

We were nearing the end of 2 long weeks of eye surgeries and eye exams at an orphanage and mission station serving a small community in Mexico. For weeks, the quiet mission had been bustling with activity because an international surgical and medical organization had chosen this locale for a short-term medical mission.

People had descended on the orphanage with the hope of receiving the gift of sight through surgical intervention or the gift of glasses. It is estimated that the medical mission team assisted in giving sight to more than 2,000 people in 2 weeks.

LESSONS LEARNED

During my youth, I'd heard many missionaries speak and I'd romanticized the life of the missionary. As a young nursing student, I was motivated by the challenge of Christian mission groups who brought the gospel of Jesus Christ and needed medical care to people in third-world countries. Unfortunately, my young view of God saw him as a genie who would magically bring things about if I truly desired such changes. I had seriously underestimated the discipline and obedience required of a person who seeks the will of God in the service of others.

My family had served at the mission and orphanage the year before. During that week in Mexico, God set me straight by showing his unfailing faithfulness and love. Knowing my heart, he had patiently waited 20 years for me to



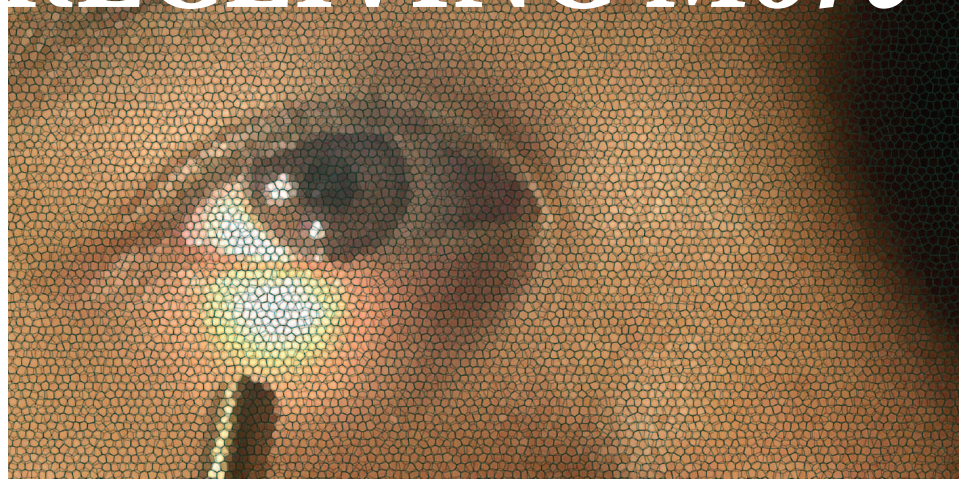
Council of Science Editors Global Theme Issue on Poverty and Human Development



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Healthcare

RECEIVING *More*



prepare myself. I am grateful that in the school of the soul God has plenty of time to teach valuable lessons. I discovered that my service has nothing to do with my locale, but rather with my relationship to God. I realized that the people I served in the medical clinic in Mexico were no different than the indigent I served in the Californian hospital. They just happened to be on the other side of the California-Mexico border.

I learned that ministry in Mexico is no different than ministry at home. The needs of people may present in a different manner, but people everywhere have needs. I left the mission with peace that missions abroad was not God's calling for my life. Rather, God had provided ample opportunity for service in my own hometown.

A REAWAKENING

I was surprised the following summer when the opportunity arose for our family to return to the orphanage. Unknown to us, the plans for our trip to the orphanage coincided with the second week of the international surgical and medical mission project.

Our family saw God move in profound ways during our week in

Mexico. Each day, hundreds of people came with the hope of being cured from their visual impairment. It was amazing to see how many patients the medical team could treat each day. Patient time was focused on physical and spiritual needs rather than the bureaucracy of patient care. Charting was limited to a 3 x 5-inch card. Medical students from a California university prayed with patients during the pre- and postoperative periods. After surgery, each patient was given a warm meal and experienced the gospel through listening, a caring touch, words, and tracts.

I will never forget the responses of those who were given the gift of sight. I recall a man who had been partially blind most of his elderly years due to cataracts. As I entered the postoperative clinic, he sat with dark glasses clutching his Bible. As the doctor removed the dark glasses, he opened his eyes, looked around the room, raised his Bible in the air, and proclaimed, "I was once blind but now I see!" His statement reminded me of the time that "Jesus put his hands on the man's eyes. Then his eyes were opened, his sight was restored, and he saw everything clearly" (Mark 8:22-26).

MISSION: *than* YOU GIVE

by Pamala K. McCarver

“I was once blind but now I see!”

The source of healing that occurred during our time in Mexico was not just the medical team, but Jesus Christ.

My experience as a surgical nurse and my previous work at the mission clinic provided an invitation to participate with surgical staff. One case touched the heart of the whole team. On the second to last day for surgeries, there were more patients waiting than surgery time or supplies would cover. The surgeon had the unenviable task of deciding who would be scheduled for the final cases on Friday. The final patient was selected, but the nurse in charge informed the doctor that the team had only four pediatric suture packets and six children scheduled for surgery. The doctor was adamant about adding the final case and said, “We will figure it out.”

I walked over to the patient who was sitting on her mother’s lap and I understood. I saw a beautiful, 18-month-old girl with strabismus, an abnormal eye condition that causes the eyes to cross. In the United States, strabismus is a simple pediatric condition corrected with surgery. In Mexico, strabismus would

wreak havoc on the life an indigent child. Through an interpreter, I learned that the young girl was named Sonja. Her parents lived near the California–Mexico border. The young mother had traveled more than 100 miles in hope of a miracle for her daughter. Without the surgery, her daughter’s future would be limited.

Adult surgeries were performed in the clinic with the patients under local sedation. The pediatric cases were carried out in the local hospital with the children under general anesthesia. I was invited to participate in the pediatric cases on the last day. The medical staff, patients, and parents gathered early and traveled together by van to the local hospital. Sonja, who was sitting on her mother’s lap, had no clue about the impact that this journey would have on her entire life.

Sonja was just like any other child in preoperative care. She was irritated that she was awakened so early and frustrated because she was not allowed to have her morning bottle. As Sonja was carried into the operating room, she proclaimed her displeasure. The

surgeon asked whether he could hold her, and he rocked her as the anesthetist put her to sleep.

Earlier, I had wondered how the surgeon would perform six pediatric surgeries with only four suture packets. It did not take long for me to discover his technique. Because of ample resources in the United States, I have never been limited in supplies. Here, I learned that the surgeon would have to tie the suture together, knot by knot, not wasting any of the invaluable resource. It was an extremely tedious process. When the surgery was complete, we admired the finished product, a beautiful little girl with corrected eyes. The tedious process was more than worth the labor. It was a labor of love.

As is often said of mission trips, I gained so much and gave so little in return. For 1 week I was free from the bondage of policies, procedures, meetings, computers, paper work, and all the tedious rules that bog healthcare. In 25 years of nursing, I have witnessed healthcare providers grow frustrated because their jobs emphasize technology over personal interaction. I discovered that I too had become a technology specialist, when in reality I had entered healthcare to be a caregiver. I went to nursing school out of a sense of calling, but somehow my calling to care had turned into just a job.

Surprisingly, in the middle of nowhere, with limited conditions, God reawakened and revitalized that sense of calling. My life and my work have not been the same since that week in Mexico. I now work per diem as a nurse. The bulk of my time is spent giving care to disenfranchised, sick, and dying individuals. In Mexico, I discovered that the heart of God is with the weakest among us, and those are the people I now serve. There is nowhere else I’d rather be.

But isn’t that how God works? 🙏