

The relationship between CMF and UCCF

Memorandum of Understanding



uccf:thechristianunions
making disciples of Jesus Christ in the student world

History, values and vision

UCCF and CMF have enjoyed a long and fruitful partnership in the gospel. It is our hope that this partnership will strengthen, in the service of God's Kingdom.

CMF was founded in 1949 by the very influential UCCF (then IVF) leader, Dr Douglas Johnson when the medical division of UCCF's graduate fellowship united with the Medical Prayer Union, a body in existence since the 19th century. Johnson was General Secretary of IVF from 1924 to 1964, and of CMF from 1949 until 1974.

CMF was the first and largest of UCCF's affiliated professional groups. These ministries were an integral part of UCCF's overall mission until the 1990s, extending beyond university as those studying vocational subjects were equipped for lifelong witness in their professions.

CMF and UCCF share the same values and employ identical doctrinal bases, CMF even adopting UCCF's more recently modernised wording. In fact until the 1990s CMF was not even able to change its constitution without the approval of UCCF. We both seek to partner with local churches as we work with students and doctors. We share the same vision for evangelism, in our different spheres: for UCCF, 'to give every student in Great Britain an opportunity to hear and respond to the gospel of Jesus Christ'; for CMF, 'to encourage Christian doctors and medical students to be witnesses for Christ among all those they meet.'

CMF's first student staffworkers (from 1973 until 1988) were employed by UCCF and seconded to CMF; CMF's first Student Secretary Peter Saunders, appointed in 1992, was initially employed by CMF and seconded to UCCF. Although this formal arrangement no longer holds, CMF staffworkers' contact details still appear in the UCCF staff handbook as close UCCF partners.

CMF's student ministry

The student ministry of CMF is overseen by the head of student ministries (4 days per week), supported by an office team including two associate Heads (2 days each) and a coordinator (full time). Our field staff include one staffworker (2 days) and three associate staffworkers (1-2 days each).

We hold our annual student conference in the second week of February, with an attendance of 350-400. In the week prior to this is our international medical students' conference, aimed at medical student leaders from Europe, the former USSR and METNA countries. Up to 20 students attend this conference before joining UK and Irish students for the main conference.

We also hold regional conferences, and our Irish weekend conference attracts about 50 students. Annually, we run several day conferences in medical schools, including the evangelistic courses 'Confident Christianity' and 'Answering other Faiths'.

In the summer we run a summer school for up to 20 key student leaders covering topics such as medical ethics, writing, mission and apologetics in more depth.

Summer also sees our summer teams, usually to countries in the former USSR; we generally run 3 or 4 each year, each for about one week with a few students and doctors in each team, providing medical, ethical, and Bible teaching.

Each year we run student leader training: for the UK in general, and separate smaller conferences each for Ireland and Scotland.

CMF student department produces a student journal, 'Nucleus' three times a year, also available online (<http://www.cmf.org.uk/publications/nucleus.asp>).

Links to all these events and publications can be found on our website (www.cmf.org.uk/students) and on our Facebook page (www.facebook.com/ukcmf).

We support local university CMF groups in each one of the 40 medical schools in the UK and Ireland. Each group is run by CMF student reps, with local support from our 'Medical School Secretaries', who are local CMF doctors, and from CMF field staff if available.

Same team, different roles, some overlap

UCCF and CMF (and others) are still pursuing the same goals and share a very close relationship. We are part of a big team, with different roles.

History	Maths	Medicine	Physics	English	French
		Juniors			
		Hospital GP Overseas			

UCCF works with students in universities and colleges in GB, CMF with all those in medicine in the UK and Ireland, as well as with those from these countries working overseas. There is therefore an overlap, as a career in medicine begins as a student.

Students have been able to join CMF as associate members since its inception, and have been full members since 2001. Nucleus was first published in 1971. Currently there are around 1,000 CMF student members served by a student staff team of nine (including interns). CMF needs to be involved in work with students for two main reasons, one principled and one pragmatic.

Firstly, pragmatically, people who join CMF do so when they are students. Few join later on.

Secondly, and more importantly, medical students will be exposed to secular thinking in medicine from their first year at medical school: to a reductionist, naturalist understanding of health and healing. CMF is the best placed organisation to help Christian medical students develop a specifically biblical understanding of medicine and what it means to become a doctor, and to serve

Christ in our profession. We must not wait until they are doctors before we do this. By then it is often too late.

Which is why CMF's aims include, but are broader than just evangelism; we exist 'to unite Christian doctors and medical students in Christ, and to encourage them to deepen their faith, live like Christ, and serve him obediently, particularly through acting competently and with compassion in their medical practice'; 'to promote Christian values, especially in bioethics and healthcare, among doctors and medical students, in the church and in society'; and 'to mobilise and support all Christian doctors, medical students and other healthcare professionals, especially members, in serving Christ throughout the world'.

We believe it is crucial that Christian medical students are involved whole-heartedly in their churches; and involved whole-heartedly in CU, as witnesses to Christ in their university; and involved whole-heartedly in CMF, witnessing to those they meet in medical school, and developing a Christian mind-set and motivation for their medicine.

General suggestions for medical students in church, CU and CMF

All Christian students should be involved in a local church. Christian medical students, at least in their first three years of study, should also be actively involved in their CU. Christian medical students should also be part of CMF preferably from their first year at university.

- CUs should be able enthusiastically to encourage medical student members to join CMF
- CMF groups should enthusiastically encourage their members to join their CUs

There is great diversity in the way different medical schools structure their courses and there is similar diversity in how individual student CMF groups organise themselves. There is no 'one size fits all' model. However, some sizes do not fit anyone: CMF should not become an 'alternative' to CU; it is 'both-and' rather than 'either-or'. It is complementary, rather than alternative.

CMF student meetings serve three main functions:

1. To do the things that no-one else does (eg, medical ethics; whole-person medicine; patient evangelism; overseas medical mission).
2. To encourage and develop fellowship between medical students and local doctors.
3. To act as a faculty subgroup of the CU in reaching their student colleagues for Christ.

There is likely to be an increasing need for the first two functions as students progress from first to final year. In many universities there is still a clear division between pre-clinical and clinical (traditionally the first two and last three years of the standard five year course), but in a growing number of universities this distinction is blurred, and even first year students are in contact with patients.

Even in those universities where students do not spend much of their first two years in hospitals

they are very conscious of their need to be thinking through how their vocation integrates with their faith. However, CMF group meetings should not prevent CMF members from being fully involved in Church or CU. We would not necessarily envisage CMF student meetings as regular, weekly events for example, although some may prefer this pattern to complement the ministry of the wider CU. In some locations the pattern is one of termly student/doctor evening meetings; and/or monthly or half-termly 'medical topic' meetings.

The role of the CMF student leaders is to liaise with CMFs central team, and with CMF doctors locally as they organise conferences and meetings together.

It is the third function that most clearly involves the CU's support and partnership.

Faculty-based evangelistic meetings can be effective for three reasons: meetings can be held in faculty buildings and planned around lecture timetables (this usually encourages better attendance); friendships are often intra-faculty (this is especially true of medicine and other lab-based subjects); lunchbar topics can be chosen to suit issues relevant to that faculty.

Whether or not CMF existed, it would make sense for CUs to encourage faculty subgroups to organise evangelistic meetings within their faculties, and to meet together to pray for their witness. Generally, these meetings would necessarily, be during the day – as this is when people are in their faculty buildings together. Although these meetings might be weekly (and we hope they will be!), this would not be 'alternative' to CU, and would not encroach on the main campus-wide CU weekly evening meeting. Instead, it would be fundamentally integral to what CU is all about: witnessing to fellow students on campus. Some CUs already have faculty prayer groups instead of hall groups, as in some universities faculties are felt to be the more natural mission-field than halls.

CMF groups are perfectly placed to fulfil this role; they have an identity, they have medical-specific resources and training available, and they have links with local doctors and the national CMF student team to provide speakers.

But they should be fulfilling this role as part of the CU's wider mission. It would be hoped that a successful CMF faculty-subgroup could be a model for other faculties to do the same. And it should be as part of a joined-up strategy. CMF leaders should therefore see themselves as part of the CU team, closely liaising with the CU committee.

Clinical

As medics progress towards qualification, they spend an increasing proportion of their time in hospital and on attachment away from their base university.

It will become more and more difficult for students regularly to attend CU, and they will rarely be physically present on campus to support evangelistic events – nor will their non-Christian friends necessarily come to such events on campus. CMF is able to link students with local doctors on those placements, and there may well be hospital based prayer meetings or other healthcare fellowships available. The role of regular CMF student meetings becomes more important. Evange-

listic meetings might be best run in a room in the hospital.

We would still encourage the student leaders of the CMF to liaise with the CU leaders, to support each other's programmes in prayer, and to be able to plan joint mission events together.

Other exceptions

*If the medical school is entirely distinct from the rest of the university, then the CMF group is effectively the CU. We would hope they would work with the UCCF staffworker as would any CU, but that they would also fulfil the other roles of a CMF group and that our own student staff, if available, should be more actively involved.

**If the university campus is entirely 'healthcare', the CMF group would function as in other universities, as a subgroup of the CU for evangelism. With so many more medics, nurses and allied health professional involved in the CU, it is likely that the CU will be made up of CMF, CNM or AHPCN members, all of whom will share the aim of equipping members to serve Christ in healthcare, and so it is likely that those groups will all have more of a role in the programme of the CU than in other universities.

Mature students. There are increasing numbers of graduate-entry programmes to medicine. These courses are often more intense and hospital-based, and older students will probably also be less likely to get involved in undergraduate CUs even if they were able to. Effectively, they are in a similar position to clinical students on traditional courses. Hospital-based fellowships and CMF meetings may be more appropriate than trying to encourage active attendance at CU.

*Barts (geographically separate from QM), possibly Imperial (co-located, but otherwise the medical school is entirely separate from the rest – separate student union, bar, sports etc); Peninsula and HYMS could also come into this category (medical schools each within two or more different universities and therefore have a unique identity separate from their parent universities)

** KCL Guy's campus; St George's; RCSI

Some suggestions for visibly strengthening the relationship between CU and CMF

Co-membership

- Promotion of local CU membership by CMF and vice versa: eg, notices and flyers at respective meetings
- CU and CMF to share freshers' fair stalls
- UCCF staffworker to encourage Christian medical students to be involved with CMF and vice versa
- Sharing membership mailing lists
UCCF to pass on pre-uni church lists of medic/nursing freshers to CMF

CMF as faculty subgroup

- Local CMF groups to be recognised as faculty subgroups of CUs for daytime evangelism and prayer within their own departments; for occasional subject-specific other meetings as appropriate; and for organising faculty-specific mission events
- Local CMF reps to liaise regularly with CU committee and collaborate on planning time-tables
- Named CMF rep to be identified as such by CU committee to facilitate this
- Student CU and CMF leaders to collaborate in appointment of CMF leaders' successors
Each to promote events of the other

Mission and evangelism training

- Local CMF groups to be involved in CU University Missions
- CMF rep to be on (or in close liaison with) CU mission committee
- Local CMF groups to invite CU participation in 'Confident Christianity' and other appropriate CMF conferences
- CU staffworkers invited to help lead CMF evangelism training days
- UCCF to collaborate with CC course revision
CU to invite CMF doctors as mission 'guests'

Staff

- UCCF staffworkers to support groups on medics-only campuses as they would any CU, and to support medics' groups in other campuses as they would any faculty sub-group
- Local CMF reps, Medical School Secretaries, and local CMF staff to liaise with UCCF staffworker, as well as with local churches
- UCCF staffworkers to feel free to contact CMF with any concerns
- UCCF and CMF to collaborate with training. Eg, CMF invited to UCCF staff training and Forum, UCCF representatives invited to CMF leaders training and annual conference
- CMF staff invited locally to regional training days
- CMF staff to contribute more actively to UCCF staff and relay training especially on issues at the interface of Christianity and medicine (eg Forum, UCCF Staff conference, Regional team days etc)
- UCCF involvement in appointment of CMF student staff
- CMF staffworkers to be considered as UCCF associate staffworkers
- CMF interns to be considered as UCCF relay workers for training purposes
- Potential role of Joint CU/CMF staff-workers

Publications

- UCCF and CMF websites to link to each other appropriately
- UCCF and CMF literature to make appropriate reference to each other's work among students
- UCCF to contribute to CMF student leaders' manual

cmf.org.uk
uccf.org.uk