



TH
TRIPLE HELIX

DOUGLAS JOHNSON & THE BIRTH OF CMF

HEIRS OF THE PAST, CHILDREN OF THE PRESENT,
& MAKERS OF THE FUTURE
CMF IN THE NINETIES

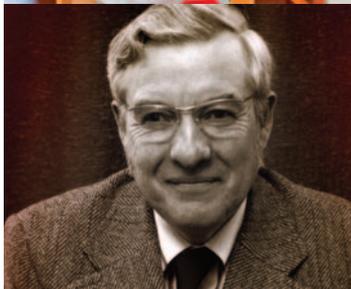
spring
2024

86





TRIPLE HELIX



86 spring 2024

- 04** news & comment
crisis in midwifery - Gemma Griffiths
a confluence of evils - Trevor Stammers
McArthur 'Assisted Dying' Bill announced
- Dr Gillian Wright
- 06** 40 years on: CMF in the nineties
Andrew Fergusson
- 08** CMF & ICMDA: a personal view
Peter Pattison
- 10** heirs of the past, children of the present,
& makers of the future
Paula Busuulwa
- 12** handing on the baton
Steve Fouch & Liz Capper
- 14** hearts set on pilgrimage: where to next?
Bex Lawton
- 16** Keith Sanders: saved through the flames
Mark Pickering
- 18** lessons from the archive 6:
Douglas Johnson and the birth of CMF
Mark Pickering
- 22** prayerful mountain books
Andrew Fergusson
- 24** reviews
- 26** fellowship news
- 31** listen to the Lord
Alisdair Fyfe



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Tel 020 7234 9660
Email communications@cmf.org.uk
Web cmf.org.uk

President John Wyatt MD FRCPCB
Chair Euan McRorie FRCP
Treasurer Howard Lyons
Chief Executive Mark Pickering MRCCGP

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Managing Editor Steve Fouch
Editor David Smithard

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We need to receive submissions for the autumn 2024 edition by 30/8/2024. Please send them to Steve Fouch at: communications@cmf.org.uk



standing on the shoulders of giants

Mark Pickering is CMF Chief Executive and a prison GP



Welcome to the CMF 75th anniversary edition of *Triple Helix*! In case you missed it in all our other correspondence, on 22 October 2024, it will officially be 75 years since the Christian Medical Fellowship was formed. My article on page 18 tells the story.

Looking back may feel a little self-indulgent, a bit of back-patting to make us feel good. Yet celebrating birthdays, anniversaries, and other important milestones can be a wonderful opportunity to recall treasured memories and important lessons.

Nor are we simply looking backwards in this edition. We want to look forward and see where God may be leading us. But, as Isaac Newton once said, we can only see as far as we do because 'we stand on the shoulders of giants'.¹ There are many fascinating and far-seeing people in our organisational history: luminaries such as Golding Bird,² William Burns Thompson,³ George Saunders,⁴ Harold Moody, Mary Scharlieb,⁵ Douglas Johnson, Keith Sanders (see articles on both of these former CEOs in this edition), and many, many more. We honour them for all they did, and even more, we honour the Lord for all he did through them.

Over the last couple of years, I have been sharing their stories and the lessons we can learn from them in this magazine. But can a 75-year-old institution have anything new to say and do?

I am reminded, from Genesis 12:1-7, how God called the 75-year-old, childless Abram and his wife Sarai to travel from their home in Haran to far-off Canaan. Over the next 50 years, Abram got a new name (Abraham), a new country, two sons, and a covenant with the one true God. He became the father of a nation into which we and billions of others have been grafted, to this very day.⁶

If God could have a incredible future in store for Abraham at 75, I feel confident that he can still have one in store for us at CMF.

There are many changes and challenges ahead. In the last decade, we've already seen nurses and midwives join the fellowship (see Liz Capper and Steve Fouch's article on page 12). The family of CMF continues to grow and diversify!

At the same time, the British health services are in crisis like never before. The global health emergency continues to suffer from the after effects of COVID-19, and the poorest nations struggle to provide accessible healthcare. War rages in Ukraine, the Middle East and many other places, with all the implications for the health and wellbeing of those caught up in it.⁷ New technologies, from artificial intelligence to genetic engineering, are reshaping health and social care in unprecedented ways. And law changes on abortion and assisted suicide look increasingly likely to happen in the next few years. The list goes on and on.

How will we respond as Christian health professionals – prophetically, wisely, graciously, and truthfully? CMF has unique opportunities to help Christians unite, speak, and act in all of these and the many other challenges within God's world. But we can only do this through our members, like you, supporting us in prayer, time, expertise, and finance.

One of the greatest lessons we have learned from those who have gone before us is to invest in the next generation – students and juniors are not just our future but our present. We also need to hold on to the truth of the gospel and keep faithful to Scripture in all our work and thinking. But first and foremost, we have to listen – to the Lord, to one another, and even to those we disagree with. We need to find fresh and helpful ways to meet with and encourage one another. And we must also be agile – ready to adapt to new circumstances and respond to new challenges and opportunities with a clear and consistent vision of where

God is leading us. For, like Abraham, we are ultimately looking ahead to an eternal destination, built by God himself.⁸

I am excited to explore the future into which God is leading us. I hope you will join us on that journey! ●

I am excited to explore the future into which God is leading us



SCAN FOR MORE

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crisis in midwifery

full story at cmf.li/3SG4qOe



Gemma Griffiths is a Growth Assessment Protocol (GAP) Midwife in Northampton, and the CMF Nurses and Midwives Staffworker

Midwifery was in the news for all the wrong reasons at the end of last year, and again in mid-May this year. As a midwife of ten years, I was heartbroken to read headlines from *The Times* saying: 'Midwives' "toxic" working conditions putting babies' lives at risk, report finds',¹ and *The Telegraph* saying: "'Russian roulette" maternity units risk lives of mothers and babies, say midwives'.² Both articles reference a report published by the Association of Radical Midwives (ARM) about bullying in midwifery and why midwives have left, or want to leave, the profession.³

If I thought the news headlines were hard to read, the report's content knocked me for six. Reading almost 150 pages of first-hand accounts of incivility and bullying of staff, some at the hands of the very people who were supposed to advocate for them, reduced me to tears. I found myself echoing David's words to God in Psalm 13: 'How long Lord?...How long will my enemy triumph over me?' I have been very blessed in my career to have never experienced bullying, but I grieve for my fellow midwives who are suffering. First, an erosion to the way the art of midwifery can be performed, next, chronic staff shortages and burnout, and now this!

Meanwhile, on 13 May 2024, The All-Party Parliamentary Group on Birth Trauma released a report on the appalling inconsistency in maternal care across the UK. It shockingly found that in much of the UK, poor maternity and postnatal care is 'all-too-frequently tolerated as normal'. The report estimates that 30,000 women a year suffer negative experiences during labour. One in twenty go on to develop post-traumatic stress disorder.⁴

Both reports repeat the call of the Royal College of Midwives for more midwives to be trained and employed for the safety of mothers and the protection of staff.⁵

It certainly seems like a dark and hopeless time for midwifery and maternal healthcare in the UK. I mourn for the student midwives who are trying to learn how to care for women in a system where 'care is being

squeezed out in the interest of efficiency'.⁶

I mourn for the newly qualified midwives, who are expected to take on too much too soon because there is no one else to do it. I mourn for the midwives who don't feel like they can speak out against bullying for fear of their jobs being made harder than they already are. I mourn for the mothers and their babies traumatised by inadequate care, and I mourn for the loss of my great love, my calling, this huge part of me...

...And yet, I could tell you so many stories of the selfless, Christ-like care I have witnessed midwives giving at my Trust, enough to fill an entire newspaper.

As a profession, we need to be actively speaking out against bullying and speaking up against the poor working conditions that midwives face, and poor standards of care that too many mothers experience. We need to lobby at every level for meaningful change, more funding, more training and recruitment, and for better wellbeing strategies. Most importantly, we need to pray actively, calling out to the God who hears our prayers⁷ for peace, for us to be made more like Christ, and that he would bring his kingdom through us to transform our workplaces. I pray that our culture would be so radically changed from negative to positive that the newspaper headlines would only be able to tell of the amazing things that midwives do. ●

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a confluence of evils:

the disturbing link between euthanasia and meeting the demand for organs

full story at cmf.li/3P0jVOT



Trevor Stammers is a retired GP and a former lecturer, course director, and editor in bioethics.

There are times when you see a confluence of evils merging from afar, but they merge so slowly that most people remain totally unaware of them, or if they are, they simply shrug their shoulders and move on. I first wrote about my concerns over organ donation from those requesting euthanasia (ODfE) in 2017 when Belgium was at the time pioneering the practice.¹

Canada has now overtaken Belgium, embedding the practice right from the introduction of its 'medical assistance in dying' (MAID) legislation.

A recent worldwide scoping review of ODfE found that 39.7 per cent of the papers were from Canadian experiences. Canada leads the world in harvesting organs from the euthanised.² One study of Canada, Belgium, the Netherlands, and Spain, found 286 donors seeking euthanasia donated organs to 837 people; nearly half the donors (136) came from Canada.³

Very recently, Canadian policy guidance was updated. Several new recommendations are of concern, including:

'...patients who are potentially eligible for organ donation should be approached for first-person consent for donation after MAID once MAID eligibility has been confirmed...

'Organ donation organisations and transplantation programs should develop a policy on directed deceased donation for patients pursuing MAID, in alignment with the directed donation principles and practices that are in place for living donation in their jurisdiction'.⁴

Thus, should a person requesting euthanasia have a relative in need of an organ, such a 'directed donation' after euthanasia could easily add pressure for the donor to go ahead with their death. Meanwhile, Canada has once again postponed a decision on offering MAID solely for psychiatric distress. Experience in other countries where ODfE is already offered to those with mental disorders shows why organs from such cases are especially desirable

McArthur 'Assisted Dying' Bill announced

full story at cmf.li/3TTvhGO



Dr Gillian Wright was a palliative medicine registrar in Wessex and Glasgow. She is now a senior researcher in medical ethics for the Scottish Council on Human Bioethics. She also works for Care not Killing as the Director of the 'Our Duty of Care' campaign.

On 29 March 2024, Liam McArthur, MSP, announced his 'Assisted Dying for Terminally Ill Adults (Scotland) Bill' to the Scottish Parliament.¹ If passed, it legalises within the Scottish NHS doctor-assisted suicide for those with an advanced illness. This would mean that a 'terminally ill' patient of 16 years and above, with mental capacity, registered with a Scottish GP, and resident in Scotland for one year, will be eligible.²

Terminal illness is defined remarkably broadly as:

'An advanced and progressive disease, illness or condition from which they are unable to recover and that can reasonably be expected to cause their premature death.'

This will likely include advanced heart, respiratory, liver, and renal disease, progressive neurological conditions, and advanced cancer. There is no time limit (such as six months) nor any stipulation that there should be the presence of physical or psychological suffering. Two NHS doctors will be involved in the assessment and advisory process, but the patient will self-administer the medication.

There will be a two-week reflection process to allow the patient to change their mind. But we know this is not long enough to get a psychology assessment on the NHS nor even

to assess response to an antidepressant. This reflection period can even be reduced to 48 hours if thought necessary.

The Bill also requires that death certificates list the underlying illness as the cause of death rather than the ingestion of a lethal substance.

The Association of Palliative Medicine conducted an opinion poll of its members in Scotland in 2022 and found that 95 per cent would not prescribe these lethal drugs, even if patients asked for them.³ Forty per cent would leave their jobs if it was introduced in their clinical setting. They know that patients may not have a real choice if they don't get access to the right care.

Previous Bills were defeated in the Scottish Parliament in 2010 and 2015, but many are considering this Bill much more likely to pass, with many MSPs already stating their support for it. However, there was a mixed response in the press at the launch, with the Bill coming under much more criticism than might have been expected. Some commentators, such as Euan McColm in the Scotsman, expressed concern for those who might feel a pressure to die and the unintended consequences on those who are most vulnerable – ie those with mild learning disabilities and autism, those who are homeless, or those with early dementia.⁴

The next step is the appointment of a Committee to review the Bill. This will take written and oral evidence before a vote in the Chamber. If the Bill passes at this first stage, it proceeds to a second stage where it will be reviewed clause by clause and amendments will be taken. A second vote will be held at that stage – if in favour, the Bill will become law.

If you live in Scotland, write to your MSP and MP to express your concerns. Many are still undecided. North or south of the border, please join Our Duty of Care (ODOC)⁵ to oppose the Bill with other concerned health professionals. Please email info@ourdutyofcare.org.uk for further information.

Your voice matters – we all need the right care at the right time in the right place, not medicalised killing. ●

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for transplantation. These patients are often very young and have organs that may consequently last for decades. One study in the Netherlands shows that between 2012 and 2022, whilst psychiatric cases only constituted two per cent of all patients given euthanasia, they accounted for 29 per cent of all organ donors following euthanasia.⁵

Public trust is crucial to maintaining deceased and living donations. Those wanting to take things a step further than ODFE by promoting euthanasia by the removal of vital organs (ERVO) show themselves all too aware of this when they state:

*'Regardless of a possible change in the law, it is crucial to avoid that the general public is given the impression that there is a "hunt" for organs, to take vital organs from a living patient.'*⁶

ERVO is the next logical step in the relentless progress of what a medical colleague calls 'organ greed'. Euthanasia by removing the heart from unconscious anaesthetised but living patients would maximise the use of organs. While ERVO would undoubtedly violate the dead-donor rule, calls to scrap that rule have existed for

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at least a decade.⁷ Though the utilitarian cases for ODFE and even ERVO are overwhelming, from a biblical perspective, we should not 'do evil that good may result'. (Romans 3:8) Euthanasia and assisted suicide are both unjustified evils,⁸ even if others may live longer as a result of receiving the organs of those whose lives have been so ended. ●

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Andrew Fergusson

is a retired GP and served as CMF General Secretary from 1990 to 1999 and CMF Head of Communications and Public Policy from 2007 to 2011

Andrew Fergusson shares his memories of serving as CMF General Secretary in the 1990s.



40 YEARS ON CMF IN THE NINETIES

key points



- After years of medical practice and involvement with CMF as a student and a junior doctor, the author joined the staff team at CMF under the second General Secretary, Keith Sanders.
- Emerging communication technologies, alongside rapid social, political, and spiritual changes in the UK and worldwide, significantly changed the environment in which CMF ministered during the nineties.
- Despite these and many other challenges, under God's good grace, CMF has grown and developed under successive leaders to become a Christian fellowship across the professions.

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joined the staff of CMF in April 1989 as Assistant General Secretary to Keith Sanders, taking over as General Secretary when he retired in October 1990. From the beginning, he gave me four portfolios: students, juniors, literature, and the Medical Study Group, while keeping general admin, missionaries, and ICMDA for himself.

During ten years as a GP at Brook Lane Medical Mission, I had already been active on CMF's Junior Doctors Committee and the Medical Study Group. I had written several book reviews, so I knew how CMF worked. In my first month, I had *carte blanche* to meet as many people and institutions as I wanted, and among my visits was a day with Douglas Johnson (affectionately known as 'DJ') and his wife. I would be drafting his obituaries a few years later.

The office team were great, though several age-related retirements had to occur, and technology was beginning to change everything. The new Fax machines sent text quickly around the world (and arguably, helped speed up the collapse of Communism),¹ word processing was arriving, and something called the Internet was almost in sight.

DJ always used to say, *'If you take care of the students and the literature, the rest will take care of itself'*. Dialogue 89, an evangelistic roadshow to students, was underway as I arrived, and over the years, it morphed into the Confident Christianity programme. Towards the end of the decade came the Saline Solution course in being an effective witness to Christ.

Regarding 'literature', DJ's son, CMF chair Alan Johnson, pressed me to improve the appearance and content of our publications, but I had to ask his advice and permission for CMF to respond to the first BBC request to do a live broadcast. Over-prepared, I drove to BBC Radio Bedford to debate for an hour with the then-leader of the Voluntary Euthanasia Society. Great fun! And I think we won. That was the first of now countless radio and TV broadcasts by members and staff as more and more medical issues highlighted the rapid changes in Western culture and the need for a thoughtful Christian response.

But, following a generous gift, it was the appointment from January 1992 of Peter Saunders as the first full-time CMF Student Secretary that marked the real take off for CMF becoming a significant player in national life, often in collaboration with other co-belligerents. Realising that the campaign against legalising euthanasia and assisted suicide needed more than reciting the Sixth

Commandment, CMF effectively founded and funded HOPE – Healthcare Opposed to Euthanasia. National and international broadcasting and campaigning took up much of my stint at CMF.

CMF was, therefore, sometimes working with the Roman Catholics, and I have great respect for my many friends there. We also became more and more involved with the Evangelical Alliance and its coalitions ECOS (Evangelical Coalition on Sexuality), ECOD (Evangelical Coalition on Drugs – looking at alcohol and other substance abuse), and ECONS (Evangelical Coalition on New Spiritualities and the Occult). Previous tensions with other organisations around the charismatic movement were slowly resolved.

With my experiences of 14 years working in the NHS with other health professions and being saddened by the demise of the Nurses Christian

Fellowship, I have always wanted to see a multidisciplinary Christian organisation in the UK. I am glad about what is now happening in CMF with nurses and midwives as full members. But CMF will always remain a 'Fellowship', however else we may change in the future!

Discussions with the Medical Missionary Association took a long time to lead to a full merger, but the annual Refresher Course (now the Developing Health Course) that we jointly ran was always an absolute joy

and privilege to attend, meeting many great saints working overseas.

From 1998 to 1999, I became convinced it was time for me to move on. Full-time executive leaders were usually doing so by that point. So, I gave the statutory three-month notice but said I would do six months if necessary. In the end, I did twelve months and left with no named successor. I had long meetings with half a dozen potential leaders, but for none of them was it the right job. So it was that Peter Saunders eventually agreed to take over, which he did ably until 2017, after which he took over as General Secretary of ICMDA in 2018. The rest, as they say, is history.

I had a portfolio career for five of the next seven years: I was elected a member of the General Medical Council, was a medical adviser to CARE,² chair of Acorn Christian Healing Foundation,³ a writer, a speaker, and a church leader. After taking up a year-long ethics post in the USA, Catrin and I returned to the UK, and from 2007 to 2011, were I took up the post of CMF Head of Communications and Public Policy.

I retired from paid work at age sixty, and I am grateful for all CMF colleagues, members, and the fascinating thousands of God's people I have met around the world. Thank you, Lord. ◉

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always remain
a 'Fellowship',
however else
we may change
in the future!



SCAN FOR MORE



CMF & ICMDA

A PERSONAL VIEW

Peter Pattison shares his memories of serving God globally in medicine.



Peter Pattison
is a retired GP and
former ICMDA
General Secretary.

The impact of CMF and the International Christian Medical and Dental Association (ICMDA), as well as the influence of some of the outstanding pioneers of both movements, have been significant factors throughout my adult life. The tale that follows could, no doubt, be echoed by many other grateful CMF members of my generation and beyond.

I qualified in 1963, the year of the first International Congress of Christian Physicians (ICCP, the precursor of ICMDA) in Amsterdam. In 2014, we returned to the Netherlands for a jubilee celebration at the World Congress of ICMDA in Rotterdam.

Converted at Cambridge in November 1957 and called to medicine two months later, I was privileged in 1959, as a third-year pre-clinical student, to attend what was then the CMF clinical students' conference. There, I met two people who were to have a profound influence on my life – Douglas Johnson (DJ), who had moved from being the General Secretary of the Inter-Varsity Fellowship (IVF, the precursor to today's Universities and Colleges Christian Fellowship or UCCF) to being Secretary of the fledgling CMF. 'Just the office boy' he would term himself, but in reality, the architect of both CMF and ICMDA. The second was Murray Webb Peplow, formerly a missionary in South India and now a GP in Lymington, Hampshire. He and his wife,

key points



- It was through the student ministry of CMF that the author was first called into global medical mission in the early 1960s.
- Involved with the early precursor to ICMDA, the author went on to develop links and relationships with Christian medical and dental movements worldwide, eventually becoming ICMDA General Secretary.
- God has worked through many different people and their relationships to achieve great work among and through Christian doctors and other health professionals. CMF has had a significant role in that work.



Oda, were houseparents for the weekend, as they were for many other student conferences. Friends of DJ and staunch supporters of CMF and its student work, they were to provide a home for me and ongoing guidance and encouragement throughout my years abroad.

My clinical years at St. George's, London, allowed me to serve as a medical students' rep for a year on the IVF student executive. During that year, DJ would invite me to breakfast every few months at a London hotel and sow a barrage of ideas in my young, receptive mind.

I spent a year from 1964-5 in Bulawayo, Zimbabwe (then Rhodesia), which gave me the opportunity to meet with the Hospital Christian Fellowship (HCF) and its founder, Francis Grimm, from South Africa. HCF's vision and priorities differed somewhat from those of DJ and CMF, but it was a valuable widening of my experience.

DJ was a driving force in the first ICCP in Amsterdam in 1963, even more so when, on home turf, he was the architect and organiser of the second ICCP in Oxford in 1966. At that conference, Murray Webb Peploe met with Sir Herbert Seddon, a senior orthopaedic surgeon and chair of a Medical Research Council working party researching the optimal treatment of spinal tuberculosis (Pott's disease). Sir Herbert was looking for a Christian doctor to continue the clinical research they had begun in Korea.

With a sense of my calling to overseas missions from early in my career and after serving in Zimbabwe, I returned to the UK to get married in 1965. We were ready to go back out to the mission field again but had no idea where or how to go. The meeting of Sir Herbert and Murray Webb Peploe opened that door. And so we served Korea in that capacity for 15 years. CMF and ICMDA had once again had an impact on my life.

During our years abroad, the Medical Missions Refresher Course (now the Developing Health Course) was a valuable resource on two home furloughs. There, we met Denis Burkitt (of Uganda and 'fibre' fame) and Stanley Browne ('Mr. Leprosy'), both of whom were CMF stalwarts and deeply committed to the international scene.

Our years in Korea culminated in 1980 with the launch of Korea CMF, which quickly gained a student membership approaching 2,000 and spawned a generation of Korean medical missionaries.

In 1990, Keith Sanders, who was concurrently General Secretary of CMF and Secretary of ICMDA [see the article in this edition], stirred me (now a GP

in Kent) to visit Poland. It was less than a year after the fall of the Berlin Wall, and it opened my eyes to the needs of Central and Eastern Europe. A few years later, in 1996, on a three-month NHS sabbatical, I travelled throughout that region exploring aspects of their primary care systems. This included a week in Romania with Doctors' Dilemmas (the precursor of PRIME International – Partnerships in International Medical Education)¹ and attending the ICMDA European conference in Hungary. PRIME, with the influence of its founders, CMF members John Geater and John Caroe, was to be an ongoing element of international engagement.

In 2000, Peter Saunders (then CEO of CMF) opened the way for me to do a couple of seminars at the IFES European Students' Conference in Germany. That gave me more exposure to the scope and challenges of Europe. That same year, I retired from general practice to assume the role of ICMDA

General Secretary, which lasted two years, building on the work of John and Thea Reader (also CMF members). Mark Pickering was concurrently CMF Student Secretary and ICMDA Student Secretary, and we worked closely together. Those two years culminated in ICMDA's World Congress in Taiwan, during which we welcomed Korea CMF as a member of ICMDA.

In 2002 I stepped back from the General Secretary role and, for another six years, served as honorary ICMDA Regional Secretary for Europe. Throughout those years, the support and participation of CMF members, too many to name, was invaluable. I was delighted to pass the baton to

James Tomlinson (now a GP and CMF's Head of Volunteers and Networks) in 2008.

And so, in 2014, I was back to Rotterdam, The Netherlands. Fifty years of experiencing 'The Right Hand of the Most High'. (Psalm 77:10, English Standard Version) Fifty years of privileged partnership with CMF colleagues and friends throughout the world. (And if I failed to mention you, I must crave forgiveness and plead the limitations of space!)

In the last five years, with Peter Saunders moving on from being CMF's CEO to becoming ICMDA's CEO, there have been significant advances in the international work of both CMF and ICMDA. CMF is neither the oldest Christian medical movement (that privilege belongs to CMF Denmark) nor the largest (that is CMDA USA), but its influence has been profound. I wonder where today's generation of CMF members will carry the work at home, in CMF, and across the world through ICMDA. ●

I wonder where today's generation of CMF members will carry the work at home, in CMF, and across the world through ICMDA



references (accessed 08/05/24)

1. See prime-international.org



HEIRS OF THE PAST, CHILDREN OF THE PRESENT, & MAKERS OF THE FUTURE



Paula Busuulwa reflects on how our heritage as Christians and health professionals outworks in our calling and our responsibility to the generations coming up behind us.



Paula Busuulwa
is a trainee in obstetrics
and gynaecology in
London and Chair of the
CMF Junior Doctors
Committee

attended a Church of England all-girls school a stone's throw from the CMF Offices in London. Each year, in the middle of March, we would mark the school's annual commemoration service by walking to Southwark Cathedral and wearing a rose to remember the payment for the school's rent when it was initially founded. This was a symbolic way of reminding us of our school's heritage, celebrating the past and looking to the future, helpfully summarised in our school motto '*Heirs of the Past, Children of the Present, and Makers of the Future.*'

Now one may be wondering what any of this has to do with the celebration of CMF's 75th birthday? Surely a school anniversary and the charity

established to unite and equip Christian medical professionals have very little in common. Yet, as I was thinking about the forthcoming celebrations, I was reminded of how much we owe to those who have gone before us, even as we celebrate what God is doing in the present and what is to come. On a more personal note, I was reminded of the faithfulness of God to me, and how the ministry of CMF has been instrumental in my faith journey.

heirs of the past

As a secondary school student, I looked to the older girls who had a gone before me as an inspiration and example, they were in some ways the heirs of the past.

Last October I had the privilege of attending the CMF Seniors Conference, and I shared more about this in the last *Triple Helix*. The whole conference was a fun and unique experience, hearing the stories of the past and seeing the faithfulness of God to so many older and wiser brothers and sisters. Whilst this was inspiring, what was the most remarkable was the willingness of these older clinicians to inspire and support the next generation of junior doctors.

As current junior doctors, we are all building on the foundations laid by our many predecessors; those who taught us, directly and indirectly. They are the Pauls to the many Timothies of CMF, including me.

children of the present

It's quite possible that if you are reading this article, you are one of the hundreds of students who joined us at Yarnfield Park for the recent CMF Student Conference. I am always inspired by the enthusiasm, zeal, and commitment of our student members, some of whom travel several hours from the farthest corners of the British Isles and beyond, to attend the weekend conference. This year, we were reminded of the very real challenges the biblical Daniel faced, and that we, like him, must remain firm in our convictions, to serve Christ despite the many hostile environments we find ourselves in.

I know that for many of us, it was in our student years, even whilst we were 'children', that we came to faith or made it our own for the first time. And it was quite likely we also became members of CMF. As I listened to this year's student talks, I was reminded of how I, seven years prior, had sat in those same seats at Yarnfield Park, as a final year student, excited for what lay ahead but also aware that I, like Daniel, would have to make a commitment to stand firm. Looking back, I cannot say that I have always chosen the right path, but I am so grateful for the firm teachings I have received as a 'child' that point me back to Jesus.

makers of the future

As an eleven-year-old walking to Southwark Cathedral, I would have never thought that I would be back there again on a warm July morning over twelve years later, graduating from medical school, but this time with purple sash rather than a red rose. This remains one of the most significant moments of my life, not least because it took place in the cathedral I had visited since I was a child (quite literally). But it also marked a transition, from

student to doctor, from child to adult. Of course, graduation is really only the beginning, and nearly seven years later, I can see the many ways I am not the same doctor, or indeed person, I was in July 2017. I have learnt so much both as a doctor and a Christian. I can honestly say that God has used medicine to sanctify and mould me more than I would have expected. I still count it a privilege to be a part of the medical field, being the hands of Christ to people in their most vulnerable and memorable moments.

Recalling my first Junior Doctors Conference in October 2017, only two months into working as an FY1, I remember being so excited to see other juniors putting Christ at the forefront of their careers. At that time, I would have never thought that I would have the opportunity to help organise this

conference and serve in the way I have been able to on the Junior Doctors Committee. I definitely would not have thought that so many amazing individuals within CMF would become dear friends to me, and that together, we would help build up and inspire the next generation of doctors, the makers of the future.

conclusion

Drawing back to the title and inspiration for this piece, '*heirs of the past, children of the present, and makers of the future*', I see how this is not only relevant to my school life, but to the Christian life as a whole. We, as Christians, are heirs and co-heirs with Christ, heirs to a glorious inheritance

bought with something far better than roses; the blood of Christ. Within CMF and my wider Christian life I am thankful for those who have gone before us, helping us to see and savour Christ more fully.

We are also children of the present, which means that even though we may feel like we have much to learn and many skills to develop, we are still of great worth and value as children of God. If you are a student today, you have a number of opportunities to serve your friends in vast and unique ways, being a sweet aroma of Christ and light in your universities and medical schools. In the words of Jim Elliot '*Wherever you are, be all there! Live to the hilt every situation you believe to be the will of God.*'

Lastly, we are makers of the future. This is the hardest and possibly weightiest of our roles. But every decision we make to serve God, wherever he calls us to in medicine and beyond, is building a lifetime of decisions that, hopefully, lead us closer to Jesus. We are making our future every day, through the way we live our lives before a watching world, and for his glory alone. ●

I was reminded of how much we owe to those who have gone before us, even as we celebrate what God is doing in the present and what is to come



SCAN FOR MORE

key points



- Looking back and learning from those who have gone before us, living and dead, it is vital to understanding who we are and where we are now.
- We live out our present calling by standing firm on the foundation laid in us by our predecessors.
- We too will pass on that heritage to the generations coming up behind us, so we need to continue to build on the rock that is Jesus.

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HANDING ON THE BATON

Steve Fouch and **Liz Capper** share the story of how the various nurses' and midwives' fellowships evolved in the UK since the 1990s.



Steve Fouch is CMF Head of Communications and served as CMF Head of Nurses and Midwives from 2008-2016



Liz Capper was Chief Nurse of the Hammersmith Hospitals Trust, and a former Trustee of CNM, NCFI, and CMF

Those following Mark Pickering's *Triple Helix* articles 'lessons from the archives' will know that nursing has a strongly Christian heritage.¹ This influence was evident in many hospitals even up to the 1960s and 1970s. Since then, a secular perspective has influenced every part of British society, including nursing, moving Christian faith to the margins.

The first formally constituted fellowship for Christian nurses was set up in Scotland in 1932, with an England and Wales fellowship (Nurses Christian Fellowship or NCF) set up ten years later. NCF Scotland and NCF England and Wales both started and ran as fellowships in nurses' homes in hospitals, especially training hospitals across the UK. Shift work, curfews, and other limitations in those days made it hard for nurses to engage with church life, and the NCFs were vital to the spiritual life, spiritual formation, and pastoral support of students and the newly qualified in particular.

NCF England and Wales also set up a clinical refresher course for missionary nurses and midwives each summer, which merged with the CMF course for doctors in the nineties and runs to this day. The global perspective of both fellowships was strong, and they mobilised and supported many members who went on to serve overseas over the decades.

However, as training moved out of the hospital and into universities, and nurses' homes closed, this model became less relevant. Both fellowships found engaging with students and getting graduates together in fellowships was becoming harder.

By the 1990s, the England and Wales NCF was on its knees as its membership dwindled and attendance at events shrank. There were conversations with CMF about some coming together, but eventually, NCF decided against this and closed in 1995. It bequeathed some of its remaining funds to support nurses and midwives in attending the medical missionary refresher course now run by CMF and the Medical Missionary Association.

And there the story could have stopped, but for the students. For many years, UCCF had been developing a ministry among nursing students, and in the early nineties, Annie Leggett became their first Christian student nurses' staff worker. Under their banner, she picked up the baton NCF had laid down. She visited students countrywide and organised conferences that had a lasting impact. Later, these were shared with students from the Professions Allied to Medicine. These conferences continued for many years, giving birth to the Christian Therapists Network and, most recently, to a new movement, Christians in Allied Health.²



SCAN FOR MORE

Soon, Annie realised there was no fellowship or network for the students she worked with once they graduated. So, with several others, she started seeking graduates interested in setting something up, primarily through World Alive. A small, London-based group of senior staff nurses took up that baton, and in 2001, Christian Nurses and Midwives (CNM) was born. It was self-financed; the leadership group covered all costs, but there was a small membership fee for those who joined. When UCCF had to shut down its professional student networks a couple of years later, Tim James (currently on the CMF Board) began a student ministry in CNM in 2005.

Meanwhile, NCF Scotland continued, but it also found engaging with students harder and harder. Links with CNM were good, but with limited resources, both movements could do little together.

In 2008, one by one, the founding members realised they could no longer commit to leading CNM. The future of the fledgling fellowship was in jeopardy, so the remaining leaders asked the two Council of Reference members (Steve Fouch and Liz Capper) to take over the leadership alongside the treasurer (Angela Thavaraj) and form the CNM Council. Shortly after this, CNM was set up as a registered charity, and the baton passed to a new leadership.

Meanwhile, CMF took on the CNM student work. They appointed Annie Leggett and, later, Dimity Grant-Frost as student staff workers tasked with building student work for CNM. This was not an easy task in itself. Working effectively for two organisations was challenging, but Annie and Dimity laid the foundations for what was to follow, networking with and growing multiple student groups across Britain.

Eventually, in 2014, the CNM Council accepted CMF's offer to take over all the work amongst nurses and midwives. In a new start, Pippa Peppiatt came on board as the new student staff worker, working alongside the Head of Nurses Ministries, Steve Fouch. She eventually took the baton from Steve, leading CMF's nurses and midwives ministry until the end of 2023. Under Pippa's leadership, the fellowship doubled in size to nearly 500. The team grew, in particular drawing in Georgie Coster, who had been one of Annie and Dimity's early 'recruits' to CNM. Georgie was Pippa's right-hand woman for many years, with a deep passion to see Christian students living and speaking for Jesus in their work and studies. During this time, many new fellowships opened up in nursing and midwifery schools across the UK.

In 2018, NCF Scotland (now renamed Christian Nurses and Midwives Fellowship Scotland) also folded and gave CMF some funds to carry on nurses and midwives' ministry in Scotland.

I have been struck by God's kindness in watching over Christian nurses and midwives over the decades. When things looked a bit tricky, God has come along again and again, providing people and organisations for Christian nurses and midwives to find a home where they can meet and be encouraged to live out their faith in the professional world. And all this is not to forget the constants who have walked the walk with so many of us, Liz Capper, Tim James, and others. What a good God we have and one that we can trust in for the future too!

Annie Leggett, 2024

It is worth noting that the idea of merging the nurses and midwives fellowship with CMF was not new – it was certainly being mooted in the 1990s, and it was strongly supported by the current CMF President (John Wyatt), two former General Secretaries (Keith Sanders and Andrew Fergusson), and by several of those who led the nurses work, including Liz Capper, Sally-Ann Jenkins (now Foster, who succeeded Annie at UCCF) and several others, including the then CMF CEO, Peter Saunders.

The global mission focus of the old NCFs was not lost either. Both NCFs were founders of Nurses Christian Fellowship International (NCFI), and NCF Scotland had been very active in leading the international fellowship. CNM joined in 2004 after three of the CNM Council (Tim James, Angela Thavaraj, and Steve Fouch) were supported by a CMF grant to attend the NCFI World Congress in Seoul that year. Steve went on to chair NCFI Europe and to sit on the International Board. When CNM merged with CMF, it too, became a full member of NCFI in 2015.

Meanwhile, the old missionary refresher course became the Developing Health Course, and several nurses and midwives have been active as course directors and teachers over the years. Furthermore, Pippa initiated the Global Track to give young health professionals a leg up into global healthcare mission. That programme is still running at CMF under the leadership of the Global team and has had nearly 100 participants over the years.

The baton has passed on again in the nurses and midwives work, with Pippa leaving at the end of 2023 to be succeeded by Bex Lawton. Many who were there at the start have stepped back but continue to support from the sidelines, including Liz Capper, Georgie Coster, Tim James, and Steve Fouch. But a new generation of leaders with a fresh vision for the ministry has taken up the baton. The race is far from run, and while the fellowship and ministry have grown over the last three decades, there is still a long way to go. But we must now hand it over to Bex Lawton to tell that part of the story. ●



CNM Council 2006: L-R - Richard Greenall, Angela Thavaraj, Steve Fouch, Liz Capper, Sally-Anne Jenkins, Rachel and Tim James.



The original CNM Council, 2001: L-R - Peter Swift, Ros Holliday, Louise Philpott, and Sally-Anne Jenkins

key points



- Changes in professional culture and the secularisation of the country led to the closure of the two previous nurses and midwives Christian fellowships in the UK.
- Student ministry led to a rebirth, but it was a challenge to lead and resource the fledgling fellowship.
- Coming together with CMF had a profound impact, and after a decade, the nurses and midwives fellowship and ministry are growing and developing in new directions.

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HEARTS SET ON PILGRIMAGE WHERE TO NEXT?

Bex Lawton looks to the future of CMF's nurses and midwives fellowship and ministry.



Bex Lawton is a paediatric nurse and CMF's Head of Nurses & Midwives.

You can't really know where you are going until you know where you have been.
 Maya Angelou¹

Ah! Here's a good place, I think. Let's stop for a minute.' Little encouragement is needed; there's a *click, shuffle, and thump* as backpacks are unfastened and straps are shrugged off shoulders down to the crook of our elbows, before being dropped to the ground. We arch and stretch our backs. Necks are rolled. Shoulders rubbed. Some even slip off their walking boots to give their toes a wiggle. All with the accompanying noises of those who have come a long way. And let's face it, as nurses and midwives, we had our share of aches and pains to begin with, despite the back-care facilitator's best endeavours.

'Anyone fancy a slightly squashed and unpleasantly warm cheese sandwich?' Oops! Maybe not my best choice for a day like today. We rummage

for snacks, unscrew flasks of tea, and share our provisions. And then sitting on our bags, or coats bunched up as make-shift cushions, we relax and take in the view. Wow! What an incredible vista. It's breath-taking. For a moment, the constant chatter that has accompanied our group for most of our walk ceases. A hush descends.

Did we realise how far we've come? You can probably see where this is going, reader.

'Hey, look over there!' We follow Liz's index finger, as she points to rough terrain we navigated in early days. Others like Steve, Annie, and Pippa in turn, spot familiar pathways, and share stories of, 'Do you remember...?' Because (as you will have come to expect from a journey metaphor) our course has had its ups and downs. It's been precarious at times. As well as taking sudden turns of direction we weren't expecting. But from this glorious vantage point, we're able to map the way we came. Oh, how precious it is to stop for a moment together, to give God our thanks and praise.

Gosh I know the journey narrative can be cliché,

I do hope it's not unbearably cheesy for you! I'm laughing to myself now, because, like my flattened sandwich, I'm sticking with it! Maybe it's an overused analogy because it's so helpful? And maybe I can be forgiven for using it, since themes of travelling and movement are so prevalent in our Holy Scriptures too? I hope so.

So, what now faithful pilgrims? Well, you'll see we're not getting out our CMF Nurses and Midwives flag, just yet, with its blue triple helix spiral and central cross on a white background. Why would we? We're not marking the end of our excursion together. What we are marking is an important milestone, ten years of Nurses and Midwives belonging within CMF.

At a significant time in the Israelites history, Samuel 7:12 tell us that *'then Samuel took a stone and set it up between Mizpah and Shen. He named it Ebenezer, saying, "Thus far the Lord has helped us."* 'Ebenezer' means stone of help.² Presumably he used a stone because they were readily available. What could we use? Maybe we should set up drip stands, suture packs, crocs, laptops, fob watches. Whatever we can lay our hands on. We set them up here in 2024. And name them medical supplies of help. Of provision. Of grace. Of faithfulness. We mark this place saying, 'Thus far the Lord has helped Christian nurses and midwives in this country'. And we give him praise, 'How great thou art!'

With nearly 500 nurse and midwife members, a growing number of local groups, annual national in-person gatherings, and the regular *Spotlight* magazine, plus other publications and resources for our members, what a wonderful position we find ourselves in.

'I hear the birds sing sweetly in the trees and feel the gently breeze',³ so I cannot see a reason to divert from this path God has brought us to. Our relationship with Christian student workers across our nation will continue to be key to our sustainable growth. We'll invest in a younger generation of nurses and midwives, training them and giving them opportunities to lead. Connecting people one-on-one and in encouraging communities as best we can. Turning membership into fellowship. And we will endeavour to follow wherever the Holy Spirit guides us. Adapting, as needed, to serve our members. Responding creatively to challenges we meet. Being light-handed and flexible with our agendas and programmes, whilst remaining steadfast in our call to unite and equip Christian nurses and midwives to live and speak for Jesus in their workplaces. Faith and flexibility. Our hiking poles in each hand.

We appreciate this summit, but I don't believe it's the only one we'll reach as a fellowship. Don't worry, we won't linger here for too long. We are a movement, after all, not 'a dormant' or 'a stagnant'. I pray for multiple peaks for us. We pray and plan for a peak of midwives to join our fellowship, to feel

welcome, seen and heard. With more midwives on our team, more midwifery focused content is coming. It's not enough for us to have articles and blogs broadly relevant to both professions. Midwives' jobs are unique, and the support and encouragement we provide them needs to be tailored to the opportunities and challenges they face.

It's an incredible time in history to be working as midwives and nurses in the UK. With our clap-worthy heroic efforts through the pandemic not far behind us, we've gone straight into a season of strikes and rumours of strikes. Both professions are appealing to our government for better pay and working conditions so that we can safely staff our maternity and medical services. Before now, I wonder if our tired workforces had become despondent and apathetic. Silent and acceptant, with little hope of being heard. But whether our members chose to vote for or against strike action, it seems that in 2023 nurses and midwives began to find our voices again. I pray that in this time, Christian voices would rise too; to our God in prayer, as well as to those in authority on earth. Let's reach for a peak where CMF Nurses and Midwives are not only reactive in blogs and social media posts, responding to whatever the UK media deems newsworthy, but are actively exploring ways to change the narrative. Mobilising, influencing, and catalysing meaningful changes for our beloved professions.

'Come on then, everyone. Time to go.'

A few last-minute selfies to savour the moment. Smiling faces beam against this beautiful backdrop. 'Cheese!' And then with phones tucked away and flask lids tightened we help each other on with our backpacks once more. We move forward with purpose. Leaving our medical Ebenezer behind us. Marking a decade of CMF Nurses and Midwives.

CMF N&M woz 'ere, and God was 'ere too!

We walk on together in twos and bigger groups as well. With relationships still at our core. Because, whilst the story of how far we've come is often told as a timeline of dates and events, our story is full of people. We have a rich history of faithful men and women seeking their God and serving him in their workplaces. Of nurses loving nurses. Midwives loving midwives. Of persistent pray-ers. Of generous charitable givers. Of people opening up their homes to host students. Of prayer in hospital chapels before work and walks to debrief after shifts. Yes, let's move onwards, keeping to this road. Maybe, when we stop again, we'll be able to say, *'Were not our hearts burning within us while he talked with us on the road and opened the Scriptures to us?'* (Luke 24:32) Come Lord, so that *'They were talking with each other about everything that had happened. As they talked and discussed these things with each other, Jesus himself came up and walked along with them'* (v. 14-15). Amen. ●



SCAN FOR MORE

key points



- This year, we celebrate ten years of the nurses and midwives fellowship and ministry in CMF.
- We have seen a lot of growth in that time, so it is good to take stock and lay down a marker of thanks to God.
- But this is not where we end – God has more for us to do, so we are looking forward to the next steps on our journey with the Lord.

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KEITH SANDERS

SAVED THROUGH THE FLAMES

Mark Pickering tells the remarkable story of Keith Sanders, CMF's second General Secretary.



Mark Pickering
is CMF Chief Executive

We recently reported the passing of Dr Keith Sanders, CMF's second General Secretary, who died in November 2023 at the age of 98.¹ Although I didn't have the privilege of meeting Keith during his life, it was an honour to be present at his thanksgiving service in Tewkesbury Abbey on 29 December and to learn some fascinating things about his life.²

early life and a dramatic rescue

Born to missionary parents in Angola in 1925, Keith spent time as a 'missionary kid' in boarding schools in Northern Rhodesia (Zambia today) and the UK. Aged 17, he joined the Merchant Navy in 1942, and there, he had a remarkable experience that shaped his life. He worked on fuel tankers from 1942-46, which brought vital supplies from the USA across the Atlantic, under high risk of torpedo attacks. In December 1942, shortly before leaving for the USA, at church in Liverpool he heard a sermon from Isaiah 43:1-3:

Do not fear, for I have redeemed you...When you pass through the waters, I will be with you...When you walk through the fire...the flames will not set you ablaze. For I am the Lord your God, the Holy One of Israel, your Saviour...

Coming back across the Atlantic in January 1943, his ship was torpedoed and sunk whilst the surrounding sea was set ablaze by burning fuel. Amazingly, Keith was able to swim under this surface inferno and get beyond it, rescuing two colleagues and hanging on to floating debris for hours before being picked up by a rescue vessel.

Amazingly, at the next church service he attended, the passage was none other than Isaiah 43! What a testimony to God's sovereign care for his servant!

Bristol, Marion, and India

He trained at Bristol, first in dentistry, but changed partway through to medicine, qualifying in 1954. Whilst there, he met and married Marion, a medical almoner (social worker), beginning a long and fruitful partnership. He became a leader in the Christian Union and remembers helping at a missionary service in 1949. He quietly prayed that the Lord would call some of those present to overseas missionary service, then immediately heard a voice within him respond, "What about you?!" This led him to change course to medicine in the very year that CMF began.

After their marriage in 1955, Keith and Marion left the UK in 1956 for India, working at the Duncan Hospital in Raxaul, Bihar, right on the border with Nepal.³ Whilst there, he gained considerable expertise in treating tetanus. With clinical trials and careful



SCAN FOR MORE

management, the Duncan Hospital team reduced local mortality from 80-100 per cent to a mere five per cent! He was awarded an MD by Bristol University for this research and continued to write on tetanus for some years after. Keith was also involved in efforts to develop community healthcare and improve relations between mission hospitals in India. He was involved in the formation of the Emmanuel Hospital Association⁴ and was also Chair of the United Mission to Nepal.⁵

an unexpected next chapter

These considerable skills in networking and organisational leadership meant that when, in 1973, Keith and Marion began planning to return to the UK for their children's education, Keith was invited to become CMF's second General Secretary, following on from Douglas Johnson (DJ). There are some delightful interchanges between him and DJ, preserved in several air-mail letters sent between the UK and India during 1973; these include the following excerpts:

Keith (8 May): *I am and always have been interested in motivating Christian medical practice, quite apart from encouraging discipleship in itself. But to be responsible for the co-ordinating and inspiring of much of the CMF work has always appeared to me to be beyond my ceiling. Nevertheless I am...prepared to undertake anything which the Lord clearly gives me to do...*

Douglas (12 July): *Of all the missionaries coming home...your name has come to us...most... All this... has emboldened us to be much more pressing and frank, as we do not feel we are being responsible for directing you from direct missionary service. All feel rather that we may be putting in your way what might be the next step in your life of service to God!*

Keith (14 August): *...it is indeed a very great honour and privilege to be asked to follow you as General Secretary...There is no doubt in my mind but that the CMF is one of the most important agencies (I can think of none more so) in Britain...for the genesis and maintenance of rightness and true service...Thus I... would be very happy to serve in this way...*

Douglas (18 September): *It was with relief and thanksgiving that I read your letter...We are grateful to God that you have seen fit to accept the CMF's invitation...that this poor boy can see the end of the road to which he may be able to stagger and collapse on 30 September 1974. May the Lord be with you and the future of CMF.*

The letters display both men's touching humility and trust in God as they seek to discern the Lord's will. They are both deeply conscious of the vital importance of CMF's ministry.

Keith served ably as CMF General Secretary from 1974 to 1990, and during that time, our membership more than doubled, from around 2,000 to over 4,000. His combination of organisational and pastoral skills played a large part in this. Thus Keith fulfilled DJ's desire expressed in their 1973 correspondence to strive towards what he called 'the crucial need':

i) To double or treble (God helping) the number of medical students and doctors who are Christians.

ii) To deepen the spiritual life and Scriptural convictions of every possible medical student and doctor to apply the Christian faith to his daily work.

to the ends of the earth

Keith's two decades in India and his love of cross-cultural partnership were a great help in growing the International Christian Medical & Dental Association (ICMDA).⁶ This began as the three-yearly International Congress of Christian Physicians (ICCP) in 1963, and DJ had played a pivotal role in the early growth of the Congresses. As the ICCP grew in numbers and influence, it changed from merely a periodic congress to an association with ongoing activity in between gatherings. So ICCP changed to ICMDA around 1982, and the secretary went from being a part-time volunteer to a substantive, ongoing role. Keith was the first ICMDA General Secretary from 1982 to 1992. During that time, the membership of ICMDA increased from 17 to 31 national member movements.⁷

a multidisciplinary vision

Throughout Keith's tenure at CMF, we were still a fellowship only for doctors and medical students. But he had inherited a multidisciplinary vision from his time in India, where the Christian Medical Association of India comprised members of different professions. He saw it as a real sadness that CMF had not been able to partner more closely with the old Nurses Christian Fellowship in the 1980s, and to help prevent its demise. He was delighted by renewed connections in the late 2000s.⁸ I suspect he would have been absolutely thrilled to know that nurses and midwives have now been full members of CMF for ten years!

God's faithfulness endures

Keith continued to be a staunch supporter of CMF right into his old age. He was a regular encourager of those who succeeded him in CMF until dementia finally curtailed his communications in his 90s.

In January 1993, on the fiftieth anniversary of his amazing sea rescue in 1943, he was again in church, and incredibly, the sermon then was once again on Isaiah 43! He was delighted to be able to tell those present that day the story of God's faithfulness to him all those years ago. Let's give thanks for Keith's humble faithfulness, and may we draw inspiration from how the Lord preserved him through the flames in order to testify of God's love to so many. ●



key points

- Born into a missionary family and first serving as a merchant seaman, it was a life-transforming experience in the Second World War that set Keith's life on a new path.
- Finding a call to mission and medicine, he served 27 years at Duncan Hospital in Bihar, India, on the border with Nepal.
- These experiences equipped him for his next steps as General Secretary of CMF from 1974 to 1990 and ICMDA General Secretary from 1982 to 1992.



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LESSONS FROM THE ARCHIVE
 EPISODE
6

DOUGLAS JOHNSON
 AND THE BIRTH OF CMF

Mark Pickering traces the birth of CMF from the evangelical student movement of the early twentieth century and the part played by our first General Secretary, Douglas Johnson.



Mark Pickering
is CMF Chief Executive

From the very first days of the Christian medical movement in the UK, students played key roles, as seen in the earlier articles in this series. In the 1840s, the Edinburgh Medical Missionary Society began by spreading the message of medical mission to a new generation of students.¹ In the 1850s, the Guy's Hospital Bible Class led to the

formation of the Christian Medical Association.² In this instalment, we will see how, once again, students were vital to the eventual formation of the Christian Medical Fellowship in 1949.

the first evangelical student movement
 Various awakenings amongst evangelical students began in the mid-1800s, and these gained

key points



- Christian student groups in medical schools around the UK were central to the birth of CMF and remain vital to it to this day.
- Douglas Johnson (DJ) was an important leader in these movements, and it was under his capable administration that the different strands of Christian ministry among British medics began to coalesce in the 1930s and 40s.
- The support and guidance of wiser older leaders, a strong emphasis on biblical truth, and a 'long obedience in the same direction' were united under DJ's leadership to create CMF.



momentum in the 1880s. The Student Volunteer Movement for Foreign Missions (SVM) came into being at a summer camp in the USA in 1886, organised by the veteran evangelist DL Moody. The leader of the SVM was a Princeton College student, Robert Wilder, whose parents had been pioneer missionaries in India and who had already formed a student missionary society at Princeton.³ Over the next few decades, many thousands of SVM students sailed from the USA as missionaries to a whole range of countries.⁴

In the UK, as well as the stirrings amongst medical students in Edinburgh and London, Christian student gatherings were gaining momentum in Cambridge and Oxford, leading to the establishment of the Cambridge Inter-Collegiate Christian Union (CICCU) in 1877 and its Oxford equivalent (OICCU) in 1879.⁵ Links between the US and British movements were strong from these early days, as DL Moody led the memorable first full-scale CICCU mission in 1882, and Robert Wilder came over on a speaking tour from 1891-2 that resulted in the formation of a national Student Volunteer Missionary Union (SVMU) for Great Britain and Ireland in 1892.⁶

growth, dilution and divergence

Along with the specific missionary emphasis of the SVMU, a more general movement of Christian Unions grew throughout the 1890s. Known initially as the British College

Christian Union (BCCU), it merged with the SVMU in 1898 and eventually came to be known as the Student Christian Movement (SCM). This comprehensive, national, Christian student movement rapidly grew to be a highly influential force within the UK church and a significant contributor to its global umbrella organisation, the World Student Christian Federation (WSCF), formed in 1895.⁷

However, with such rapid growth, the SCM also broadened its theological outlook, keen to embrace all forms of Protestant Christianity in an ecumenical spirit. Whilst its original evangelical and missionary emphases were still present in different ways, there were increasing moves to embrace liberal theology and more rationalist approaches to the Bible. Evangelicals in Cambridge and London (including some medical schools) began to raise concerns with the SCM leadership about the direction the movement was taking.

Things came to a head in 1910, as a new, more theologically liberal group had arisen at Cambridge as an alternative to CICCU. As SCM rules only allowed one member group at each university, the CICCU eventually disaffiliated from the SCM and continued alone.⁸ It was a brave step at the time to

break away from a large, established, and well-funded national movement over evangelical theological convictions that seemed strange and petty to many senior people within the SCM and the wider church. However, with the benefit of hindsight it seems very clear that the evangelical students of the CICCU were entirely right to stand their ground. Whilst the evangelical student movement gained momentum over the following decades, the SCM eventually withered, and today is a shadow of its former self, focussed on various social causes, such as LGBT+ activism and climate change, whilst having lost its original focus on mission and evangelism.⁹

Whilst the CICCU were taking their own stand in Cambridge, the London medical school Christian Unions were also forming their own identity, separate to that of the SCM. Medical students studied longer, and so had an extra couple of years to develop and maintain their leadership and evangelical convictions. A good number were preparing to be medical missionaries, which helped to focus their minds on what mattered. In addition, there was a steady stream of CICCU students who completed their preclinical studies and moved to London for the clinical years. All these factors led to the formation of the London Inter-Hospital Christian Union (LIHCU) in 1912.¹⁰ This later broadened out to form the London Inter-Faculty Christian Union (LIFCU) in the early 1920s.

DJ[‘s]... skills and strategic vision were huge...[but] he actively shunned the limelight

disruptions of war and the evangelical rebirth

As UK Christian student groups faced their own challenges and disruptions, much greater disturbances were going on in the wider world. The tragedy of World War One during 1914-18 meant that the universities emptied, and much Christian student activity ground to a halt.

However, once the war was over and university life began to return, it was not long before evangelical student groups saw a resurgence. CICCU and LIHCU had maintained some continuity, and as the universities swelled again with students, many of these were hardened soldiers who had lost much of the pre-war tendency to view human nature as essentially good, progressing naturally along an upward moral and social trajectory. The inherently sinful and selfish nature of humanity made perfect sense to them!¹¹

These new beginnings merged together in the first Inter-Varsity Convention,¹² held in London in December 1919, which brought together evangelical students from Cambridge, Oxford, London, and Durham. These conferences were held annually in London, becoming residential and moving to High Leigh Conference Centre in 1926.¹³

1877

Cambridge Inter-Collegiate Christian Union (CICCU) formed

1898

formation of a national Student Volunteer Missionary Union (SVMU)

1910

CICCU and SVMU (now called the Student Christian Movement - SCM) split

1928

Intervarsity Fellowship (IVF) formed

1939

IVF Graduates Fellowship (GF) formed

1943

GF Medical Section holds first conference

1949

Medical Prayer Union and GF Medical Section agree to merge

1949

The Christian Medical Fellowship is formed

CMF was founded in 1949, and 2024 sees its seventy-fifth anniversary. However, its roots go back much further, and there is plenty to learn from the people and organisations that came before it. This is the sixth of a series of articles featuring some of the main highlights.



◀ Douglas Johnson enters the scene

Into these exciting times stepped Douglas Johnson (widely known as DJ) – first as a combined English and History student at University College London (UCL) in autumn 1921. Due to the overwhelming numbers of returning ex-servicemen with priority on university places, he had been unable to study medicine to begin with. Coming to the SCM Christian Union there, he was disappointed there was little interest in Bible study. In fact, only he and one other student were interested in joining the Bible study group, which, as a result, did not run! However, DJ and his fellow student resolved to do something, and joining forces with a few of the female students who were similarly keen to engage in Bible study and evangelism, they eventually formed a new Christian Union in 1922, linked to the emerging LIFCU.¹⁴ DJ further demonstrated his organisational talents by being made secretary of LIFCU in 1922. Then, in 1924, the year he finished his first degree and moved to study medicine at King's College, he became secretary to the Intervarsity Conferences.¹⁵

the InterVarsity Fellowship develops

With strong support from the CUs in Cambridge, London, and Oxford, and a growing number of others, the InterVarsity Conferences were gradually becoming a national movement, which eventually became the InterVarsity Fellowship (IVF) in 1928 – the name changed in 1977 to become the Universities and Colleges Christian Fellowship (UCCF), which continues to this day.¹⁶

Throughout these growing years of IVF, DJ continued as their secretary, beavering away behind the scenes. His administrative skills and strategic vision were huge – writing innumerable letters, encouraging people one-to-one, and organising committees. He actively shunned the limelight, avoiding photographs wherever possible and avoiding speaking in public wherever he could find someone he thought better qualified to speak. Yet despite his 'backroom' preferences, he became, over the years, an immensely influential figure in the evangelical world. He also played a large part in the launch of the London Bible College, the Intervarsity Press (IVP), the International Fellowship of Evangelical Students (IFES), and the International Christian Medical and Dental Association (ICMDA).

However, the challenges of balancing medical studies with running a national movement periodically took their toll. DJ struggled to pass his final medical exams due to the many distractions of his IVF work. However, Dr Arthur Rendle Short came to the rescue. He was a Professor of Surgery at Bristol, a great friend of the IVF,¹⁷ and a mentor to DJ. Rendle Short facilitated DJ's transfer to Bristol, where he could complete his medical studies in 1931 without the constant distractions of IVF administration.¹⁸

pioneer medical missionary ...to Bermondsey

Since at least his early medical school days, DJ had planned to be a medical missionary;¹⁹ his particular goal was Southern Rhodesia (today's Zimbabwe). However, as IVF was growing rapidly, this gave him a real moral dilemma. He saw how vital this new organisation was, and he was clearly gifted as an administrator, but he had vowed to be a medical missionary!

Thankfully his problems were solved once again by Arthur Rendle Short, who was by then the President of IVF. Eventually, they were both encouraged that perhaps the Lord might want DJ to stay in the UK and to send others abroad, a wonderful conversation is recorded between them as the time for a final decision approached.

'Johnson, do you really think you ought to go to Southern Rhodesia?'

'Well, sir... Just the other day I was wondering what I would do if one day I got to the gates of heaven and Peter said in a gruff voice: 'Johnson, why didn't you go to Rhodesia?''

*'Then you just tell him to call me!'*²⁰

However, he was still able to be a pioneer medical missionary! Living as a student in the Medical Missionary Association (MMA) hostel in Highbury, London, he was well aware of the Islington Medical Mission, which had been specifically set up to give home medical mission experience to those MMA students who were preparing for future overseas service. He was also a member of the MMA Board and Executive Committee during most of the 1930s and 40s.²¹

In Bermondsey, then a dilapidated slum area of southeast London, and just a short walk from today's CMF office, was a well-established project run by the Shaftesbury Society – the Lansdowne Place Mission. DJ knew the President of the Mission, and eventually this culminated in the launch of a new project in 1932, the Lansdowne Place Medical Mission, set up on the model of Islington. DJ was its first doctor, setting up the medical work there immediately after his medical 'house jobs'.

Although he only stayed there for just over a year before handing it on to others due to the pressure of work in the developing IVF, he had in that time helped to bring transformative medical mission work to a deprived inner-city area.

The medical mission continued over many years with its mixture of evangelism, social support, and compassionate medical care, becoming an NHS general practice in due course. It still survives today, although now as a secular practice in a slightly different location.²²

Graduates Fellowship and the Medical Section

Through the 1930s and 40s, IVF continued to grow and develop, with DJ as its secretary. Many students graduating from IVF Christian Unions wanted to stay in touch, support the CUs, and continue to develop evangelical Christian witness in their various professions. This concept formed into the Graduates Fellowship (GF) of the IVF in 1939, which evolved and grew through the 1940s.²³

A few of the professions represented in the GF formed distinct 'sections'. Some have gone on to become separate organisations that survive today, such as Christians in Science, the Christian Dental Fellowship, and the Association of Christian Teachers.

The GF Medical Section became particularly prominent, and although the Second World War again disrupted IVF ministry nationwide, the GF held its first conference for medical students and junior doctors in 1943. By 1946, things were picking up pace, and Major William Melville Capper returned from army medical service to be a surgeon at Bristol – as Chair of the GF Medical Section, he led its development, along with DJ and a few others, in that period.²⁴

Plans were already being developed to form the Medical Section into a distinct organisation that retained strong links to the existing GF, when things took an unexpected turn.

unexpected allies, and a merger

In April 1948, a letter appeared in *The Lancet* from Neville Bradley, the secretary of the Medical Prayer Union (MPU).²⁵ Although depleted by the War and the recent death of their Chair, Dr William McAdam Eccles, they were keen to revive the fortunes of the MPU. The Lord's timing was perfect. A letter survives to DJ from Ellison Nash (an IVF colleague and later Dean of the Medical School at Bart's Hospital, London), suggesting they discuss this urgently and remarking that the MPU were 'quite a good thing before the War'.

The *Lancet* letter led to discussions between leaders of the MPU and IVF during 1948 and 1949. The remaining MPU leadership held that 'the future seemed to lie with this new movement, and the MPU's aims were much the same'. So, they all agreed that the two societies should combine under a new name. At the time, there were around 200 MPU members and 600 in the GF Medical Section.²⁶

The final decision came on 22 October 1949 at a meeting of the GF Medical Section, where the minutes record their decision to merge with the

MPU to form the Christian Medical Fellowship. Hence, although it is now 75 years since the birth of CMF, we are very much the continuation of the MPU as well, reflecting an unbroken continuity going back 150 years to 1874!

what can we learn from Douglas Johnson and the birth of CMF?

We have now completed the journey I set out to chart through this series of six articles. We have only scratched the surface of the colourful and inspiring characters involved and the twists and turns of the Christian medical movement that led up to CMF's birth. God has remained faithful through all these years, and I am incredibly grateful to him that CMF remains strong in 2024, looking ahead to the next chapter of our service together for him.

Looking back over this article, here are some lessons that stand out to me:

- Once again, students were critical in the birth of this movement, and CMF was born out of campus ministry amongst students. In fact, DJ has often been reported to have said, 'if you take care of the students and the literature, the rest of the organisation will run itself'.
- DJ and his contemporaries had to fight for evangelical doctrines, such

as the centrality of the cross, the authority of the Bible, and the need for evangelism. Many scorned them for this, but they have been proved absolutely right. We must always hold on to sound biblical teaching, even if changing times may require us to nuance or express it differently than previous generations.

- Douglas Johnson was by no means a classic, charismatic leader. Always in the background, he was so self-effacing that his successor at IVF, Oliver Barclay, dubbed him 'The Invisible Man'!²⁷ Yet despite this unassuming personality, he had an incredible influence on the twentieth-century evangelical movement. In the view of John Stott, he was the most influential evangelical of the twentieth century!²⁸ We must never assume that God cannot use us for his purposes just because we don't appear to be 'classic leader' material. Faithfulness is the key!
- No one foresaw the eventual merger of the IVF Medical Section with the MPU, even though, in many ways, it was a reunification of the previous student and graduate work that had separated in 1906.²⁹ The Lord can often surprise us with unexpected allies and unanticipated reconciliations – let's continually trust him and expect to be surprised! ●

we must never assume that God cannot use us for his purposes just because we don't appear to be 'classic leader' material

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This series has sketched out the history of the modern Christian medical and nursing movements in the UK, as we enter CMF's 75th anniversary this year. If any readers have an interest in this area, or relevant material to contribute, please contact Mark on admin@cmf.org.uk



PRAYERFUL MOUNTAIN BOOKS

Andrew Fergusson, in the first of a new regular *Triple Helix* feature, lists the books he would take with him to a retreat on a 'prayer mountain'.



Andrew Fergusson became a Christian at St Thomas's Hospital in 1972. After 10 years as a GP in a Christian Mission practice, he worked for CMF for 15 of the next 22 years, which included being the founding Editor of *Triple Helix*

S

o, here I am, returning to Mount Nebo in Jordan for this 40-day retreat.

Nebo has great significance in biblical history:

'Then Moses climbed Mount Nebo...Then the Lord showed him the whole land...Then the Lord said to him, 'This is the land I promised on oath to Abraham, Isaac and Jacob when I said,

"I will give it to your descendants." I have let you see it with your eyes, but you will not cross over into it.'

Moses, the great pioneer of the Exodus, got no further: *'And Moses the servant of the Lord died there in Moab, as the Lord had said'*. (Deuteronomy 34:1-5)

Mount Nebo: a good place for solitude, reflection, and communion with God. But what books should I take with me from my shelves? In no particular order:



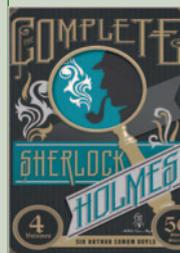
The Warden
Anthony Trollope
Everyman

I was made to study this for GCE O-Level in 1967. I loved it! Published in 1855, it was the first in the six-volume Barchester series of novels.

Anglican clergyman Septimus Harding is warden of a small 'hospital' for old men. Unfortunately, he receives a huge living for doing very little alongside his role as precentor at Barchester Cathedral, and a campaign against corruption in the Church of England is taken up. This book about justice and humanity has a sort of happy ending and is full of

wonderful characters. Over the years, I seem to have met them all.

I have now re-read *The Warden* five or six times. On my retirement at 60, my wife gave me a beautiful set of all six Barchester novels, and after re-reading the others, I am now catching up with *The Warden*. Trollope's Christian worldview is evident in all he writes, but he is never preachy.



Sherlock Holmes: the complete short stories
Sir Arthur Conan Doyle

John Murray

Another present from my wife, this time for our first Christmas.

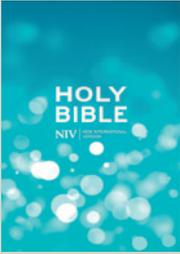
Books make great gifts, and she had already learned how to keep me quiet for ages.

By the age of twelve, I had already read all the Holmes stories, including the 56 short ones in the five compendia. Written between 1892 and 1927, they feature the best-known detective in world literature, and his cases are mainly chronicled by his rather dim doctor companion 'my dear Watson'.

Doyle was a spiritualist and freemason with a very different worldview from Trollope's. He started writing Sherlock Holmes and other stories as an unsuccessful GP while waiting for patients to turn up. He had trained in Edinburgh under Dr Joseph Bell, and that man's combination of careful listening and meticulous examination inspired Holmes' model of detection. Our profession needs to return to it.



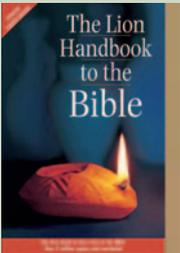
SCAN FOR MORE



Holy Bible. New International Version (NIV)

Biblica, formerly International Bible Society

A Bible is a must-have! When first converted, I read the entire *Revised Standard Version*, then moved to the *Good News* before starting with the *NIV* shortly after its launch in 1979. I've had my current copy for more than twenty years. It has bold print, which I increasingly appreciate as my eyes age, and great cross-referencing throughout. It now needs a lot of tape to hold it together, but as they say, 'Bibles that are falling apart are usually read by people who aren't'. I'm so grateful now for that early indoctrination to read something of Scripture every single day.



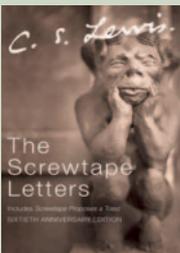
The Lion Handbook to the Bible

Fourth Edition

Lion Hudson PLC

For more than 30 years, my daily 'quiet time' could be a struggle to understand and assimilate

the content of that day's Scripture passage. Then, browsing in Waterstones for detective fiction, I found *The Lion Handbook* in the spirituality section. If only I'd found it and its previous edition earlier! With it alongside my NIV, the helpful colour illustrations, the historical background, and the gentle and balanced handling of controversies all serve to make God's truth even more alive. I do have several hundred heavier Christian books, but this is my go-to.



The Screwtape Letters

C S Lewis

Collins

Subtitled *Letters from a Senior to a Junior Devil*, this was first published as a single volume in 1942 and aimed to 'give all the

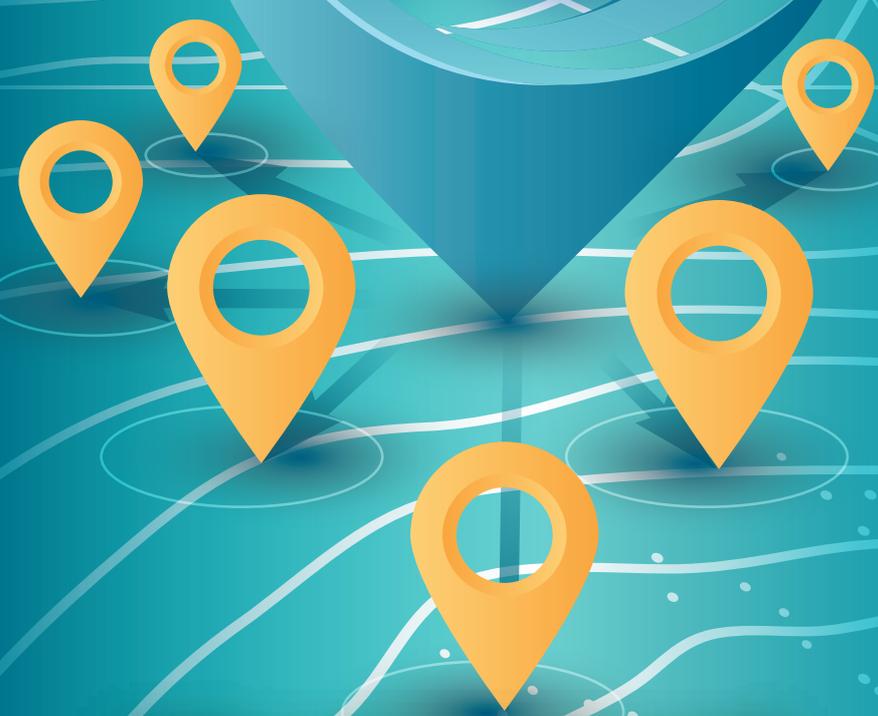
psychology of temptation from the other point of view'. It is still a glorious combination of laughter and learning; the blurb on my jacket tells me most readers still ask, 'How did Lewis know me so well?'

I have a beautiful edition with wicked cartoons by Papas on almost every page. It was given to me in the 1970s as a 'Thank You' by a radiographer colleague in a very small Hospital Christian Fellowship.

a luxury item to take

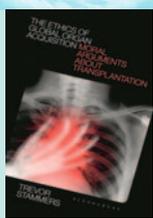
Some piece of electronic apparatus so I can daily follow everything about Millwall Football Club. •

prayer
walk for
health



let's cover our work
in prayer
cmf.li/walk75





The Ethics of Global Organ Acquisition

Moral arguments about transplantation
Trevor Stammers

- Bloomsbury Academic, 2023, £19.79, 272pp
- ISBN: 9781350227187
- Reviewed by **David Smithard**, Consultant in Geriatric Medicine at Lewisham and Greenwich NHS Trust, Visiting Professor at the University of Greenwich & Triple Helix Editor

There is no doubt that organ transplantation is one of the most significant medical advances of the late twentieth century'. Releasing someone from the burden of dialysis (kidney), enabling them to move without becoming breathless (heart and lung), or to be able to produce hormones, proteins and cleanse the blood (liver), an organ transplant has the ability to transform lives.

In 2019, worldwide 153,863 solid organ transplants were undertaken (the majority were kidneys). Despite these successes and the (in general) gradual increase in the number of organs transplanted, demand still outstrips supply. In such situations people will seek alternative means to obtain such a valuable commodity. Some means will be ethical and (for some) morally justifiable, whilst others will be ethically and morally repugnant and need to be resisted and, if necessary, the perpetrators prosecuted.

In the case of organ transplant, the concern is that harvesting an organ from a deceased person is not necessarily proving the best opportunity for organ survival and hence benefit to the recipient. Consequently, ethical and moral issues have arisen over when death occurs (eg circulatory versus brain death), or when it is right to maintain someone on a ventilator when they are in

effect dead. Can organs be removed from people who are opting for euthanasia (see the News & Comment section in this edition)?

Live donor transplantation to a relative or a stranger is one way of increasing the availability of organs. ◦



Biblical Critical Theory: How the Bible's Unfolding Story Makes Sense of Modern Life and Culture

Christopher Watkin

- Zondervan Academic, 2023, £24.99, 624pp
- ISBN: 9780310128724
- Reviewed by **Steve Fouch**, CMF Head of Communications

A critical theory is an attempt to critique what we think we know about reality. These theories have come to the attention of many in recent years through the increasing popularity of (and controversies around) cultural Marxist critical theories such as those around race, sexuality, gender, class, and so forth. Cultural theories use a dialectical approach, stating a thesis, it's antithesis, and paving the way to a new synthesis of the two. As we see from the history of the twentieth century, as well as more recently, these theories are not just academic – they have a real-world impact on how societies are run and cultures are shaped.

Watkin is here applying Scripture to critique contemporary culture in all its dimensions, from its understanding of physical reality and our relationship to the created world, to our understanding of self, society, politics, justice, human biology, and pretty much anything and everything else. It is, as one reviewer put it, trying to do what Augustine – the great foundational Christian thinker of late antiquity – did in

his seminal *City of God*, ie nothing less than an attempt to make sense of all aspects our current cultural moment and offer a genuinely biblical critique.

By the author's own admission, this is just a first stab at the idea – albeit a whopping great door-stop of a stab! So, whilst it cannot totally succeed in its lofty ambition, what it does do well is show us how to forensically deconstruct modern Western culture's assumptions and foibles. Watkin takes apart the conflicting narratives in a wide range of areas, to offer a biblical synthesis, or what he calls a 'diagonalisation' (the book is full of diagrams that makes sense of this term).

Essentially, Watkins thesis is that our culture's attempts to explain everything are riddled with half-truths and partial understandings, revealing them as sub-Christian heresies. He then 'diagonalises' these different, conflicting ideas with a more rounded, holistic, Christian perspective, rooted in Scripture and an understanding of the person and work of Jesus.

The result is a helpful, and very readable, volume that acts as primer on a range of topics. It does not get into enough depth to be really useful on everything it touches on, but it will start you thinking and searching for more comprehensive answers. This may be a volume to keep on a bookshelf and refer back to in years to come, but it is also one that can be read cover-to-cover.

If you want to understand how science and faith coexist, how we engage with concerns around bioethics, debates about gender and identity, and so forth, this book will give you good tools to ask the right questions, question the answers you hear in academia and wider culture, and dig deeper into the Bible. It is, as a result, a great resource for anyone engaged in Christian apologetics. ◦

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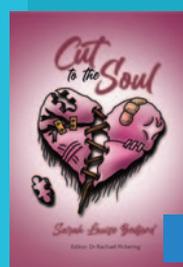
New Medicine, Old Values
Sam Leinster

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Steve Fouch & Catherine Butcher

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Sarah Louise Bedford

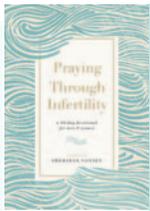
£10



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WANT TO CONTRIBUTE?

CMF reviews Christian books relevant to readers interested in health, healthcare, and bioethical issues from a biblical, Christian perspective. If you would like to write a review or have a relevant book for review, please get in touch with CMF via communications@cmf.org.uk



Praying Through Infertility

A 90-day devotional for men & women compiled by Sheridan Voysey

- Thomas Nelson, 2024, £9.99, 224pp
- ISBN: 9781400334513
- Reviewed by **Sue McGowan**, a Speech and Language Therapist in Neurosciences at the National Hospital for Neurology and Neurosurgery, London.

Infertility can feel dark and overwhelming in its griefs'. Sheridan Voysey acknowledges the difficulty of navigating the emotions that infertility provokes, and the sense that no one really understands. He offers a collection of vignettes and prayers compiled by both men and women who are struggling with infertility.

I suspect many of these stories will resonate deeply. That there are both male and female perspectives is a huge strength.

The vignettes show that infertility may be a lifelong struggle for some. In the early stages, the rawness of shock and disbelief can test marriages. Even as the rawness recedes and the years pass, navigating the complexity of emotions presents persistent challenges to those seeking to understand God's purposes. In older age, perspective may become clearer as it is shaped over the years by God's word, but there still may be pain in some form.

The collection of stories does more than cause the reader to simply empathise with couples and individuals. These men and women also reveal how Scripture illuminates their darkness, pain, and confusion and challenges, rebukes, and also encourages them to draw near to God. Their testimony is to a God who knows each situation intimately and who listens to their heartfelt cries.

The book doesn't offer a substantive



Christians in the Firing Line 2

Inspiring faith stories of the individuals behind key legal cases and how their faith stood up under trial
Dr Richard Scott

- Wilberforce Publications, 2023, £12.50, 250pp
- ISBN: 9781999584207
- Reviewed by **David Smithard**, Consultant in Geriatric Medicine at Lewisham and Greenwich NHS Trust, Visiting Professor at the University of Greenwich & Triple Helix Editor

Richard Scott is a GP working in East Kent. This is the second volume of *Christians in the Firing Line*. The first volume was written following the author's own experience of being censured by the GMC.

He aimed with that book to bring to a wider audience the enormity of the problem faced by Christians being prosecuted for expressing their faith, and the effect that that a drawn-out disciplinary and possible judiciary process has on the mental health of those concerned.

Dr Scott suggests a second volume is required, detailing a further 21 cases, because the problems have not gone away. Whilst having a faith, particularly a Christian faith, is not prohibited, open expression, particularly of a Bible-based faith, is frowned upon. Expressing your beliefs openly can open up a torrent of abuse and persecution from the very members of society who demand tolerance and acceptance of their own views.

theology of the particular suffering of infertility, but it shows how the pain of infertility fits into a pattern of suffering which afflicts many biblical characters: not just Abraham, Sarah, and Hannah, but also Job, David, and the New Testament writers. When our human understanding fails, the book

Before presenting the case studies, Dr Scott provides an overview of the current relevant legislation, including the Public Order Act, 1986; the Crime and Disorder Act, 1998; Human Rights Act, 1998; Racial and Religious Hatred Act, 2006; and the European Convention of Human Rights.

The case studies all follow a similar pattern of a perceived offence, followed by a workplace investigation, suspension, and disciplinary action (often including the termination of employment). The disappointingly common factor is that in almost all cases, correct procedures and the organisation's own policies were not followed and the defendants were not provided with the opportunity to fairly present their case. In other words, justice was denied, as if the outcome had been predetermined. A couple of examples of street preachers being arrested by the police are included. These demonstrate a distinct lack of understanding of the relevant laws by the arresting officers.

All the cases demonstrate an increasing hostility towards expressions of the Christian faith in the workplace and public square. Although many organisations trumpet their equality and diversity credentials, there remains at the heart of our public services an underlying hostility towards Christians.

As J John says on the back cover, '*this is an essential read for those concerned about aggressive secularism that is sweeping across the nation*'. ●

helps us to fall back on God's loving character and his promises. In this way, the book is uplifting. It may provide for some a rescue from false hope and incorrect theology, and for others a comfort in knowing that there is a community of fellow sufferers who are also trying to work it out before God. If words elude us as we grieve, the short prayers may provide a template to follow.

I recommend this book highly. As someone who has remained childless for many years, it provided huge reassurance and encouragement.

'Whatever your future, God gives you a legacy, a name "better than sons and daughters", and a place in his eternal kingdom' (Alex Pickering) Isaiah 56:3-5 ●



Whatever

Giles Cattermole

£7.50



Serving Two Masters?

Paul Coulter

£7.50



CMF CHAIRS REPORT

Euan McRorie and Alice Gerth (CMF Chair and Vice-Chair) look at the fellowship's current state of health

Were CMF a patient visiting their GP for a health review on the occasion of their 75th birthday, the GP would conclude that it was in good health and looking forward to the future with enthusiasm and God-given vitality.

On behalf of the Board of Trustees, we wanted to take this opportunity to provide an update on CMF as it currently is and consider some of the future challenges and hopes.

The Board of Trustees meets formally four times/year with the principal responsibility of providing governance and advice on strategy. We do this with a sense of privilege and thanksgiving, and we have much to be grateful to God for as we see the outworking of the Lord through the work of CMF. A significant challenge over the past twelve months has been a period of major staff transition, and we are grateful that that period is now reaching its conclusion. We have been blessed by the faithful service of John Greenall, Pippa Peppiatt, Jennie Pollock, Olu Lampejo, and Graham Sopp, who have led their Departments with enthusiasm, creativity, and vision.

Their departure has allowed CMF to rethink its departmental structure. We are excited by the creation of two new departments – Conferences & Equipping, led by Felicia Wong, and Volunteers & Networking, led by James Tomlinson. We hope this will increase CMF's reach and effectiveness.

As well as the National Conference, individual conferences for students, junior doctors, and seniors continue to be a time of enrichment, blessing, and challenge. Catalyst Teams continue to flourish, providing CMF members with the opportunity for local interaction and support. The political, clinical, and financial



Jonathan Rohan Peacock

landscape in the NHS is ever-changing and ever-challenging, and CMF remains responsive to the changing climates that members face.

The creation and development of a formal pastoral support service led by Steve Sturman has increased the number of members coming forward for support through in-person or virtual meetings. This reflects the escalating pressures under which clinicians operate in the modern NHS. As patient expectations recalibrate post-pandemic, healthcare politics becomes more contentious, and financial constraints further complicate clinical decision-making and strategic planning.

CMF's work amongst nurses and midwives continues to blossom under the leadership of Bex Lawton, and it has been a huge encouragement to see the number of members from those professions growing steadily.

Work supporting medical students under the leadership of Rachel Owusu-Ankomah also continues to flourish. Guided by and prompted by John Wyatt, CMF has spent time reflecting on how best to engage with the next generation of students, bearing in mind the new and different perspective that this generation will bring to modern healthcare and what it means to be a follower of Jesus in the culture of Generation Z.

CMF's Global strategy remains vibrant and challenging as we strive to support Christian

healthcare workers in resource-poor and often conflict-ridden environments.

CMF continues to develop its Digital and Communications strategies as we adapt to and embrace digital culture and social media. Steve Fouch has been instrumental in developing the new CMF website, which is scheduled to go live later this year. *Triple Helix*, *Nucleus*, and *Spotlight* continue to publish thought-provoking, stimulating, and reflective articles on a broad range of healthcare issues from a Christian perspective.

We are excited by the appointment of Susan Marriott as the new Head of Public Policy. Susan's background as a GP and theology student means she is well-equipped to take the lead for CMF in the ever-changing and demanding world of public policy and medical ethics.

We are also excited by the arrival of Ben Daniel as the new Operations Director, who will help us adapt to an environment of increased financial pressures for both CMF and its supporters.

As with the NHS and society, CMF's financial challenges remain real and considerable, and we continue to monitor our financial position closely. The Board and senior staff will act appropriately as finances permit. As a Board, we have recently implemented changes such as Officers undergoing individual CMF appraisal in the past 12-18 months, and all trustees will continue to undergo appraisal regularly.

That process has highlighted the need for the Board to consider increased diversification by seeking new trustees with specialist experience in marketing, finance, human resources, and fundraising. We have, therefore, prayerfully engaged the services of a Christian recruitment agency to address those requirements.

However, if you think you have what it takes to help steer CMF through these turbulent waters over the next few years, please contact us at recruitment@cmf.org.uk to find out more or visit our website at cmf.li/TrusteeRec.

The makeup of the Board may, therefore, move away from having the vast majority of trustees with a medical/nursing background to one with more of a blend of skills and



SCAN FOR MORE

WANT TO CONTRIBUTE?

If you would like to share news and stories of CMF activities in your area or workplace, please contact us via communications@cmf.org.uk. We will need copy for the autumn 2024 edition by 30 August.

CMF NATIONAL CONFERENCE 2024

How good and pleasant it is when God's people live together in unity! (Psalm 133:1).

experience. This year will also see the board Chair transition from Euan McRorie to Alice Gerth, who brings considerable CMF experience as well as continued vision and energy to the Board.

As you can see, we have much to be thankful to God for and praise him for his continued provision and blessing as CMF strives to raise and glorify his name in the UK healthcare environment whilst also needing to continue to rely on his provision through our members and supporters. ●

Euan McRorie is a consultant in rheumatology in Edinburgh and CMF's Chair of Trustees

Alice Gerth is an anaesthetics trainee in Cambridge and CMF's Vice-Chair of Trustees

CMF 75th Anniversary Thanksgiving Service - book now

On 15 June 2024 from 2.30 pm at St George the Martyr, Great Dover St, London SE1 1JA (just two-minutes' walk from the CMF office), we will be holding a

time of celebration, worship, and reflection to mark 75 years of the Christian Medical Fellowship. Prof. John Wyatt will be encouraging us through God's Word, and there will be an opportunity to hear about the future of CMF.

All CMF members and volunteers are invited to join us in thanking God for his faithfulness over the past 75 years and continuing to trust him for the future!

CMF CEO Mark Pickering will also be leading a walking tour of some of the key local sites discussed in his recent *Triple Helix* article history series on the people and organisations that led to CMF's founding afterwards. Alternatively, everyone is invited for drinks and snacks back at Johnson House to continue the celebration.

If you are attending CMF's AGM, you will still need to book for the thanksgiving service separately. The event is free, but in-person capacity is limited, so book now to avoid disappointment at cmf.li/birthday

Coming together in person each year is one of the most essential points of fellowship for CMF. We do this throughout the year in regional groups, specialty networks, global seminars, and conferences, or as nurses and midwives at NAMfest. We meet at every career stage with students, juniors, and seniors conferences.



But National Conference is where everyone has a chance to come together, at all career stages, from all parts of the UK (and beyond), from all professions, and with non-healthcare family members.

This year, we had the privilege of hearing Dan Strange teaching from Isaiah on just how big our God is and from John Drew in our plenary lecture on surviving and thriving as a Christian in the workplace. Student leaders joined as part of their leadership training programme, and nurses, midwives, and allied health professionals were with us at the main conference, as well as their own preconference [see the NAMfest report overleaf].



There were over a dozen seminars on topics as varied as balancing marriage and parenting with a career, dealing with vicarious trauma, sharing faith, working for justice, and engaging with trans-identifying patients, colleagues, friends, and family. And on top of it all, the YWAM team explored the theme of our great big God with kids from pre-school to teens.



We had the usual excellent conference bookstore run by 10 of Those, and eighteen exhibitors from a diverse range of Christian organisations and ministries had stands in the exhibition hall.



One thing we did for the first time this year was to have a proper CMF stand in the exhibition area. It was a chance to highlight all the resources, events, networks, and groups that CMF has to offer, to help members with queries about their membership and to generally answer questions and talk face-to-face.



And throughout the conference, the CMF Pastoral Care Team provided members with spiritual support, prayer, and encouragement. But you don't have to come to conference to get support from the Pastoral Care team – email them any time at wellbeing@cmf.org.uk.

What a report like this cannot give you is the buzz and the energy of people meeting, talking, catching up with old friends, and making new ones. Connections were being made across the UK and with doctors and nurses from other nations. Above all this, there was the sense of God at work in all our times together, building his Kingdom and bringing his Spirit of unity

among his people.

If you've never been to a CMF National Conference or haven't been in a while, may we encourage you to join us in 2025, 16-18 May, at Yarnfield Park, near Stone in Staffordshire? Put the dates in your diary now.

The three Bible talks and the Plenary lecture will be available online on the OfficialCMFTV YouTube channel and the CMF 1st incision podcast shortly. Visit our website – cmf.org.uk for details. ●



FELLOWSHIP NEWS

updates from across the Christian Medical Fellowship

STAFF MOVEMENTS

joining

Emmanuel

Borges-Da-Silva joined us in April as our new Database Assistant. Please pray for him as he gets to know our systems and helps the Operations team keep up-to-date with membership and financial record keeping, leaving



leaving

Rachel Owusu-Ankomah

leaves us in June as Head of Students. Rachel has led a dynamic student team for the last several years, and her energy and creativity will be greatly missed. As she returns to her surgical training, please pray for her transition, and for us to find a new Head of Student Ministries.



GLOBAL

Developing Health Course – cancelled

The Developing Health Course (DHC) is taking a break this year, as we look at how best to support and equip members involved in global health and mission. However, we will be running a day conference on 13 July at the London School of Theology in Northwood, Middlesex, entitled **Journeying into Global Health and Mission**.

You can find full details and online booking for this day conference at cmf.li/JGHM24

NAMFEST 2024

What do you think of when you hear the word 'festival'? Does it bring back memories of being cold and wet while camping in a



waterlogged field? Wading through mud in wellies? Maybe you imagine crowds of young people singing along to live music with flower garlands on their heads. Well, since April, some of our members will think about singing 'Praise is Rising' under a balloon arch and fairy lights. They might even think of waving glowsticks and dancing until their legs hurt at a praise party. Or maybe they'll remember praying with old friends or new ones, of vulnerability, and enjoying that unique

bond we have with each other, of loving both God and nursing or midwifery.

This is because, for the second year in a row, our nurse and midwife members gathered together for NAMfest, an event with all the fun of a festival but not a Portaloo in sight! While our medical colleagues were still packing for National Conference, nearly seventy of us, joined by CiAH (Christians in Allied Health), met pre-conference to celebrate ten years of nurses and midwives at CMF. We have so much to be thankful for.

In an effort to capture the diversity of ages, ethnicities, and specialities we now represent in our growing fellowship, we didn't just have one main speaker. We heard from seven as they shared story after story of God's goodness and faithfulness. We heard testimonies of his sustaining grace, transformation, salvation, healing, and hope. And we found that these weren't just 'nice' or 'interesting' anecdotes. But each was like a rescue breath from God, reviving otherwise exhausted souls and restoring vision and passion for him and our patients and colleagues.

What better way to honour God for how he has built this CMF ministry over the years, than to do some building ourselves? After each talk, we added a rock to our Ebenezer, building a tower of thanks to our God. Of course, all metaphors fall short. How could we build a tower high enough? There aren't enough stones in the world to express how much we love him. But we had a wonderful time worshipping God in this creative, but not in the least bit new (check out 1 Samuel 7:12) way. Thank you for your continued prayers. Please tell your nurse and midwife colleagues to put 15-18 May 2025 in their diaries for the next NAMfest! ◉

Bex Lawton, CMF's Head of Nurses & Midwives and paediatric staff nurse

CATALYST TEAMS PRECONFERENCE

Held on 19 April, prior to the start of CMF's National Conference, this year's Catalyst Team Pre-Conference brought together 30 volunteers involved with CMF's



Catalyst Teams. We reflected on God's faithfulness as we considered the journey since the first Catalyst Teams formed nearly ten years ago. Today we have 14 teams. A vital aspect of the day was sharing ideas and experiences across the teams. Afternoon workshops explored in greater depth the areas of engaging

with students, developing 'encourager communities' in CMF, and doing events well.

As these comments reflect, it was an encouraging and helpful day:

'I've left encouraged and positive for the year ahead in our Catalyst team.'

'So encouraged by the testimonies of what God has done in other regions.'

Catalyst Teams are the backbone of CMF's mission, working tirelessly to shape and develop CMF in their respective areas. They are not just volunteers but the driving force behind our local and national mission. To explore getting involved with your local catalyst team or forming a new team in your area, contact volunteer@cmf.org.uk

James Tomlinson, CMF's Head of Volunteers and Networks



WALK75 | PRAYER WALK FOR HEALTH



Let's cover our workplaces in prayer in our 75th year. We invite every CMF member to participate in a prayer walk around your hospital or neighbourhood to pray for Christians in our healthcare services as CMF celebrates its 75th anniversary.

what would work best for your location?

- Do a 75-minute prayer walk in stages – perhaps from one local surgery to another?
- Divide your location into distinct areas and ask people to sign up to cover each in prayer in their own time – this would work well in a busy hospital. (You can still have a short group event).
- Hold an online 'virtual' prayer walk, with photographs of each location. This would be a good solution for a group that is spread out, eg in rural areas.
- Commit to pray at a specific time for each day over a week or two in June or July.

how do you know what is happening locally?

Please volunteer to coordinate a walk in your local area or sign up to say you are interested on the form at cmf.li/Walk75-register, saying where, when, and how you will be prayer walking. Once you have organised a prayer walk, use the opportunity to reach out to Christian colleagues who perhaps are not normally involved in fellowship activities.

encourage others

When you've run your prayer walk, please take a photograph of your group in your location and send it to us via communications@cmf.org.uk so we can add it to the map at cmf.li/walk75. Just ensure you have geo-location switched on on your phone. If you are unsure how to do this, email us.

use the resources

There are some excellent prayer walking resources, which you can find at cmf.li/walk75. We have also produced a 'prayer walk for health' resource, which you can download directly from the Walk75 web page. This has some Bible passages, prayer points, testimonies and a song that you might find helpful. We also have written a prayer that we hope all groups can use.

Let's come together to pray for the health service, the health professions, and our nation's health. ●

CMF 75th Anniversary Thanksgiving Service

15 June 2024

St George the Martyr, Borough High St, London SE1 1JA
to book a free ticket, go to cmf.li/birthday

All CMF members and volunteers are invited to join us in thanking God for his faithfulness over the past 75 years and continuing to trust him for the future! Places are limited so booking is required.

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Psychiatry Day Conference

8 June 2024

CMF Office Johnson House
6 Marshalsea Road, London SE1 1HL
cmf.li/PsychDay24

Please join us for a day of interactive, face-to-face engagement, with opportunities for active reflection, networking, fellowship, and prayerful discussion exploring how we can holistically serve our patients towards healing.

HOSTED BY
CMF

Journeying into Global Health and Mission

13 July 2024

London School of Theology, Northwood, Middlesex
cmf.li/JGHM24

This day conference is for anyone who is thinking seriously about mission, particularly about serving overseas.

HOSTED BY
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Saline Solution - online course

14 October - 18 November 2024

cmf.li/Jan21Saline

The Saline online course will help you live for and share Christ in your workplace. This practical and interactive course will include a mix of teaching and small group discussion, with opportunities to pray for one another.

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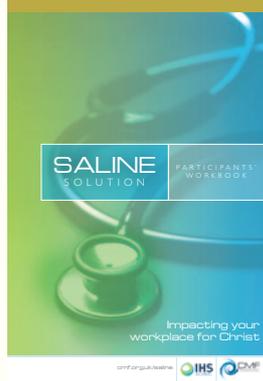
Junior Doctors Conference

15-17 November 2024

save the date!

This year's Junior Doctors Conference will be 15-17 November at the Hayes Conference Centre in Swanwick. Giles Cattermole will be speaking about the justice of Jesus. Check on the new CMF website in the coming weeks for more details and online booking.

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Dr Jill Brock

(b 1937, q 1962, Oxford, d 2 August 2023).

Medical Oncologist. Jill was the founding medical director of Wirral Hospice St John's. She worked as a consultant oncologist at Clatterbridge Hospital and also treated paediatric oncology patients at Alder Hey, continuing for twelve years as hospice medical director.

Dr Vijula Thangamalar Jeyaraj

(b 30 November 1969, q 1993, d 16 March 2024 in her home town of Tirunelveli in Tamil Nadu, India).



Vijula had worked for a few years in Basildon as a specialist in elderly care and general (internal) medicine. She had become a well-loved member of the local

CMF group in that time and was well respected professionally. She had taken a sabbatical to her home country for a few months when she tragically succumbed to a cardiac arrest in the town of her birth.

Other members who have died recently:

Lucy Ault

(b 1973, q 1995, Aberdeen, d 2024), worked in general psychiatry

Dr Leon Le Dune

(b 1934, q 1956, Newcastle, d 2023), GP in Co. Durham

Mr Colin MacKay CBE FRCS

(q 1961 Glasgow, d 17 December 2023), former President of the Royal College of Surgeons of Glasgow (1997-2000), Colin was a renowned gastro-intestinal surgeon.

Dr Caroline Martin

(q 2007, Belfast, d 15 February 2024), consultant anaesthetist and a much-loved member of the CMF Northern Ireland family.

Dr Vivien A. Millar

(q 1971, Guys, d 8 May 2024, Liverpool), was a consultant psychiatrist in Liverpool, and involved in convening the Association of Christian Psychiatrists (Northwest Group) in the late 1990s.

Dr Jennifer Salisbury

(q 1965, Cambridge)

Dr Sheila Scotchmer

(q 1945 Glasgow, d 2024, Gloucestershire), consultant in Obstetrics and Gynaecology.

Dr Ronald Stout

(q 1973, Liverpool, d 2024), consultant oncologist in Manchester

CMF GOVERNANCE

CMF's Trustees gave thanks for many things at this year's second Board meeting on 11 May. These included: looking forward to the celebrations to mark 75 years of CMF; a wonderful National Conference with associated pre-conferences; three new prospective Trustees from the membership; Euan McRorie's term as Chair (he hands over to Alice Gerth at the AGM on 15 June); the receipt of two legacies; and work done by our Membership Engagement Developer, Naomi Buckler, which is showing promising results for increasing regular income for CMF.

Financial encouragements meant that discussions on trimming the budget for the rest of the year were not required, and we have been able to extend Naomi's contract with us to the end of 2024. Challenges will continue, however, as this year's £30k deficit budget will need to become a break-even budget for 2025.

Please pray for the Trustees. Look out for a renewed page showing who they are on the new website in the coming weeks. Please pray especially for a new Treasurer: could you help us find one? Is there someone in your church with the heart and financial skills to support our work?

Visit cmf.li/CMFTreasurer for more details.

Thank you for your ongoing prayers for the work. ◦

Sharon Green, Executive Assistant to the CEO.

CMF SENIOR STAFF



Chief Executive
Mark Pickering
mark.pickering@cmf.org.uk



Operations Director
Ben Daniel
ben.daniel@cmf.org.uk



Head of Conferences & Equipping
Felicia Wong
felicia.wong@cmf.org.uk



Head of Global
Fi McLachlan
fi@cmf.org.uk



Head of Student Ministries
Rachel Owusu-Ankomah
racheloa@cmf.org.uk



Head of Communications
Steve Fouch
steve.fouch@cmf.org.uk



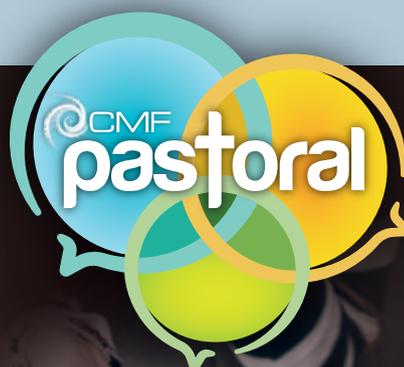
Head of Public Policy
Susan Marriott
susan.marriott@cmf.org.uk



Head of Nurses & Midwives
Bex Lawton
bex.lawton@cmf.org.uk



Head of Volunteers & Networks
James Tomlinson
james.tomlinson@cmf.org.uk



enabling members to live and speak
for Jesus in all life's seasons.

cmf.li/CMFPastoral



get in touch

 cmf.org.uk

 6 Marshalsea Road,
London SE1 1HL

 communications@cmf.org.uk

 020 7234 9660

 cmf.li/FBook

 cmf.li/PrayerMate

 cmf.li/Insta

 @UK_CMF



LISTEN TO THE LORD



Alisdair Fyfe, a retired paediatric surgeon and a CMF Pastoral Carer, explains why listening to the Lord has transformed his life.



'The righteous will flourish like a palm tree, they will grow like a cedar of Lebanon...They will still bear fruit in old age, they will stay fresh and green'. (Psalm 92:12 & 14)

These words from the Lord have continued to encourage me over the years, before and after retiring from the National Health Service (NHS) in 2013.

What is the best advice one can give to a Christian who is pursuing a career in medicine or nursing; advice that will last throughout their careers and even into retirement?

In 1983, as a paediatric senior registrar, these words from Genesis 18:16 struck me with unexpected force: *'The Lord said, "Shall I hide from Abraham what I am about to do?"'* The Almighty Creator, wanting to confide in his friend, Abraham! An amazing thought!

I remember praying, 'Lord, please make me into the kind of man with whom you want to share your thoughts and purposes'.

It is 40 years since that prayer, and the Lord has graciously spoken with me countless times, most often through reading his Word, sometimes through the quiet inner voice of the Holy Spirit, through the words of others, and through the unpredictable circumstances of life. Since that day, when opening his Word to read, I have prayed, 'Lord, through your Spirit, speak with me, please, and help me recognise your voice'. I have come to expect him to speak to me every day, and he does. The key seems to be, am I open to hearing his voice? Do I believe that the Lord wants me to hear his words?

His message comes to me in different forms. Sometimes it is an encouragement, a needed reassurance and comfort; at other times it is a wee gentle word of rebuke, or an instruction for something he wants me to say or do.

Once, when very distressed about a matter, as I cried out to the Lord in my despair these words came, unbidden, into my mind, 'It is I, don't be afraid'. The peace that accompanied these words was immediate, and supernatural.

As I approached my fiftieth birthday, I sensed that the Lord wanted me to retire early, at 60, to allow me to concentrate on directly serving God's people through church ministry. Whilst my retirement was an emotional one, it afforded me the opportunity to give away 60-plus New Testaments to my close colleagues, nursing, and medical staff, each with a personal message. That led to many conversations about faith, and many opportunities to pray with my former colleagues.

On retiring from the NHS, one is tempted to feel that 'the best days are over'. But actually, I have discovered that the best days are still coming!

Those words from Psalm 92 have continued to encourage me over the years, particularly around my retirement from the NHS in 2013, and my subsequent retirement from church eldership ten years later.

In our village, through practical involvement, we can bring the light and love of Christ into the community, and that is a blessing. In our church, my wife and I serve in Alpha, and we heavily engage in pastoral work, helping to strengthen people who are struggling in a variety of ways. Preaching in our church, and in others, is a delight, bringing God's word into people's hearts as he transforms and heals.

Serving as a pastoral care person in CMF has also been a new area of service that the Lord has opened to me in recent years. Face-to-face, and through zoom calls, the Lord continues to meet with us and graciously speak with us, bringing his peace and comfort in the storms of real life.

So, my best advice is to be open to the Lord's voice above all others and expect him to speak with you each day. And he will keep you, guide you, and ensure that you are fruitful all your days, long into retirement and old age.

'He calls his own sheep by name...his sheep follow him because they know [recognise] his voice.' (John 10:3-4)

Please make this your daily prayer, *'Lord, make me into a person who hears your voice, and follows you, all my days'*.

There is no better advice. God be with you. ●

CMF

75+

2024
ANNIVERSARY
APPEAL

for the

future

help us raise £75,000
in our 75th year

cmf.li/75

