day Adventist Church where we might be most needed. We were told of a mission hospital in Kenya seeking an internist with tropical medicine training, alongside someone with administrative and financial expertise. That description fit our roles perfectly. After a season of prayer, we moved to Kenya in 2020, just months after the COVID pandemic.

Kendu Adventist Hospital was established in 1925 and has grown into a 175-bed teaching and referral



hospital serving the western region of Kenya. The hospital had not hosted a foreign missionary physician for decades. When we arrived, we were full of naïve optimism.

In those early months, I attempted to transplant American healthcare ideals into an African mission hospital within a developing country. I tracked length of stay and readmission rates, unaware that such metrics had little relevance here. I implemented antimicrobial stewardship programs, operating room protocols, and quality improvement initiatives—most of which met resistance and utter failure.

My role expanded far beyond my job description. In addition to patient care, I mentored local clinicians, lectured in the college, developed curricula, and taught skills to the lab and nursing staff. Outside of clinical responsibilities, I was fixing printers, making promotional videos, tackling software and server issues, and troubleshooting medical equipment with the biomedical team. I quickly learned that mission medicine required doing whatever needed to be done.

After about two years—the so-called honeymoon phase of

missionary service—I experienced profound cultural fatigue and moral injury. Progress was slow and systems resisted change. I was frustrated and discouraged. At my lowest point, God provided me a word rightly spoken in due season (*Proverbs 15:23*). A General Conference (GC) church representative, unaware of my internal struggle, encouraged me in passing not to grow weary in doing good, reminding me of God's promise in Galatians 6:9.

That moment changed my perspective. I realized that hospital metrics, project timelines, and visible success were not measures of my faithfulness. I was laboring for God, not for man. He alone knew the intentions and sacrifices inside my heart. With that understanding, I found the grace to continue—not with less effort, but with greater peace. While the work did not get easier, it became sustainable. With a renewed spirit, I continued to serve for another three years.

I am now entering my sixth year of service at Kendu Adventist Hospital. When friends ask how I like working in Kenya, I always respond, "It is wonderful to be where God has led me and to be doing His work."



Even though we are doing God's work, challenges remain. Our hospital serves a largely indigent population, many of whom cannot afford medical care even at heavily subsidized rates. Non-communicable diseases—diabetes, heart failure, cancer—are rapidly increasing. Yet these challenges have opened doors for lifestyle medicine and for conversations about hope, purpose, and faith. The greatest privilege of my work has been caring for patients I cannot cure. Many arrive terminally ill, with only weeks or months left to live. In those last moments, when medicine has little left to offer, I bring them to the foot of the cross. I have seen patients meet Jesus in their final days, finding peace, forgiveness, and salvation when physical healing is no longer possible. That, to me, is the essence of medical ministry.

Many ask how they can help the mission work at Kendu Adventist Hospital. First and foremost, we need your prayers. Prayers fuel the work and sustain our hospital. Second, because so many patients cannot afford care, contributions to the needy patient fund through Adventist Health International go directly toward lifesaving

medications, surgeries, and blood transfusions. Lastly, you can come to the hospital as a volunteer. The needs are endless—clinical, educational, administrative. Your service will not only change the lives of patients but also shape future generations of African doctors and nurses who will care for thousands more. You yourself will also experience a transformative experience through this service opportunity. Truly, the harvest is plentiful, but the workers are few (*Matthew 9:37*).

The work in the mission field is not glamorous. It is slow, often unseen, and sometimes discouraging. But it is holy work. If God is stirring your heart—to pray, to give, or to go—I urge you not to ignore that call. Somewhere in rural western Kenya, a patient is waiting not just for medicine, but for hope.

And God may be inviting you to be part of the answer.

Our Journey of Care by an AMEN Physician

by Patti Catalano, BSN



PATTI CATALANO BSN

Patti graduated from LLU School of Nursing in 1976, and has worked in the operating room at Loma Linda University Health since 1974. Her love of cardiac surgery led to international mission trips with Drs. Ellsworth Wareham and Joan Coggin. Now she enjoys participating in cardiac surgery with the Loma Linda University Global Health Consortium. Richard and Patti are blessed with two children and three grandchildren.

My husband, Dr. Richard Catalano, is a professor of surgery at Loma Linda University Health. During his career he established Loma Linda as a level one trauma center.

He spent many sleepless nights saving the lives of people injured in car accidents, shootings, or stabbings. He cared for victims of the San Bernardino terror attacks. He removed countless gallbladders, fixed hundreds of hernias, and sat on administrative committees to ensure that LLUH provided top notch quality of care. Recently, he retired and turned his duties over to younger surgeons, allowing us the chance to travel and take it a bit easier.

We were preparing to join the Loma Linda University Church tour to Greece and Turkey in September 2025, when my husband started experiencing more and more pain in his right hip. It progressed rapidly. At first, he dismissed it as arthritic changes—he knew he was due for a left hip replacement due to arthritis. He contacted his orthopedic surgeon who ordered an MRI to see if the right hip should be replaced first. After several days of waiting, the result came through. It was a shock. This was not arthritic involvement, this was stage IV cancer, and the pain was from bone destruction caused by a bulky tumor. Our minds tried to wrap around the news. Canceled reservations, new appointments, and an unknown future. . . . We hardly knew what to pray for.

Bloodwork showed that the primary cancer site was probably the prostate, so we were sent to the urology department. Here they did biopsies while we waited patiently for the pathology results. In the meantime the pain intensified. Days were a blur. When the results came, Richard's urologist sent him to oncology. On our first visit, I remember arriving at the infusion center area. Slowly, my



eyes took in the scene, a room full of pale patients with hollow cheeks, wrapped up in blankets because they felt so cold, wearing beanies on heads that had lost all hair. This was a reality check. We waited with hearts beating in our throats. The kind young medical assistant called, "Richard." We walked back through the tasteful décor of the cancer center to the patient exam room. Several medical assistants asked questions, took vitals, and explained this and that in a friendly manner. We tried to feel at ease.

There was a knock on the door and in came Dr. John Shin, the oncologist, and (as we soon learned) a member of AMEN. He entered with a kind smile, a gentle voice and an introduction. He pulled up a stool and rolled over to face Richard. He began to explain how things would proceed. Richard would take a medicine at home, he would receive six chemo treatments with bloodwork and a visit to the clinic to precede each infusion.



We tried to take it all in. Richard asked some questions and Dr. Shin patiently answered. We asked about the benefits of being vegan. Dr. Shin showed us a graph of research showing huge benefits of a vegan diet with prostate cancer, especially with omitting dairy products. He also recommended getting sunlight; there is research that validates the benefits of being in the sunshine. We appreciated that besides the medical advantages there were also lifestyle benefits. He didn't rush us. He was patient as we asked questions and, in the end, he prayed a beautiful, personal prayer that Richard would respond to treatment and be able to live his life to the fullest again.

Treatment isn't always predictable. The first chemo infusions were easy; the third chemo followed two weeks of radiation. Richard got septic and had to be admitted to ICU. He required TPN and treatment on the very acute care service that he had started. How different to be on the other side! Many of his resident doctors had done their first surgery on Richard's service. Now they tended to him as he struggled to eat and gain strength.

Our journey is not over. At our last visit, after looking at the scans and blood work, Dr. Shin told us that he considers Richard to be in remission. There will be ongoing treatment but the hope of returning almost to normal life gives us renewed strength and joy. The prayers that Dr. Shin offers every visit—where he asks God to join in the treatment of the cancer—touch our hearts and fill our eyes with tears. Having a physician that trusts in the Lord's participation in the treatment gives us peace. The friends that bring us homemade soup, stop for a visit, or drop off a puzzle—these personal touches have blessed our dark hours. The prayers from our pastors, our friends, the coworkers at the hospital and Seventh-day Adventist friends as well as those of other faiths from around the world have given us strength.

These human touches bless us and give evidence of Divine love through the people with which God has surrounded us throughout this experience.

The First Experience by John Shin, MD



JOHN SHIN, MD, is the president of AMEN and an assistant professor of medical oncology at Loma Linda University Health. He has a burden to share Christ with cancer patients. His research focus is on immunotherapy clinical trial development and the effects of lifestyle interventions in cancer treatment. His wife Elisa is a dentist. They are blessed with three children: Sophia, Charis, and Kyle.

I attended my first AMEN conference in 2010, just a few months after starting medical school. Like many students in my class, I felt overwhelmed by the intensity of my coursework and the sheer volume of material I was expected to learn. When I found out that the AMEN conference was free for students, I decided to attend, hoping it would provide a break from my studies and an opportunity to refocus on the deeper reason I had decided to pursue medicine.

I didn't know what to expect, but when I arrived I was amazed to see so many medical professionals who had wholeheartedly dedicated their lives and careers to the Lord. These were men and women who had clearly achieved a high level of professional success, and yet they had come together not to advance their careers, but to learn how their work could be used more fully in the service of Christ. Their testimonies left a lasting impression on me. As I listened to them share how God had used their medical training to be an entering wedge into people's hearts, it crystallized my own understanding of His calling on my life.

That first AMEN conference and my continued involvement with AMEN throughout my medical training became an important source of encouragement and inspiration during some of the most demanding years of my life. In his book *The 7 Habits of Highly Effective People*, Stephen Covey speaks of the importance of beginning with the end in mind. At the beginning of my training, AMEN gave me a vision of what the end goal of faithful medical ministry looks like. During seasons when doubt, fatigue, or disillusionment threatened to creep in, that vision made all the difference.

Through AMEN, I learned that it was possible to pursue excellence in medicine without compromising one's commitment to the Lord. I did not have to wonder whether such a life was possible because I had met so many who were already living it. It has been said that one good example can counteract the influence of a hundred bad ones. Through AMEN, the Lord blessed me with not just one, but many such examples.

Looking back, I am grateful that God connected me with AMEN so early in my career. Our spiritual walk was not meant to be a solo experience, and God in His wisdom places us in fellowship with those who can encourage us and those we can encourage in turn. AMEN has been that kind of blessing in my life, and my prayer is that it will continue to do the same for many more generations of clinicians, inspiring them to dedicate their lives and their careers to the Lord.



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Ooltewah, TN 37363
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Email:
conference@amensda.org