

Christian HealthCare

NEWSLETTER

MEMBER LETTERS:

**The cards meant so much
we kept them**

We shed so many tears

when we read the cards and letters that have come in from members with their shares. Many times those blessings meant more to us than the money that pays for the doctors. We kept several that are so important to us on the inside of the front door, reminding us how God's people share in our burdens.

*Roger and Kim Wilson
Belle Plaine, Kansas*

I thank God for this wonderful ministry I participate in. The abundant support, prayers, and encouragement from fellow members and staff alike have been life changing.

It is such a blessing to have my financial needs met, which contributed to a stress free recovery. My healing has gone beyond what surgeons said was possible, a testament to answered prayers.

*Jean Koelmel,
Little Elm, Texas*

Discover the difference between what Planned Parenthood says and what it does

from the Alliance Defending Freedom

Planned Parenthood—the name certainly seems appealing, and who wouldn't applaud an organization whose professed mission is to promote the health of women and families?

In a national online survey of 2,000 people conducted by Alliance Defending Freedom, 49 percent of participants gave a "very positive" favorability rating to Planned Parenthood. One of the primary factors responsible for the favorable rating was the perception that Planned Parenthood is committed to providing "reproductive health care."

However, when participants were asked what services Planned Parenthood provides, the results were as follows:

- Sixty percent mistakenly believed that Planned Parenthood provides education for new and expectant parents.
- Thirty-seven percent incorrectly thought that Planned Parenthood provides counseling for parents interested in adoption.
- Only 36 percent were aware that Planned Parenthood performs abortions, yet it performs more abortions than any other organization in the nation.

Respondents who gave Planned Parenthood the highest favorability ratings were more likely to believe that the

organization educated new and expectant parents and provided adoption services. They were also less likely to think that Planned Parenthood performed abortions.

So why is there confusion around the services and purposes of Planned Parenthood? Despite being the largest seller of abortion in the nation, Planned Parenthood does not aggressively advertise its big abortion business—that is, until it comes to lobbying for more tax dollars or launching legal challenges to any laws that would make abortions safer, involve parents in their daughters' decisions, or provide any protection for preterm children.

Abortion advocates claim they want abortion to be "safe, legal, and rare." But

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Are we eager for the unity of the Spirit?

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Sharing Summary from October

Shares:	\$14,425,568	Personalized prayer requests of the members with Needs are in the Prayer Guide. Please use your version of the Prayer Guide to support the members assigned to you.
Needs:	\$13,804,101	
In Negotiation:	\$ —	
New Needs:	2,333	
Total Needs:	4,525	
New Rewards:	153	Member Households: 49,737 (as of 9/22/15)
Miscarriages:	31	
Final Rewards:	7	

Contact Us: 877-764-2426 samaritanministries.org/members

Questions about?

Email

Phone Menu

Your medical need

needs@samaritanministries.org

1 - 1

Shares you are sending or receiving

shares@samaritanministries.org

1 - 2

Your membership

membership@samaritanministries.org

1 - 3

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Cameron Easley
Member Services Manager

Remember:



SEND A NOTE—

Burdens can be lightened emotionally as we encourage one another in the Lord.



PAY YOUR SHARE—

Burdens can be lightened physically as we do our part to financially meet others' needs as they would in our time of need.



ALWAYS STAY ALERT IN PRAYER—

Burdens can be lightened spiritually as we unite to call upon the God of the impossible.

The goals and importance of church discipline

by Rob Slane

Recently I served on a team at my church charged with developing guidelines for how to handle church discipline when it becomes necessary. This experience reminded me of just how important church discipline is, and that churches must have a balanced, Biblical approach to this issue. I don't claim to be an expert on these matters, but I will share some insights I gained on why church discipline is important, and must be done in the right spirit.

As with any other aspect of the Christian life, church discipline is a straight path which comes with wide ditches on either side. On the left sits the ditch where church discipline is virtually never exercised; on the right, the ditch where church discipline is done in a cold, heavy-handed—and sometimes adversarial—way. Most of us have probably witnessed both approaches, and the consequences that usually follow from either error ought to make us want to studiously avoid both.

First we must ask, “What is the purpose of church discipline?” In a recent podcast from the website *Mortification of Spin*¹, Carl Trueman identifies three goals of church discipline:

1. Vindicating the Name of Christ in public
2. Protecting the flock
3. Reclaiming the offender

In Ephesians 5:1, Paul exhorts the people of God to “be imitators of God, as beloved children.” Peter, in his first epistle, describes the church as “a chosen race, a royal priesthood,

a holy nation, a people for His own possession, that you may proclaim the excellencies of Him Who called you out of darkness into His marvelous light” (1 Peter 2:9). We are therefore called, both as individuals and as churches, to imitate God and, in doing so, bring glory to Him.

This means that where serious, ongoing, and unrepentant sin is accepted or ignored, the church mis-

The whole process from beginning to end must therefore be conducted in the kind of love and mercy that is prepared to forgive 70 x 7 times.

represents Christ. This was the case in the church at Corinth when they refused to discipline a man involved in gross, sexual sin. Paul is horrified by this, saying: “And you are arrogant! Ought you not rather to mourn? Let him who has done this be removed from among you” (1 Corinthians 5:2). Believers who live in unrepentant sin, and churches who fail to practice church discipline, bring reproach to the Name of Christ.

However, Christ's Name can just as easily be trampled upon in a situation where church discipline is carried out in a heavy-handed, unjust, or unloving way. Here, the

Corinthian church again finds themselves at fault. While Paul's admonition has prompted them to enforce discipline within the church, they now fail to forgive those who are truly repentant. Again, Paul exhorts them: “For such a one, this punishment by the majority is enough, so you should rather turn to forgive and comfort him, or he may be overwhelmed by excessive sorrow. So I beg you to reaffirm your love for him” (2 Corinthians 2:6-8). Having previously admonished them for their lack of holiness, Paul now admonishes them for their lack of love, which he says could crush the repentant man.

Implicit in both of Paul's admonishments is the idea that a lack of concern for holiness by ignoring sin within the church, or a lack of forgiveness, mercy, and love for the repentant sinner, brings reproach to the Name of Christ in the eyes of both other churches and the world.

The second purpose of church discipline—protecting the flock—is in some ways a natural overflow from the first. Our primary concern is to ensure that Christ's name is honored, which is done when His people imitate Him. This necessitates protecting His people from doctrinal heresies and gross and unrepentant sin. Furthermore, failure to deal with such issues in a godly way will cause the church to suffer and may even lead others astray.

Paul warns of the dangers to the flock if gross sin is not dealt with. Again, he speaks to the church at Corinth: “Your boasting is not

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Les and Christine Riley

Memphis Morning Center

by Michael Miller

One of the poorest places in the nation is one of the richest fields for sharing the Gospel and helping moms and their babies.

Les Riley, executive director of the Memphis Morning Center, is there to help both happen.

“There’s a great deal of need, but also a great deal of hope,” says Les, who started in the position at the beginning of 2015. “The people in places like Warren, they know they have a mess. They’re very open about it, very honest.”

“Warren” is Warren Apartments, a government-subsidized housing complex that sits in a part of Memphis, Tennessee, that resembles a third-world country, Morning Center officials say. But the Morning

Center, which offers free, high-quality maternity care, has been reaching out to residents in that and other poor Memphis neighborhoods for two years, providing dozens of women and babies with top-notch maternity care and delivery services.

Les was a natural to head up the Morning Center. Although he had mainly made his living as a farmer and a salesman, he has been heavily involved in pro-life activities since he became a Christian in 1991, doing sidewalk counseling, helping to open a crisis pregnancy center, and leading a successful drive to get a personhood amendment to the Mississippi constitution on the ballot (the amendment was voted down).

He also was one of the first people to encourage Samaritan Ministries to put a Morning Center in Memphis, by putting its founders in touch with pro-life workers in the region who could help build support.

“Les has been a big fan of the Morning Center and our distinctives of private charity and Gospel-centered ministry from the get-go,” says James Lansberry, Samaritan executive vice president and one of the founders of the Morning Center.

Les says he “saw the desperate need” for something like the Morning Center in Memphis.

“Memphis is a bit of an abortion mecca, because it sits in the corner



of Tennessee near Mississippi and Arkansas, and both of those states have stricter abortion regulations than Tennessee,” Les says.

He says 8,500 abortions per year are performed there. That statistic, plus the city’s high infant and maternal mortality rate, make Memphis a natural place for the Morning Center to offer the Gospel and maternity services.

Les oversees four Morning Center clinics, which are scattered around Memphis. Having different locations makes it easier for moms to get to appointments in a city where it’s hard for poor people to get around.

“We serve in a number of inner-city neighborhoods and, by and large, it’s African-American and Hispanic, but that’s not everybody we serve,” Les says. The Morning Center has found the opportunity recently to reach out to Muslims as well as refugee populations.

But Memphis is no different than any other city in its needs and as a mission field:



“It’s an area that has been conquered by the loving rule of Jesus Christ, and He’s in the process of setting all things right,” Les says. “Most of the people are not living in light of that right now, but we have the opportunity to step in and be an instrument to advance His Kingdom in areas that He has already conquered. So I think in that degree that Memphis is a very hopeful place.”

Les and his wife, Christine, have been trying to be instruments of Christ in Memphis for more than 20 years. They have routinely stood, for instance, outside of Planned Parenthood abortion clinics, praying and offering counseling.

“Generally I just try to be there and reach out to share the Gospel with anybody who will listen, whether it’s a guard or employee or a patient,” Les says. “I try to talk to the men. But if not, I just call out to the women and tell them there are alternatives and talk to them about the law and love of Christ.”

One of those locations became an answer to prayer. An abortion clinic called the Memphis Area Medical Center for Women, a “real nasty place,” recently closed and was razed. Les attributes that to years of fervent prayer.

“Four generations of my family prayed outside that abortion clinic,” he says. “Maybe as many as 100,000 children were killed there. For 30 years, people, including 20-plus of my family, consistently prayed outside that abortion clinic that God would close it.”

Toward the end of 2013, He did. The building is now “a big hole in the ground.”

“It was exactly when God decided they had filled up the full measure of their sin,” Les says. “He answered the prayers of His people and now it’s gone.”

Les’s main responsibilities, though, are to manage the Memphis Morning Center, raise money, and to be a pastor to the patients and the staff—two doctors, a nurse practitioner, a registered nurse, two administrators, an ultrasound technician, and several medical and ministry volunteers.

“His job is to encourage them, disciple them, help them to see how the Gospel interacts with the patient’s life on a day-to-day basis,” James Lansberry says. “Les’s focus is on equipping them to be able to minister to others.”

Les says he doesn’t have much direct interaction with the patients themselves.

“I try to stay on my side of the wall,” he says with a laugh.

But, he adds, “We want it to be the same kind of experience a wealthy person from the suburbs would have—the best medical clinic in town if she had the money.”

“The way I tell my staff is, ‘Our

goal is not to give them medical care and then hand them a tract on their way out the door,’” he says. “Our goal is to create a Gospel environment.”

“The people come in, they’re greeted. We want our waiting room to be like grandma’s living room, where you really feel welcome. You can join in conversation. Our volunteers and staff try to find out what their needs are beyond just the medical care. ‘How did you get here?’ ‘What are your needs right now?’ We try to connect them with a church or ministry that meets those needs. We just try to build a relationship with them over whatever amount of time we have with them. Hopefully they’re going to hear the Gospel, but hopefully we’re going to live it as well.” ♦



the Morning Center

Why SMI?

When Les and Christine Riley joined Samaritan Ministries, there wasn’t much of a learning curve for them.

“All three of my married children have been members since they got married or before,” says Les, executive director of the Morning Center. “I was somewhat familiar with (executive vice president) James Lansberry. I heard him speak at different events, and wasn’t entirely surprised that Samaritan would be interested in doing something like the Morning Center.”

While it’s not a learning curve for the Rileys, who live in Hernando, Mississippi, it has been for the doctors and nurses they interact with, “because they really don’t understand.”

“But we’ve been very pleased with the service, everything about it,” he says. “We love the model.” ♦

Doctoring Data: How to sort out medical advice from medical nonsense

by Dr. Malcolm Kendrick

reviewed by Jed Stuber

"It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of the New England Journal of Medicine."

*Dr. Marcia Angell,
author of The Truth About Drug
Companies: How They Deceive Us
and What to Do About It*

Dr. Marcia Angell, former editor of the *New England Journal of Medicine*, reluctantly concludes much medical advice is unreliable, and British cardiologist Malcolm Kendrick, author of *Doctoring Data*, goes even further: "The sad truth is that most of the advice we are now bombarded with varies from neutral to damaging."

Dr. Kendrick wrote *Doctoring Data* to help his patients be able to see through common fallacies and deceptive tactics in medical advice. He lays out "10 Tools for Establishing the Truth," devoting a chapter to each one.

In his 30-year career Dr. Kendrick has seen the medical community come to various points of what he sees as absurdity. Medical advice has become ever more simplistic and strident, as if patients couldn't handle any kind of qualified statement or counter evidence. "If you sunbathe you'll die of skin cancer." "If you eat fat you'll have a heart attack." Guidelines developed by the European Society of Cardiology put 95 percent of Norwegians in categories requiring cholesterol or blood pressure medicines, yet it is well-established that Norwegians are among the healthiest and longest-lived people on earth. The elderly



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patients he works with often come to him taking 10 or more drugs daily. There is constant pressure to have endless routine testing "as if good health is only really possible through constant monitoring by the medical profession."

Dr. Kendrick offers this explanation of his contrarian stance against conventional wisdom: "The main reason I wrote this book is most definitely *not* to tell people what to do. In my view there are more than enough people doing that nowadays. My hope is that once you have read this book, you will have far greater insight into the daily bombardment of medical scare stories and misinformation. Then, having gained this insight, you will be able to decide for yourself what to do. I suspect that you can then happily ignore 95 percent of the health care advice that rains down."

10 tools for establishing the truth

1. Association does not mean causation.
2. Lives cannot be saved; we're all going to die.
3. Relative mountains are made out of absolute molehills.
4. Things that are not true are often held to be true.
5. Reducing numbers does not equal reducing risk.
6. Challenges to the status quo are crushed—and how!
7. Games are played and the players are...
8. Doctors can seriously damage your health.
9. Never believe that something is impossible.
10. 'Facts' can be, and often are, plucked from thin air.

Chapter 1: Association does not mean causation

Most of us would quickly affirm the statement “association does not mean causation,” having been taught this bit of basic logic somewhere along the way in our schooling. But the writers of medical literature and news reports about the latest findings are masters of subtly blurring the distinction between the two. Most of the time science can only justify tentative speculation about correlation, but that just isn’t as interesting as claiming “X causes Y!”

Another problem is that many claims of causation are based on observational studies, not actual experiments. The problem with observational studies is that there is no control over the composition of the... uh well, “control” groups, so there is no attempt to rule out other causal factors.

Dr. Kendrick says a notorious example is the notion that hormone replacement therapy protected women from heart disease. It all started with the fact that young women don’t get heart disease, but young men do. Then a single observational study of older women using hormone replacement who had less heart disease was cited to confirm the hypothesis. But years later it was realized that the women in the study were very health conscious, had very high incomes, were highly educated, smoked much less than average, and exercised much more. They weren’t anywhere close to a selection of average women, and those other variables were very important. Finally a controlled study was actually set up and funded. It was intended to confirm that hormone replacement prevented heart

disease in older women, but the results showed just the opposite—a huge increase in heart attacks and strokes.

Another problem Dr. Kendrick explains is that our minds easily fill in gaps in logical chains of reasoning based on beliefs we already hold. A newspaper headline reads “Eating red meat dramatically increases the risk of death from heart disease.” Without realizing what they are doing, people quickly reason: “Meat contains a lot of fat. Fat contains a lot of cholesterol. Fat raises blood cholesterol levels. Cholesterol in the blood causes heart disease.” The problem is the study showed those who ate the most meat had the lowest cholesterol levels, a fact that is never mentioned in the news reports. Furthermore, every step in that chain of reasoning is disputed by some researchers based on strong evidence from controlled, randomized, interventional studies.

It gets worse. The group in this study that ate meat also happened to smoke most, exercise least, and have higher incidence of diabetes. No mention is made of those factors correlating with heart disease. Again, this study was merely observational, and while the study itself carefully only claimed correlation, the language about “increased risk” in the news story is read by most people as establishing causality.

According to Dr. Kendrick, observational studies and the weak correlations found by them almost always mean nothing at all. If you understand that and don’t even read the rest of the book, he says, you will have gotten his most important message.

Chapter 2: Lives cannot be saved; we’re all going to die

Consider these passages from a real press release: “Heart attacks can be avoided in people at risk of vascular disease by using statin drugs to lower blood cholesterol levels... This is a stunning result, with massive public health implications. We’ve found that cholesterol-lowering treatment can prevent strokes as well as heart attacks.... In this trial ten thousand people were on a statin. If now, an extra ten million high-risk people worldwide go onto statin treatment, this would save about fifty thousand lives each year—that’s a thousand a week.”

The notions of lives saved and problems prevented are very misleading. After all, we can be sure we will all eventually die, and if something were actually prevented, that would mean it never occurs again. Also, multiplying the numbers actually studied by a ridiculous factor of one thousand also adds to the deception. In this study it was technically true that there were more people alive at the end who had taken the statin than the placebo. But the real questions scientists—and anybody reading medical advice—should be asking are “How many more? And how much longer did they live?”

Here are the results of this study stated more truthfully: For every two hundred people treated with statins for a full year, one extra person was alive in the statin group. All of them were elderly to begin with and those on the statin survived an average of 3 months longer than those on the placebo.

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Giving thanks with contentment

by Kevin Carson

Have you ever had a year when you thought Thanksgiving holiday didn't fit it very well? Tragedies. Job loss. Recession. Natural disasters. Politics. Add to this the times people have sinned against you through reckless gossip, broken promises, neglected relationships, or dishonest business. Oh yeah, plus family with health problems, maybe even your personal health difficulties. As we gather around friends and family this year, in all honesty, many in our churches will find it hard to say the time-honored Thanksgiving family prayer from a grateful heart.

Maybe you find yourself asking the question, "How can Paul say

that he had learned regardless of the circumstance to be content (Philippians 4:11)?" Consider Paul's circumstances: he is writing from a prison. Others (actually preachers) are choosing to sin against him. He is not sure if he is going to live or die. Some in the church are preaching a false gospel. Good friends were not getting along. Yet, in spite of all this, Paul still could say... regardless of where I am and what is going on, I find a way to be content.

Foundation of Paul's contentment

Christ was at the center of Paul's life. His relationship with Christ was based upon Christ's humble obedience to the Father and not on his

(Paul's) efforts (Philippians 2:5-11; 3:3-7). Paul kept a clear view of the cross and its implications for salvation. He thought of Christ as his example—and the example for all believers. Christ demonstrated how to suffer. He selflessly lived life not for His own glory, comfort or plans; but instead, Christ accepted God's will for His life in total submission as He perfectly loved God and served others.

Paul also determined to gain Christ, to be found in Christ, and to know Christ, specifically the power of His resurrection and the fellowship of His suffering (Philippians 3:8-11). Paul understood that God did not accept him based upon his own righteousness. Those things that looked like righteousness from Paul's perspective were as refuse. Instead, Paul enjoyed the righteousness of Christ and lived in the power of the resurrection. Likewise, Paul considered it only natural and right to suffer for Christ. Since Christ suffered more than any other in order to provide righteousness, Paul wanted to share in that same suffering as a means of worship and gratitude.

He wanted to live up to Christ's purpose for his life (Philippians 3:12-14). Paul accepted Christ's goal for his life. He understood when he was saved that Christ had certain expectations. He recognized when he became a follower of Christ that Christ had an agenda. He was saved with specific purposes in mind. Therefore, he made it his ambition to be like Christ.

Paul as well eagerly waited for the joy of the return of Christ. In other

How to grow your contentment

1. First, keep an ongoing list of things for which you are thankful. Add ten new items each day on Monday through Friday. Then on Saturday and Sunday review your list. You could also begin a prayer to God by specifically reading back your list to God.
2. Rehearse the Gospel each day. Take time daily to consider the love of God, the humble obedience of Christ which led to His death, the ever-present ministry of the Spirit, the joy of life in the body of Christ, the privilege to have free access into the throne of God through prayer.
3. Memorize at least one verse each week. Take time to consider its meaning and how it applies to your life situation.
4. Develop a prayer list with a specific focus on your church, your church family, and others.
5. Find at least one person or family each week to serve without any expectations in return.

Each of these five first-responses will keep your attention on Christ and others and not your own circumstances.

Member Letters

words, he lived life on earth with life in eternity in view (Philippians 3:17-4:1). Others, whom Paul called enemies of the cross, lived for this earth, today, present comfort and glory; whereas Paul saw the guaranteed hope of ultimately being with God and having a glorified body to motivate him. With eternity as the lens to view life, he called on fellow believers to stand fast in the Lord.

So how could Paul be content while a prisoner, being sinned against by others who proclaimed Christ, and not knowing if he was going to live or die? He could because he viewed life through the prism of the Gospel: what Christ did in the past, what Christ is doing in the present, and what Christ will ultimately do in the future. This is why he concludes, "I can do all things through Christ who strengthens me."

Final words

Paul demonstrates amid incredibly tough circumstances that contentment flows from a life totally surrendered to God. So as we live life, we can also grow in contentment as we focus, relish, and enjoy life as the redeemed. When our circumstances become greater in our eyes than the reality of life in Christ, in just a matter of time we will be discontented. However, when we keep our mind (inner man) engaged on what is right and our actions consistent with it (Philippians 4:8-9), contentment will grow. May God richly bless you in Christ, and Happy Thanksgiving! ♦

This article was first published in the Baptist Bible Tribune and is reprinted by permission. <www.tribune.org/files/nov-10trib.pdf>

Kevin Carson serves as pastor of Sunrise Baptist Church in Ozark, Missouri, and also serves as professor and department chair of Biblical Counseling at Baptist Bible College and Theological Seminary in Springfield, Missouri. He is a counselor and trainer for the Association of Certified Biblical Counselors.

As a healthy 47-year-old, I was very frustrated when the federal government mandated that I get health insurance. I could not afford the monthly premium or the huge deductible. That's when I heard about Samaritan Ministries, and I signed up.

God's timing is perfect because, little did I know, my health was going to take a big hit. I thought I had enough money saved to pay for my health care if needed. I had no idea how expensive it could be! What I had in the bank was nothing compared to the expenses I incurred.

God knew what was coming and directed my path to Samaritan Ministries. This medical event would have done me in financially. I feel very blessed by the support and love of so many people. It's like having an extended family.

*Mari Nordby
Palmer, Alaska*

I don't think I can express to you how blessed I feel about what God did for me. I have to admit that when my husband first signed us up for Samaritan Ministries, I was more than a little concerned about how it would work.

When I was faced with cancer, I found I was able to search out my options and choose what was right for me, all the way down to the specific doctor. I wasn't limited to only ones that would take an insurance policy. Because of this I am a cancer survivor, and tell others cancer doesn't have to be a death sentence. Thank you!

*Maria Bradbury
Pittsgrove, New Jersey*

This ministry is amazing, unique, exciting, and inspirational! I'm so grateful that our monthly share goes directly to other believers, and I'm not sending money to an insurance company. We get to sow into the Kingdom with each letter and check we write. Praise be to God for His goodness.

*Isaiah and Maggie Creasap
Hebron, Ohio*

I am overwhelmed by the response to my need, checks and letters from people all over the country. It is so beautiful and encouraging.

I have never had this kind of fellowship with Christians all across the country. It feels like I'm getting a little glimpse of heaven.

Being on the receiving end has motivated me to be a more cheerful giver. Now I always make sure I include a card with a Scripture. The personal and sincere letters warm my heart!

*Mary Luber
Eagle, Nebraska*

God is so good to use so many generous people to meet our Special Prayer Need. I completely underestimated the power of \$20. Twenty dollars from generous members multiplied many times relieved the pressure of my medical bills for a pre-existing condition. Now I will no longer think that a gift of \$20 is insignificant. In the hands of Jesus it goes really far.

*Randall and Marli Brown,
Caledonia, Michigan*

does it really make business sense for Planned Parenthood to make abortion rare?

The 2011-2012 Planned Parenthood annual report shows it performed 333,964 abortions during that fiscal year. The Guttmacher Institute states that the average abortion patient pays \$470 for a first-trimester procedure. Abortion costs increase each week of pregnancy, but if you were to assume that every patient had a first-trimester abortion and paid the average price, this service alone would have generated nearly \$157 million for Planned Parenthood in just one year.

Abortion is the single largest cash-generating service Planned Parenthood provides. It accounts for around half of the roughly \$300 million generated in revenue from its patients.

Market share

Successful businesses must secure a growing share of the market they serve. Over the years, Planned Parenthood has claimed an increasingly larger share of the abortion market.

Alliance Defending Freedom's *Planned Parenthood by the Numbers Report* shows that in 1973, Planned Parenthood performed only 0.67 percent of abortions done in this country. In 1993 it performed 8.98 percent, and in 2009 it performed roughly 27 percent. Translate those percentages to human lives, and you see a dramatic rise from 4,988 babies aborted by Planned Parenthood in 1973 to 329,445 aborted in 2009.

A 2012 report released by Planned Parenthood showed that the organization exceeded all of its previous targets by performing 333,964 abor-

tions that year. Purely measured by the numbers, Planned Parenthood is a business success story. But the price of that success is paid by the millions of babies lost to abortion.

Other options

As a self-described “pro-choice” organization, Planned Parenthood’s website rightly offers these thoughts: “If you are pregnant, you have three options to think about—abortion, adoption, and parenting.” Having noted these options, you would expect that they would be presented to a female client with equity. But that simply isn’t the case.

Abby Johnson, the former director of a Texas Planned Parenthood facility, worked at Planned Parenthood because she cared about getting women the help they needed. She took to heart the many Planned Parenthood advertisements about “options counseling.” But she noticed there wasn’t a process for helping women with adoption information.

“I felt like it was important,” she says. She wrote a 75-page protocol for options counseling, and sent it to Planned Parenthood’s national headquarters. She requested that the protocol be implemented in all of Planned Parenthood’s facilities.

Some weeks later, she learned that her request had been rejected. A superior explained that it would be strange for someone to come to Planned Parenthood for an adoption referral, because “that’s not what we do.” The supervisor likened it to taking a car with a broken muffler to a transmission shop for repair.

Adoption, Johnson was told, would not be revenue-generating, so the organization was not going to put the protocol forward. Other former

Planned Parenthood employees have come forward with similar stories. Adoption is simply not central to Planned Parenthood’s strategic plan.

Abortion is central.

Abortion quotas

According to Sue Thayer, a former Planned Parenthood facility director, each Planned Parenthood Affiliate has mandated abortion goals and quotas for its centers. With abortion as the organization’s primary money generator, the mandate helps ensure continued revenue. Abby Johnson recalls the organization’s continual focus on money—and on the way to obtain it—during her time as a center director. In staff meetings, leaders would say, “We don’t have enough money—we’ve got to keep these abortions coming.”

“It’s a very lucrative business, and that’s why they want to increase numbers,” she says. “One of the things that kept coming up was how family planning services were a drain on the budget, but abortion services were really running up the budget, and that was keeping the center afloat.”

It’s understandable why Planned Parenthood would talk about adoption and parenting, but the profitability of abortion would ultimately trump those options. According to Sue Thayer, “Adoptions are actually the only thing that Planned Parenthood doesn’t have a goal for.”

Insider information

When Sue Thayer worked for Planned Parenthood, she thought it was a helpful and caring organization, and one of the few health care options in her small, rural town. She started in 1991 as a family planning

assistant at a Planned Parenthood facility in Storm Lake, Iowa, and later rose to the position of manager. At that time, her facility provided family planning services for women and did not perform abortions. Thayer took the job because she desired to help low-income women obtain affordable health care, and she remained there for 17 years. “In my mind, Planned Parenthood was the ‘trusted friend’ it claimed to be, educating and providing women with effective contraceptives so that abortion could be avoided,” Thayer said.

In the early years, health care seemed to be the emphasis. But Thayer watched as the business structure changed. Conglomerates of Planned Parenthood facilities were formed, and along with them, larger numbers of high-dollar leadership positions were created. Her Iowa facility was absorbed into the conglomeration known as Planned Parenthood of the Heartland. Its rural location was a barrier in attracting doctors willing to do abortions. So, according to Thayer, Planned Parenthood leadership got creative. In 2008, the organization required the clinic to begin webcam-based “Telemed abortions.”

Cheap and quick

Abortions are done in one of two ways—either surgically or chemically. The first method cuts the pre-term child into parts and removes it from the womb. The second uses one prescription chemical to detach the child from the uterine wall, causing it to die, and a second chemical to induce contractions to expel the child.

Planned Parenthood wanted a quicker and less expensive way to

perform abortions, Thayer said, because doctors’ time is expensive and not always available in rural areas. A new concept was the solution: “Telemed.”

Telemed abortion uses the chemical method. It makes the procedure quicker (for the abortionist) and cheaper (for the facility), because no doctor, nurse, or other medical personnel are physically present with the patient.

After a brief webcam consultation, a doctor in a remote location pushes a button that opens a drawer in front of the female patient. Inside are two pills—the first taken on the spot, and the second taken later at home. The abortion process takes place outside the clinic, over a painful period of days.

Because some rural clinics are open only 15 hours a week, a woman may not have the option to return for medical help if she needs it. Instead, women are instructed to go to an emergency room if they experience problems. According to Thayer, women were encouraged not to admit taking the abortion pills, because miscarriage follow-up is covered by Medicaid but abortion follow-up is not.

According to FDA reports, the abortion pills have caused the deaths of 14 women and the hospitalization of 612 women, many with severe blood loss requiring transfusion. This is because the actual abortion takes place outside the clinic.

Nevertheless, Planned Parenthood championed the Telemed method.

The reason?

Low overhead costs, said Thayer. “My superiors justified Telemed abortions, lauding the financial benefits of not having to worry about or

pay for specialized equipment, staff, and a traveling physician—all required with surgical abortions,” she says.

After more than 17 years with Planned Parenthood, Thayer’s confidence in the organization had waned. She began asking questions, such as “Is this legal?” and “How can we do follow-up care?” But she didn’t receive answers. Just as her center was about to start providing Telemed abortions, she was fired.

Planned Parenthood called it downsizing, but supervisors showed up with boxes, waiting to escort her out.

“Webcam was a tipping point for me,” Thayer says. “I couldn’t see how I was going to ever... do webcam abortions.” She admits that she felt “relieved” about being fired.

The organization tried to motivate her to stay quiet about her experiences at the clinic. “They did offer me a... tidy little sum... if I’d sign a statement that I would never talk about Planned Parenthood—never even acknowledge that I had worked there,” she says. The offer was a significant sum, and as a single mother, Thayer admits it was tempting.

Instead, she contacted Alliance Defending Freedom. That connection resulted in filing a “whistleblower” lawsuit against the facility, alleging millions of dollars in fraudulent billing and other improper practices.

Thayer’s testimony contributed to the Iowa Board of Medicine’s August 30, 2013, decision to ban Telemed abortions. This came five years after Iowa became the first state in the nation to offer the program.

But in early November 2013, an Iowa District Judge ordered a stay on that decision... potentially reopening the door to Telemed abortions.

Continued on page 12

Abortion on Demand

Planned Parenthood advertises “nonjudgmental” care for all who come. Ultimately this means that no woman who wants an abortion is turned away, whatever her situation may be. And that situation can be tricky if the woman wants to abort a baby because of the child’s gender.

Planned Parenthood apparently does not judge even this decision.

A 2012 opinion poll conducted by the Charlotte Lozier Institute found that 77 percent of respondents believed that abortion should be illegal if the sole reason for seeking the abortion is the fact that the developing baby is a girl.

But even though a majority of Americans don’t like the idea of ending lives because they happen to be female, a Planned Parenthood official stated that while the group opposes sex-selection abortion, it doesn’t rule it out. Chloe Cooney, Planned Parenthood’s director of global advocacy, says abortion is always a complex decision best left to the private realm. In other words, if a woman wants an abortion for gender selection, Planned Parenthood won’t interfere.

Another challenging situation for Planned Parenthood is when a woman is being pressured into getting an abortion she doesn’t want.

Planned Parenthood appears to go both ways on this subject. On one hand, in 2012 after Chinese dissident Chen Guangcheng made a legal stand against China’s one-child/forced abortion policy, Planned Parenthood in the U.S. issued a statement claiming to be opposed to both forced abortion and coerced birth control.

But on the other hand, Planned Parenthood also supports funding for the United Nations Population Fund (UNFPA), the international group that cooperates with Beijing’s population control measures. When the U.S. House of Representatives considered eliminating its contribution to UNFPA’s \$39 million budget, Planned Parenthood opposed the measure and prevailed.

Statistics can be misleading

Planned Parenthood claims that abortions account for only 3 percent of the services it provides. But the actual numbers tell a very different story.

Planned Parenthood reports it provides about 11 million services for nearly 3 million clients in a given year. A total of 333,964 of those services are abortion procedures. This means that 11 percent of women who come to Planned Parenthood have an abortion.

Dispensing birth control represents a significant portion of those 11 million services. For example, by its standard of measure, when Planned Parenthood gave out 55,000 condoms on college campuses in the state of Washington, it could have counted that as 55,000 “services.” Every pregnancy test, STD test, or treatment for a urinary tract infection is counted as well. If every service, small or large, is weighted equally, you could statistically assert that abortion makes up just over 3 percent of what the organization does. But it is difficult to reasonably equate the simple act of handing out a single condom with that of performing an abortion.

If you move away from statistical manipulation and examine the

income generated by Planned Parenthood from each service, the picture becomes more clear: abortion makes up about 50 percent of its revenue. If the statistical percentages are more specifically defined as services provided to women who are pregnant, the numbers are even more dramatic.

As noted earlier, Planned Parenthood accurately says that a pregnant woman has three choices: keep the child, give the child up for adoption, or abort the child. Here is a statistic that casts a clear light on the organization’s priorities: Planned Parenthood states that it performed 333,964 abortions in the 2011-2012 fiscal year, and made 2,300 adoption referrals. That simply means that 92 percent of the services provided to pregnant women by Planned Parenthood were abortions.

The profitability and promotion of abortions is one of the key strategies for strengthening Planned Parenthood’s bottom line and securing its income growth. But growing costs are always a threat to a corporation’s viability. How Planned Parenthood handles cost-cutting measures also gives a chilling glimpse into their corporate soul. ♦

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If your family doctor is pressuring you to take statin drugs, Dr. Kendrick encourages you to ask these questions: “How much longer am I likely to live if I take it? What is the average increased survival time?” Dr. Kendrick writes, “I can guarantee here and now that they will not be able to answer this question. They will either say they do not know, or just guess, and they will guess something like five to ten years. I know this because I have asked many doctors and nurses this same question. No one gets anywhere near the vanishingly small figure.”

Dr. Kendrick also recommends you read his first book, *The Cholesterol Con*, which counters the theory that cholesterol causes heart disease. (You can find a review of it and other related articles at samaritanministries.org/fat.)

In this chapter of *Doctoring Data*, Dr. Kendrick goes on to explain that while average increased survival time is a reasonable measurement for people to consider, it is increasingly being used in haphazard ways by governments to determine how research is funded and which treatments are covered by welfare programs.

Chapter 3: Relative mountains are made out of absolute molehills

People are not rational about risk. There’s a miniscule chance of getting meningitis, but we’re afraid of it. The chance of dying in a car crash is significant, yet we drive around every day without a thought. Hippos kill more people every year than sharks, alligators, crocodiles, lions, and tigers combined. But mosquito bites kill more people than any other animal by a factor of several thousand.

The medical industry knows we’re just as irrational when it comes to medical advice, and exploits us, often with a very deceptive tactic called “relative risk.”

Here’s an example. One hundred people start taking blood pressure medicine and one hundred do not. At the end of a year, one person in the group taking the medication has died, and two in the group not taking medication have died.

The absolute difference in death is 1 person per 100 vs. 2 people per 100 = 1 in 100, or 1 percent. The relative difference in deaths is 1 vs. 2, or 50 percent. So the claim is made that if you take the medication, your risk of dying has been reduced by 50 percent! This tactic can be used no matter how large or small the group being studied.

Relative risk can also be used to scare people away from something the medical profession doesn’t approve of. For example, to claim moderate alcohol consumption causes heart disease or cancer. Based on one study, wildly distorted with tricky math. Dr. Kendrick argues that when you consider the preponderance of evidence, moderate alcohol consumption is actually good for your heart, and nothing at all can be proved about its relationship to cancer.

Dr. Kendrick says relative risk just isn’t sound science, and whenever you detect it, you’re better off to completely ignore what you are reading.

The relative risk tactic has come in for criticism in recent years, but unfortunately it’s still used often or is replaced with other deceptive tactics, such as Number Needed to Treat, another statistic governments have become enamored with.

Rest of the book

Believing it necessary, Dr. Kendrick devotes several more chapters to the dismal topic of statistics and how they are misused. Thankfully, he manages to lighten the mood with his British sense of irony and sarcasm. Here’s a sampling:

“Who shall guard the guardians?”

“Things that are high should be lowered. Things that are low should be raised. Yes, we have a drug for that... Kerching.”

“This is not science. This is the world of faith and belief, or perhaps the Spanish Inquisition.”

“This is eminence based medicine. Or, ‘Do you know who I am?’ medicine.”

“You can only die once of one thing.”

“Rule 1: The experts are, frankly, no more likely to be right about any given hypothesis than you. Rule 2: The angrier experts become the more likely they are to be wrong. Rule 3: When an expert is wrong, he, or she, is far less able to change their mind than you.”

The concluding chapters give Dr. Kendrick’s take on the politics, manipulation, and outright corruption he has seen in his experience working in the British medical system.

The book’s focus is on using basic logic to see through fallacies, and it ends on a positive note. Dr. Kendrick believes the medical system is desperately in need of change, and the way change can be accomplished is by informed patients demanding better answers.

One word of caution about the book. Dr. Kendrick uses a quote in the introduction that has foul language, and occasionally uses some colorful language himself. ♦

Prayer for the Persecuted Church

Hebrews 13:3 tells us to “Remember those who are in prison, as though in prison with them, and those who are mistreated, since you also are in the body.” Our brothers and sisters in Christ around the world are being persecuted for the sake of the Gospel. We need to remember them in prayer. Each month, the Christian Health Care Newsletter will provide updates gleaned from such sources as World Watch Monitor and The Voice of the Martyrs and offer prayer points. Please use them in your personal or group prayer time.

Saeed faces new charges

Pastor Saeed Abedini has been “severely abused” by Iranian authorities during interrogation at the Rajaei Shar Prison, International Christian Concern reports. Saeed, an American, passed the third anniversary of his imprisonment in September. He also is facing new charges that could extend his prison time beyond the eight years he faces. *Pray for strength and healing for Saeed as he continues to endure abuse and torture. Pray also that God’s peace will engulf him, and that he would be freed soon.*

Two Chinese pastors held

Cheng Hongspeng and Zhao Weiliang were sentenced to prison for “using a cult to undermine law enforcement,” Voice of the Martyrs reports. They were arrested with 20 other Christians in a raid on their church during choir practice in May. The others were released. *Pray for the pastors and their families and for the release of the pastors.*

Churches bombed by radicals

Two Nepalese churches were bombed in September by a radical Hindu group that wants Nepal to be a Hindu nation, VOM reports. Nobody was injured in the bombings, but more than 30 people have been killed in protests against the government, which recently rejected a proposal to make Nepal a Hindu state. A bomb at a third church did not detonate. Leaflets left at the churches demanded that Christian leaders revert to Hinduism. *Pray for peace as Nepal considers its future, and for protection of Christians against radical Hindus.*

Churches growing in UAE

Christians are able to meet openly in at least one Arab country: United Arab Emirates. Composed mostly of foreign workers, the churches are growing, ICC reports. However, Christians still face cultural and religious restrictions in many places. A Pew Research Center report estimates that there are 2.3 million Christians in the Arabian Peninsula. *Praise God that Christians can meet freely in some places in the Middle East. Pray that they will be encouraged to continue to do so and that the Holy Spirit will speak through their lives to Muslims in the region.*

Egyptian man arrested at mall

A 35-year-old Christian man is facing up to three years in prison for distributing Bibles at a mall near Cairo, Egypt, VOM reports. Medhat Ishak was interrogated for several hours after he gave a Bible to a Muslim man. He has been charged with “despising religion.” Originally Medhat was sentenced to 15 days of detention, but two more weeks were added. He was released on September 12. *Please pray that the charges will be dropped and that*

Christians will be able to distribute literature freely in Egypt.

Christian students assaulted

Fifteen Christian university students were assaulted, arrested, and jailed for sharing the Gospel in a Muslim town in Ethiopia, VOM reports. The students were arrested for causing a disruption, but later released at the insistence of local church leaders. However, authorities demanded that all evangelistic activities outside of churches be stopped. *Pray that Christians in the town and in the country will continue to evangelize as led by the Holy Spirit, and for a strong church in the nation.*

Five women arrested

Five Christian women wearing skirts and trousers were convicted of indecent dress after being arrested outside a Baptist church in Khartoum, Sudan, VOM says. Seven others arrested at the same time were found innocent. *Pray that Christian women in Sudan will be treated fairly.*

Laotian authorities arrest two

Two Laotian men were arrested for “spreading Christian religion” when they visited a friend’s home for fellowship and prayer, VOM says. Police raided the home and arrested the men, Bountheung Phetsompyhone, 43, and Neuy, 40. *Pray that the men will continue to practice and share their faith.* ♦

For more information on the persecuted church, contact The Voice of the Martyrs (www.persecution.com, 877-337-0302), International Christian Concern (www.persecution.org, 800-422-5441) or World Watch Monitor (worldwatchmonitor.org).

good. Do you not know that a little leaven leavens the whole lump?” (1 Corinthians 5:6). In other words, do you really think that you can carry on as if nothing has happened without it affecting the rest of you? Whether it is doctrinal heresy or gross, unrepentant sin, unless it is dealt with, it will work its way through the rest of the congregation like leaven.

Finally, we come to the last goal identified by Carl Trueman—reclaiming the offender. Matthew 18:15-20 is a passage we usually turn to for instruction on church discipline, and it is important to read it in context. Matthew 18 begins with the disciples asking Jesus who the greatest in the Kingdom of Heaven is. Jesus makes short work of the question, telling them that unless they become like a little child, they will not even enter the Kingdom of Heaven.

From there, He gives a graphic illustration of the awfulness of sin, exhorting His listeners to “cut off their hands and feet” if they cause them to stumble, and then follows this with the parable of the lost sheep. The “church discipline” passage comes next, followed by the parable of the unmerciful servant.

Put all of that together and it is clear what Jesus is teaching: Humility is essential in the Kingdom of God. God cares for even the smallest of the flock. Sin is deadly serious and must be cut out. God cares so much for His people that if any err and wander away, it is His will to pursue them. And, having been shown mercy by our Father, we must extend mercy to others.

The object of church discipline is not to “prosecute” the sinner, but

Matthew 18 does lay out a process of increasing severity by which these sins must be approached. In going privately to your brother, and next taking witnesses, and finally telling it to the church, your goal must never be to condemn—rather to be used to restore lost sheep to the flock. The whole process from beginning to end must therefore be conducted in the kind of love and mercy that is prepared to forgive 70 x 7 times. Nevertheless, if after lovingly pursuing the “lost sheep,” they steadfastly refuse to cut the sin out of their lives, then the church must be prepared to impose the ultimate sanction. Paul writes, “When you are assembled in the Name of the Lord Jesus and my spirit is present, with the power of our Lord Jesus, you are to deliver this man to Satan for the destruction of the flesh, so that his spirit may be saved in the day of the Lord” (1 Corinthians 5:4b-5). Even with this drastic measure the hope is still that the one disciplined might be restored.

This should make those in any position of oversight in the church tremble, as church discipline neglected, or church discipline done badly, can cause all sorts of damage. It has helped me to think through these issues in the following way: In any situation where I might become involved in a church discipline process, the first and foremost person under the authority of the Lord and His church is me. If I am to have any part in a process that leads to someone’s restoration, or which might see them barred from sharing in the Lord’s Supper, I must first realize that I am under God’s scrutiny and am being tested as to whether I will deal with it in both love and holiness.

So while Matthew 18:15 begins, “If your brother sins against you, go and tell him his fault, between you and him alone,” elsewhere Jesus tells us that we must first make sure that we get the log out of our own eye (Luke 6:42). If I find myself in a position of having to deal with someone else’s sin, I must be sure to examine my own heart first. This doesn’t necessarily mean examining my heart for the same sin as the one being dealt with (although it might mean that), rather to examine my heart to see whether I am approaching this with the right motives. Do I harbor a grudge against this person? Am I likely to be partial in my understanding of what has happened? Am I motivated by the three goals of church discipline? If not, then I need to repent of those things which could easily cause me to hinder godly church discipline. Nothing less than the vindication of Christ, the protection of the flock, and the restoration of the sinner are at stake. ♦

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1. www.mortificationofspin.org/mos/podcast/38124

“...walk in a manner worthy of the calling to which you have been called, with all humility and gentleness, with patience, bearing with one another in love, eager to maintain the unity of the Spirit in the bond of peace.”

Ephesians 4:1b-3

When we have differences with other believers, we can sometimes respond in selfishness and impatience. We can quickly enter into conflict, and even be almost eager for it, possibly telling ourselves that we must do this to stand for truth and to obey God.

We certainly need to be faithful to Jesus Christ and to His Word, but we should do this in a manner that is worthy of our calling from Him. We should follow His teaching and example of humility, gentleness, and patience, even loving our

enemies. And if we are to love our enemies, how much more should we love our fellow believers who are members with us in one body, with one hope, one Spirit, one Lord, one faith, one baptism, and one God and Father?

Are you and I walking in a manner worthy of the calling to which we have been called with fellow members of the Body? Are we eager to maintain the unity of the Spirit in the bond of peace?

For the Kingdom,



Ray King