

MEXICO MEDICAL MISSIONS



DISPATCHES FROM THE MISSION FIELD Dr. Michael Berkeley

Twenty five years!

This October we will celebrate a quarter century since the opening of Hospital Misión Tarahumara. In October 2000, the governor of Chihuahua inaugurated our new hospital. After “cutting the ribbon” we gave him a tour and he was most impressed. At the end of the tour the governor turned to me and said:

“Dr. Mike, is there something I can do for you?”

The afternoon before the governor arrived, I was actually at the Denver airport getting ready to catch a flight to Mexico City where I was to present myself before a government panel which would decide where I would spend my year of “Social Service.” Despite my 14 years of college, medical school, internship, orthopedic surgery residency and Board certification, the Mexican health authorities were hesitant to grant me a medical license. I had to prove to them that I had been properly educated. This process involved years of paperwork, and I even had to submit my elementary school report cards (which my mother had miraculously saved.)

But one thing was still lacking. Every Mexican physician must perform one year of “Servicio Social” providing medical care in an underserved area – the location to be determined by the government.

I explained to the head of the health department that ten years of part time service in the 1990’s operating a crippled childrens program in Chihuahua was much more than a year of full-time social service, but he said ‘No.’

So there I was at the Denver airport getting ready to fly to Mexico City to learn where I was to spend the next year. And then I got the message that the governor wanted to inaugurate the hospital the following day. In a panic

I sent an apology to Mexico City explaining that I would have to reschedule. And then I began an all-night journey to the hospital, arriving an hour before the governor’s helicopter landed.

So, when the governor asked me if there was something he could do, I quickly explained my Servicio Social predicament. He simply replied, “Hecho.” (“Done”) and a week later I received my certificate of Servicio Social, and subsequently my medical license.

This was a miracle. The government had overlooked the previous decade of me practicing medicine part-time without a license. But being a full-time surgeon and hospital director absolutely required an official medical license. There is a pathway by which foreign trained doctors can get a US medical license – but the reverse process by which a US physician can get a Mexican medical license is murky and rarely used. And I now had a license and was free of my Servicio Social obligation. This was only one of innumerable miracles that we have witnessed in the past 25 years. There’s an old saying:

Christians believe in miracles and missionaries depend on them.

We have experienced 25 years of God’s faithfulness, protection and provision. As we look towards the next 25 years, we are praying confidently that God will continue His Blessings.



MIKE and MACI BERKELEY

A TARAHUMARA REVIVAL



Three months ago, pilot Brent Dodd and I were flying back to the hospital. Due to high winds, we had to land at a remote landing strip called La Mesa 30 miles from the hospital in order to wait for the winds to die down. Normally La Mesa is a pretty quiet place, but that day over a thousand Tarahumaras were gathered at what might best be described as “An Old Time Gospel Revival.” Mennonite missionary Johnathan Pinkham was preaching in the Tarahumara language to this huge crowd. Hundreds of Tarahumara women in their colorful dresses were milling around. There was loud Gospel music, barbecue and treats for the multitude of children.

I stood in the midst of this barely organized chaos thinking, “Twenty five years ago when we opened the hospital, this scene would have been inconceivable to the handful of missionaries that worked among the Tarahumara.” And I quietly thanked God for twenty five years of provision and protection, and for the privilege of watching hundreds of Tarahumara listen attentively to the Gospel being preached in their own language.

A BIT OF HISTORY

Most people have heard of the Spanish Conquistador Cortez’ invasion and conquest of the Aztec empire in 1520. But a more obscure bit of history is the subsequent arrival of more Spanish conquistadors who spread throughout Central America overwhelming the other sixty indigenous tribal groups in Mexico and incorporating them into the Spanish “Hacienda” system – basically serfdom under a Spanish Lord. But one tribe – the Tarahumara – avoided conquest by retreating into the rugged Sierra Madre mountains of northern Mexico where the conquistadors could not follow. They abandoned the fertile plains of the lowlands where they had been for over a

thousand years and adapted to a hard scrabble existence in the rocky hills and canyons of “the Sierra.”

But “adapt” they did. The Tarahumara are survivors and have amazing “grit.” They tolerate hardships we can scarcely imagine. As a surgeon, I’ve observed their incredible pain tolerance – for example, they require little or no pain medicine after operations.

Their athletic endurance is legendary. They are the world’s greatest ultramarathoners. The men run 24 hour 100 mile races. The women, being the “weaker sex,” only run 50 miles.

Unlike the urban poor in the developing world who are crowded into shanty towns, each Tarahumara family has their own “ranchito.” They are subsistence farmers growing corn and beans. It may not be much, but it’s theirs.

United Nations data says they are the poorest people group in Mexico, but they have an incredible dignity about themselves, and much pride of their culture. In short – *they just don’t seem to understand how poor they are.*

But, despite all their positive traits, all is not well with the Tarahumara. Crop failures are common leading to malnutrition, especially among children. Like other Native Americans, they are disproportionately affected by the infectious diseases that arrived with Columbus like tuberculosis and measles. Unlike virtually every other tribal group in the world, the Tarahumara never developed a system of indigenous midwives. Therefore, Tarahumara women deliver their children alone without any skilled assistance, which contributes to one of the highest rates of maternal mortality anywhere. Living in such a remote area, the 100,000 Tarahumaras have little or no access to healthcare when afflicted by serious illness or injury.

And, as if life wasn’t challenging enough, the cartels have confiscated arable land for drug production.

Worldview is Everything

The Tarahumara are animist; they believe in a distant and capricious creator god named Onoruami who must be appeased through various rituals. More worrisome are the many spirits that inhabit their world which can affect the health of their families, livestock and crops. Animism produces a fatalistic world view – a sense that that nothing can be done to improve their state. Onoruami is fickle and temperamental, as are the spirits they fear.

In summary – the Tarahumara are an incredibly tough, resilient and independent people who believe the universe is stacked against them. *So they just need a little help and a new worldview.*

We are allied with several missionary groups working among the Tarahumara. Mexico Medical Missions has focused on healthcare, agricultural assistance, and community health. But more importantly, we have offered them the Gospel. We have told them of a creator God who is not capricious but rather is unchanging in His love and faithfulness. They have heard of the Son of God who has shared in their sufferings and who died on a cross for the sins of mankind.

And the Tarahumara have responded more than we ever dared hope. When Hospital Misión Tarahumara opened its doors twenty five years ago we were confronted with their spiritual hardness of heart. There was little interest in the Gospel. We were outsiders and not to be trusted. But as the years passed, we were gradually accepted by the people, and we began to notice cracks in their resistance to the Gospel. After ten years we were happy just to get a smile from the usually impassive Tarahumara face. And now we see a hunger for the Gospel. They ask for MP3 players loaded with Christian music and Bible readings. There are more Tarahumara Christian pastors with small but growing churches. As I write these words, 2,000 Tarahumara are gathered outside our town at the annual “Tarahumara Festival” sponsored by Assembly of God pastor Cruz Velasquez – three days of preaching, singing and praying.

The MMM team and the other missionaries that work among the Tarahumara are amazed at what has happened in the past 25 years. We never thought it possible that the Tarahumara tribe would open up to the Gospel in our lifetimes.

But the work is not finished. There is so much left to do. There are still remote villages of the Sierra which have never heard the Gospel. Healthcare needs are still overwhelming. Young native pastors need to be trained and new believers need to be discipled.

Thanks for your support and prayers.



MEXICO MEDICAL MISSIONS
1302 WAUGH DRIVE #685
HOUSTON, TEXAS 77019
WWW.MEXICOMEDICAL.ORG
INFO@MEXICOMEDICAL.ORG

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CAMPAIGN FOR A NEW MOBILE CLINIC VEHICLE

There are 100,000 Tarahumaras living in small communities scattered over 20,000 square miles of some of the most rugged terrain on earth. Hospital Misión Tarahumara is located in the middle of this area, but travel to and from the hospital is difficult for those who live in remote villages. At any given time in this vast area there is probably a child dying of a malnutrition-related disease, or an adult with a serious illness or injury who lacks the means to travel to the hospital. Reaching out to these remote communities has been the only solution to this problem.

Five years ago we instituted the Mobile Clinic program with a Toyota Land Cruiser. The vehicle has modifications including water, electricity, an attached shelter and even internet. This program has been a remarkable success with patient volume doubling each year.

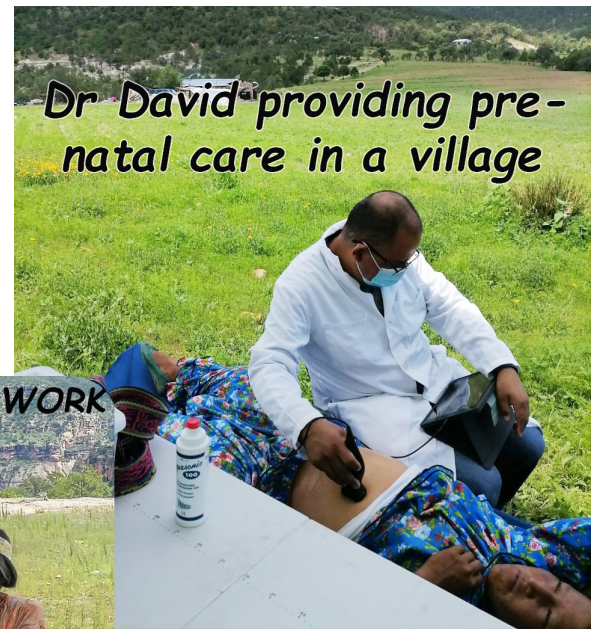
But the roads of "the Sierra" are horrible and the Land Cruiser is worn out. We are starting a campaign to replace the vehicle, and we are seeking \$50,000 for the new Mobile Clinic.

A generous donor has already offered to match any donation up to \$25,000. So any donation will be doubled! Please consider a gift to help put this life-saving vehicle on the road.

MOBILE CLINIC SET UP IN VILLAGE



Dr David providing pre-natal care in a village



NURSE ALE AT WORK



A VILLAGE NUTRITION CLASS



YOUR GIFT WILL HELP US TO REACH MORE VILLAGES

