

Lord, if you had been here.



A BBC Radio 4 commentator recently summed up the current situation facing the United Kingdom as ‘a picture with many moving parts’. He was obviously referring to an unfolding political scandal, Ukraine crisis, resurgence of the COVID virus in its latest avatar and an impending rise in our cost of living. On the dentistry front the emotional and physical toll post-COVID was beginning to alter morale and working patterns for some, and hope was on the horizon for others.

The headlined verse from the gospel of John were the words of Martha when she encounters Jesus after the death of her beloved brother Lazarus, with whose family the Lord Jesus had a very cordial relationship. Martha’s question to Jesus, ‘If you had been here’ could well be a representative plea in many of our minds during the current times. But Jesus had a glorious masterplan for their situation despite His loaded silence.

Our scriptures are brimming with real life examples where His perceived silence blossoms with a greater plan and purpose, in the lives of many Biblical heroes of faith.

Was God silent to Jacob when his other sons told him that Joseph was dead? Or when Moses spent his time in the desert after running from the Pharaoh? Or when Joseph was falsely accused and put in prison? On the contrary, Joseph’s life in the book of Genesis reveals *‘but while Joseph was there in the prison, the Lord was with him.’ (Gen 39:21)*. And later on Joseph confesses *‘And now, do not be distressed and do not be angry with yourselves for selling me here, because it was to save lives that God sent me ahead of you. (Gen 45:5).*

To be with God in His silence requires a deep confidence and trust in the God who is at work in our situations.

The Word reassures that His silence is

not a sign of disengagement, instead it could be a season where the Creator is weaving a grand design far beyond our understanding and something closely aligned to His purpose for us. God reminds us through the prophet Isaiah, *“For my thoughts are not your thoughts, neither are your ways my ways,” declares the Lord.” (Is 55:8)*

Periods of silence could be divine ‘nudges’ for us to be still and realise His authority: *“Be still, and know that I am God; I will be exalted among the nations, I will be exalted in the earth.” (Psalm 46:10)* or even get our attention to overhaul the way we organise our lives. Or maybe He could perhaps be working in us rather than in our situation! Noted American theologian and Christian apologist Timothy Keller quotes *“If you say: I believed in God, I trusted God, and He didn’t come through - You only trusted God to meet your agenda, not a God who could set your agenda.”*

With reverent submission we will wait with confident expectation, to see the unfolding of His fresh grace for our times, despite the many ‘moving parts’ in our current picture.

“Lord,” Martha said to Jesus, “if you had been here, my brother would not have died. But I know that even now God will give you whatever you ask.” (Jn 11:21-22)

Prince Thomas

CDF President



Suicide



I wonder how you felt when you read the above title? A gut-wrenching pain because suicide has impacted your family, a colleague or a friend? Or

palpitations as you realise that suicidal thoughts or ideations have been loitering in your mind, now or previously? Or maybe as a Christian believer you have a sense of panic about the church's view of suicide or your own theological perspective on this toughest of subjects? Or maybe you simply groan internally as you are confronted with yet another too-difficult subject to be consigned to the "for another day" pile?

By way of background let me explain that I have no formal professional expertise in suicide although I have in my career taught many dental students about aspects of psychological medicine and counselled many more through tough times, including times of suicidal thoughts and even planning. I have also lost two patients to suicide – one with intractable facial pain (after full assessment by a consultant psychiatrist) and one with Behcet's disease (in the days before targeted immunotherapies). I have also lost a cousin to suicide as did my mother in the previous generation. BUT, and it's a big but, I now have personal and lived experience of suicide, having lost our son, Cameron, to suicide on 20th October 2019. So, I now know well the intensity of pain experienced by those touched by suicide – a pain that persists for me on a daily basis, more than two years after Cameron's death. I hope you will agree with me that such experience allows me to make some comments. And as I make these comments, please know that my intention is that we, as a group of Christian believers, might take just a few steps forward together in our understanding of this strange world of suicide.

Articles on suicide always begin with statistics but I now view that as largely unhelpful. Knowing that there were 6211 deaths by suicide in the UK in 2020 (the full 2021 figures are still awaited) and that approximately 75% were male adds nothing to any understanding of the personal pain behind each, and every, suicide death. Perhaps it's more impactful to know that one person dies by suicide somewhere in the world every 40 seconds? There are 800,000 deaths annually by suicide across the globe.

Suicide is a hugely complex subject. Despite more than two years having passed, we still have little understanding as to why Cameron took his life in the early hours of that Sunday morning. Professor Rory O'Connor is Professor of Health Psychology at the University of Glasgow and is one of the foremost international researchers into suicide behaviour. I highly recommend his recently published book, "When it is Darkest" (Penguin, 2021), to you. In his book, Professor O'Connor describes a model of suicidal behaviour which involves possible factors in the background of someone who dies by suicide, alongside the factors which might contribute to suicidal thoughts and suicidal acts. It is a complex model which makes it very clear that no one factor causes someone to take their life – it is much more complicated than that.

In his book, Professor O'Connor talks about the myths that surround suicide and discounting these myths may help us all in our communities to move forward together in our grief and mourning.



MYTHS ABOUT SUICIDE (O'Connor, 2021)

- Those who talk about suicide are not at risk of suicide
- All suicidal people are depressed or mentally ill
- Suicide occurs without warning
- Asking about suicide "plants" the idea in someone's head
- Suicidal people clearly want to die
- When someone becomes suicidal, they will always remain suicidal
- Suicide is inherited
- Suicidal behaviour is motivated by attention seeking
- Suicide is caused by a single factor
- Suicide cannot be prevented
- Only people of a particular social class die by suicide
- Improvement in emotional state means lessened suicide risk
- Thinking about suicide is rare
- People who attempt suicide by low-lethality means are not serious about killing themselves

Please allow me to emphasise again that these statements are UNTRUE – they are **myths** about suicide that need to be opened up and challenged. The priorities for discussion for me are Myth four and Myth thirteen. It is estimated that across the world up to 16% of adults have experienced suicidal thoughts at some stage in their lives (Nock, MK et al, 2008) with this increasing to 20% of young Scottish adults (18-34 years old) (O'Connor, RC et al, 2018). So, thinking about suicide is not rare but importantly there is no evidence at all that talking openly about suicide to someone (and asking specifically about any intentions or plans) promotes that idea and indeed it is likely to have the opposite, protective effect. And so, we need to talk openly about suicide and suicide prevention.

We also need to understand that our use of language matters. The term "committed suicide" dates back to when suicide was illegal – and sadly it remains illegal in some countries in the world. Suicide was decriminalised in Great

Britain in 1961 but often the use of “committed suicide” persists. If you find yourself using that term, please be kind to yourself but do think about using an alternative, kinder phrase such as “died by suicide”. A small point, perhaps, but so helpful to those of us trying to find a path forward.

Then, the most difficult matter of whether or not to talk about the person or to ask questions about the person who has died by suicide. We think about Cameron every waking moment and we appreciate when YOU are thinking about him too. If you knew Cameron, or someone else who died by suicide, it’s important to say their name and to share memories. However, everyone grieves differently – even within the same family - and we need to appreciate where people are in their grief journey. The question I value the most is “Where are you in your thoughts of Cameron today?” as this allows me to steer the conversation - which may change depending on the date, such as the anniversary of his death, birthday or another significant event.

It appears from the literature that the majority of people who die by suicide have experienced a previous or current psychological diathesis but with increasing numbers of suicides being so-called “spontaneous” suicides (i.e. in those individuals where there is no obvious history of psychological disturbance), it seems that our approach to preventing suicide needs to change with open discussion in schools, colleges, universities and work-places about suicide and, most importantly, about suicide safety planning. This new concept of safety planning is entirely evidence-based and opens up discussion about what to do if you find yourself at some point with suicidal thoughts – something that affects 1 in 5 young Scottish adults. If Cameron had undergone training in suicide safety planning at school or university, would he still be alive today? Perhaps. This is just one of the many “whys” and “ifs” that torment those of us left behind after a suicide.

And what about Christian theology and understanding around suicide? Is suicide more common or less common in



communities of faith? That question lies unanswered in the literature. However, I have now met many in the suicide community, of faith and of no faith, who have asked me why the suicide rate amongst Christians isn’t higher, given that we of all people have seen the reality of Heaven versus the brokenness of our lives and our world. What a remarkable question!

What I can say is that Jesus’ promise in Matthew 5:4 is true – “Blessed are they who mourn, for they will be comforted.” That is my freely offered experience and testimony in the months since Cameron died, and at times when all I wanted to do was be with Cameron, enveloped in my own suicidal thoughts.

But these months of deep grief have also forced me to delve into the Scriptures to find some understanding theologically, and from a Christian world-view, about suicide. What about Paul’s reflections in Philippians 1: 21-24? “For to me, to live is Christ and to die is gain. If I am to go on living in the body, this will mean fruitful labour for me. Yet what shall I choose? I do not know! I am torn between the two: I desire to depart and be with Christ, which is better by far; but it is more necessary for you that I remain in the body.” Paul is sure that he has seen the reality of Heaven and wants to be there but understands that the fledgling church needs him to stay. He states that the choice of staying or going could be his and so is *this* a moment of suicidal crisis? Or is “longing for Heaven” different from a suicidal crisis?

Historically, most Christians have a sense that suicide is wrong, probably even sinful, with this being based, perhaps, on

the story of Judas Iscariot – cast as the villain of the gospels who subsequently hanged himself, according to Matthew 27:5. But, Judas is not the only suicide in the Bible – there appear to be six other documented suicides, all of them in the Old Testament:

Abimelech in Judges 9: 54

Samson in Judges 16: 30

Saul in 1 Samuel 31: 4

Saul’s armour-bearer in 1 Samuel 31: 5

Ahithophel in 2 Samuel 17: 23

Zimri in 1 Kings 16: 18.

I shall leave you to make up your own mind about whether each of these individuals are of similar “flawed character” to Judas. What is certainly clear is that Samson died a Biblical hero as he took his own life but also killed many Philistines at the same time. Our evangelistic efforts are rightly keen to tell others that Jesus gave up His life as a ransom for many (Matthew 20: 28) but some may struggle to see the difference between suicide and voluntarily giving up one’s life.

It is the Catholic Church that has discussed the matter of suicide more than any other Christian denomination. Suicide has historically been considered by the Catholic Church as one of the elements that constitutes mortal sin. As the Catechism of the Catholic Church states, “It is God who remains the sovereign master of life. ... we are stewards, not owners, of the life God has entrusted to us. It is not ours to dispose of” (No. 2280). However, the Church has moved towards a more informed understanding of suicide with the same catechism, endorsed by Pope John Paul II in 1992, stating: “Grave psychological disturbances, anguish or grave fear of hardship, suffering or torture can diminish the responsibility of the one committing suicide. We should not despair of the eternal salvation of persons who have taken their own lives” (Nos. 2282-83).

If suicide is indeed a sin (and I would be careful to reserve judgement on that, dependent on circumstances) then it seems to be out of keeping with my biblical understanding of God and the



forgiveness purchased by Christ on Calvary that someone in their toughest, lowest moment (perhaps after a prolonged period of depression, chronic pain or receipt of referral to the GDC) would not receive forgiveness for that sin from the King of Kings.

For me, although the impact of Cameron's death remains with me every day, I can say that life has started to grow around me again – something I would never have believed possible looking back to the carnage of October 2019. Cameron's death has caused the Gibson family to

explore what more can be done in suicide prevention and so we have started a new charity, **The Canmore Trust (SC 051511)**. An important aim of the charity is to develop suicide safety planning in schools, colleges and universities. Starting on 13th June 2022, I will be walking the 1200 miles from Land's End to John O'Groats to raise awareness of suicide prevention. Please follow on Instagram:

#onemanwalkingamilliontalking and plan to join in as we pass through the UK.

Please also be in touch if this article has raised any issues for you. These are tough days for the dental profession in the UK. I receive two or three contacts each week from individuals seeking help for themselves, family members of colleagues struggling with the sudden challenge of suicide – suicidal thoughts or active planning. This is a shocking moment for anyone and, despite government and charity sign-posting to

many resources, people often have no idea where to turn to for help. We'd like to help because one more death by suicide is one death too many, and one more family shattered by the carnage of a suicide death is one too many. The Canmore Trust has created a resource pack with helpful contacts for those affected by or challenged by suicide – please e-mail me if you would like a copy via cdfadmin@cdf-uk.org. Meantime, The Samaritans will always offer a listening and helpful ear: call 116 123 or email . Please stay safe and stay well.

John Gibson

(John was Director of the Institute of Dentistry and Professor of Oral Medicine in the University of Aberdeen and also Honorary Consultant in Oral Medicine in NHS Grampian prior to his son, Cameron's, death by suicide in October 2019. Since then, he has volunteered in the suicide community with Survivors of Bereavement by Suicide (England and Wales Charity No. 1098815 and Scottish Charity No. SC041397) and The Canmore Trust (SC 051511). He is passionate about suicide prevention and also suicide postvention care.)

The Opportunity of a Lifetime - I Really Want You!

Do you have faith? Do you have experience in some form of dentistry? Do you like Simon Stretton-Downes' gong? At least one 'Yes'? – then I'd like to proposition you!

Actually, dear reader, I'm not that fussy. I want you anyway. Every last one of you.

This isn't a general mingling on the Lords' call to service expressed through dentistry – we'll be celebrating that especially at our first-in-three-years in-person conference which you can read about elsewhere in this most wonderful publication (though a quick prayer that it will indeed happen this year, and that it will be brim-full with joyful CDF members and their families is always welcomed, especially by the Conference Secretary, Victoria Rushton, to whom I happen to be married).

No, this is to introduce you to the Liberia Dental Therapy School, the brainchild of Simon, Eddie and Grace (it's a twenty-first century thing, having a threesome as parents) and my burgeoning desire for you to get involved. I'd like your time, your money, your contacts and your

prayers, and, if you're in practice, your patients. Not so much then. Obviously, I don't expect everything from everybody; I don't enjoy disappointment. But I really can show every single reader of the most excellent Three-in-One some ways in which they can make a lasting difference to literally millions of people.

What's the big idea?

Establish a school in Liberia to train dental therapists to spearhead the delivery of basic dental care to more than five million people currently served by just seven dentists (or six if Simon's out of the country when you are reading this).

Yes, that's the equivalent of 92 dentists for the whole of the UK. It's a great opportunity for mission and dentistry.

Educating students drawn from townships all over the country who are sponsored, prayerfully and/or financially, by their home communities to whom they will return to deliver care after training. Based within an established Christian medical mission, teaching a two-year UK-accredited Diploma course, located alongside Simon's established dental



Site of the proposed school building.

clinic, run in conjunction with a Liberian university, taking the first few students in Autumn 2022.

The project encompasses:

- developing teaching materials
- recruiting students
- building (ready for the second academic year) an additional block to provide classrooms and more surgeries
- building (ready for the third academic year) a student dormitory
- supporting the students during, and most importantly after, training
- arranging continuing practical support and professional development and
- equipping students with a fulsome Dentaaid field kit suitable for establishing a practice back in their sponsoring township.

And finishing visionary Eddie's further education in Nairobi, Kenya, which is upgrading him from dental nurse practitioner and right-hand man, to Dentist and project co-leader, and sending Simon's next protégé, Wannie, to the Philippines to undertake a full six-year course to train as a dentist.

We're planning for a five-year period; we expect to be training ten students a year within three years.

Are we crazy?

On the dancefloor, quite possibly, but not on this project. Simon's experience of developing and delivering the now long-established Liberian Trinity Dental Clinic, combined with clear understanding of the challenges that disrupted a previous Liberian training initiative, has led to the project now being endorsed internationally by SIM, with a curriculum being developed [gratis] by the Peninsula Dental School in Plymouth, and vocal support from Professor Raman Bedi (the UK Chief Dental Officer from 2002 to 2005, but unlike me, you knew that, gentle reader, didn't you). Simon being awarded OBE, in the July 2021 Queen's birthday honours, for 'Services to dentistry in Africa, particularly Liberia', underlines his credibility. Also, I have a lot of spreadsheets. But this is Africa, so they shouldn't be regarded as capable of predicting outcomes. I have much more faith in Simon, Grace and Eddie's longstanding relationship with the Eternal Love Winning Africa (ELWA) Hospital and the people of Liberia to guide us in doing the Lord's work. But OK, the spreadsheets are also a comfort.

Tell me more?

We'd love to. And you can get a break from my writing style. Just head to



Clinic administrator, Angie (L) with Simon & Her Excellency Dr Jewel Howard-Taylor, Vice President of Liberia.

www.ldts.org for lots of content. Get more info and ask away by emailing enquiriesldts@gmail.com. Fill your boots!

So how can you help?

• **Pray**

Sign up to receive Simon & Grace's Newsletter and additional prayer updates at <https://sim.co.uk/support/mission-workers/prayerpartners/>. Get the CDF prayer calendar and/or join the CDF monthly prayer zoom – both as detailed elsewhere in this terrifically essential edition of Three-in-One.

• **Spread the word**

Tell others. As well as this magnificent magazine and our wonderful website, we have a beautiful brochure to help you with that – the electronic version is on our website at www.ldts.org, or you can request shiny printed copies from enquiriesldts@gmail.com. Have a forum to address? We have a PowerPoint, and/or can do q & a's over video link. We're ready to help you help us.

• **Serve as a coordinator**

Course content and content delivery, equipment procurement (US&UK), fundraising, administration, PR are all areas where we'd love people to come forward and gather together the work.

• **Create course content**

We have a modular curriculum, tuned

to the African context. Non-clinical areas (including English language, computing and business skills) are covered by the local university (Cuttington). We need volunteers to write the content for the classroom-based clinical modules, delivered mostly in the first year. Please look at the module list and consider where your experience may be most useful.

- **Give Money** (you knew it was coming) We need £750k over the next five years, much of it early on. Here's a summary:

Trinity Dental Clinic & School (£000's)	2022	2023	2024	2025	2026	TOTAL
Student Fee Income	1.4	4.8	8.2	10.9	13.0	38.2
Fees to local university	2.7	7.5	9.6	10.9	13.0	43.6
Equipment for clinic & school	15.2	49.2	0.5	2.5	0.8	68.1
Equipment for graduates	0.0	17.0	0.0	12.7	17.0	46.7
Rental, staff & operating costs	12.1	23.9	20.3	20.2	20.5	97.0
Building works - school & dormitory	68.2	181.8	45.5	0.0	0.0	295.5
General contingency	11.7	29.5	9.2	4.5	5.0	59.8
SIM services charge	20.1	44.2	14.0	4.7	4.9	87.8
Dentist training: two leaders abroad	21.3	22.8	25.8	9.2	12.0	91.0
Total costs	151.2	375.8	124.7	64.6	73.0	789.4
Net expenditure	149.9	371.1	116.6	53.7	60.1	751.2
Number of 1st year students*	8	6	8	10	10	42
Number of 2nd year students*	0	0	8	6	8	32

*first cohort includes four current team members

By the beginning of April 2022 we had raised a third of that. So we need £500k more.

Will your practice sponsor Trinity? Display posters in your surgery? Invite donations on your bills? Will your church / school / community club get involved? Do you fancy running / walking / riding / sailing / kayaking / slimming / white-water-rafting (???) for Trinity?

All personal (and practice if it's a partnership) donations made through SIM UK are magnified by gift aid. Our website at www.ldts.org has the details.

• **Donate Instruments**

Not straightforward as the best route for shipping to Liberia is via USA. But in the UK donate instruments to Dentaid.

• **Visit**

Teach, train, equip, maintain, support, inspire. It is hot (in several senses). Contact Simon if you hear the call.

• **Get in touch**

Email us via enquiriesldts@gmail.com.

And as Paul encourages the Colossians (3:23) – *'Whatever you do, work at it with all your heart, as though you were working for the Lord and not for people.'* (GNT)

Amen to that.

Jonathan Graham



An illustration of the single-storey Trinity Dental Clinic completed in 2019 and the planned therapy school behind.

CDF Council Secretary Vacancy

After a five-year service, I will be standing down as CDF secretary at the autumn AGM. It's been a whirlwind five years with some unprecedented moments in the history of the Fellowship and much of what we do has now joined the digital era! As my two lovely sons enter exam years, I need to be on hand more as a mum again.

While I will be in post for a few more months, I want to advertise the secretary post to the membership in this edition and explain what is involved. There are two main duties: being a trustee of CDF and being secretary of the Trustee Committee and the wider CDF Council.

Being a trustee means having legal responsibility to oversee the workings of the Fellowship, making sure it remains solvent and complies with charity law etc. Much of the day-to-day trustee work is done by the treasurer and president with

a large amount of help from our administrator, Karen Silcox. It's a really strong team and this part of the role does not feel onerous at all.

The secretary's duties are to prepare meeting agendas, attend the meetings and write minutes. It involves working closely with the president and administrator. There are normally two trustees meetings per year with an additional two meetings of the wider CDF Council per year and one AGM.

Since the pandemic, we have been holding our meetings virtually on Zoom. This has been good for a variety of reasons. It saves CDF travel expenses and is more time efficient. Although it's not the same as being able to meet up in person, it has worked really well with our Council members living all over the country.

I would ask that if you haven't considered being on CDF Council, is this a role you could fulfil? Before I was on Council, I enjoyed a long period of being a CDF member and "feeding" on all the benefits without giving much back. It has been a real blessing to get to know some of the members better and to work with them for the good of the Fellowship. I would also be happy to help my successor in their first year and ensure a smooth handover.

If this is something you are interested in, or would like to know more about, please email me on secretary@cdf.org.



Kirsty Gayton
CDF Secretary

Mission Partner Update

I am without many Mission Partner reports to bring to you, for this my 12th annual report for Three-in-One. That is to say the pandemic has put paid to the Giles' visits to West Africa, not that they have been inactive. Tony has been able to give clinical advice over WhatsApp to far away places. He and Ann however have been needed by their family for support during trying times, which has meant travelling around the country. They are also planning to walk the whole of Offa's Dyke over two weeks in June fundraising for the Stroke Society, due to a son-in-law suffering a debilitating stroke at the age of 37. While waiting to return to West Africa within the year with plans very much up in the air, they hope to restart volunteering as vaccinators.

On a positive note; due to the pandemic, which led to the monthly prayer times on the first Saturday of the month, those on the Zoom call have had the privilege of hearing from our mission partners direct, including those who don't usually get

print space in 3in1 due to the sensitive nature of their work. However, our first live conference for two years should give folk a chance to meet with them in person.

Our other two partners have been active in the field. Simon and Grace Stretton-Downes will be returning to the UK this April to July for a well-earned break from the heat and humidity of Liberia. On the 3rd May we celebrated with them on their visit to Windsor to receive a well-deserved accolade from Her Majesty. Meantime there is a new website www.ldts.org nearing completion and a therapist school nearing completion - see article by Jonathan Graham. Simon and Grace do produce a newsletter of their own and can be contacted through cdfadmin@cdf-uk.org.

Some news from Zambia. Chonde has renewed his therapist licence until December and is looking for some financial assistance in restarting work at

the dental unit. Andy and Eira Patching are back in Sachebondu. The medical orderly trained for simple urgent care dentistry is doing well.

The mission partner secretary job has been a delight to do these last 12 years which is way over my allotted time, so if there is anyone out there who would like to take on this role please get in touch via cdfadmin@cdf-uk.org or speak to me at the conference. The two council meetings a year for which reports are required are these days carried out on Zoom so location, so long as you have internet, is not a priority. Conference however is an enjoyable must for organising and introducing the mission

partners who have come along to speak.



Jonathan Longhurst
CDF Mission Partner Secretary

Smith's Update - West Africa 2021-22

If one views the situation in West Africa without the lens of faith, one can quickly descend into the Slough of Despond. Terror attacks continue across the country and Christians are being targeted more and more. Christians in one region were told "We know who you are. If you don't return to Islam or leave the region, we will kill you and your families." They met to pray and decided to stay, even if it means dying for Christ. The jihadists have also blockaded a town where our friend is living and ministering, preventing food reaching the local population.

When Keith visited in January there was a military coup. He had gone to meet with all our teams to provide safeguarding and finance management training. It was bizarre to have our telephone conversations punctuated with gunfire. The military takeover has been a popular move, as the previous government had not effectively dealt with the terror situation. Time will tell if the new government has better success.

The refugee crisis has worsened as whole communities flee terror threats. With fields left abandoned, people are hungry, and the church is busy doing what it can to feed and care for the displaced. There is unity across denominations that we have never seen before and a boldness in God's people. 'A' is one of the first



Christians of his people group who came to faith through the Fulani church. His son recently tried to strangle him when he refused to return to Islam. He had to flee his village for a few days but yesterday courageously returned as he knows that he is the only witness to Christ in the region. "The light shines in the darkness, and the darkness has not overcome it." John 1:5

The dental teams continue to volunteer one day per week to serve local populations, as well as working with refugees and in prisons. Refugees are often traumatised, and it is hard for them to receive dental treatment, requiring a lot of time and patience. Our teams are themselves nervous, knowing that anyone can be a jihadist in disguise. But despite fear and uncertainty, people continue to respond to the good news about Jesus and receive health and healing through the work.

I (Lynne) am in contact with the teams every week, giving encouragement and clinical advice. However, I have been concerned that the teams require more pastoral input. With this in mind, I contacted a Christian medical mission that works in the region, who could possibly provide pastoral oversight and access to regional conferences. We met with them in Burkina in November and continue to explore the possibility of a partnership. The northern team is exceptional in their commitment to the work and to mission. The team further south is struggling with lack of leadership. A local Pastor had been fulfilling this role but has now been promoted in his denomination and

doesn't have the time. Please pray for a local leader to step up with a clear vision and networking skills. This team has been joined by a passionate evangelist, who accompanies the team and preaches the gospel each time they hold a clinic.

Patients receive dental care. The gospel is preached.

Despite the danger of travel, the teams have helped a pastor who is planting a church in an unreached community by offering dental treatment and preaching the gospel. They also treated hundreds of patients free of charge at a national pastors' conference and appeared on national television.



Please pray for our friends in West Africa to know the presence of God in difficult times. Pray for us as we hope to visit them in the coming months. In the year ahead we hope to renew some of our ailing dental chairs and equipment. Thank you for your wonderful support and prayers.



2021-22	
Number of people seen	995
Number of people treated	933
Number of teeth extracted	1020

Dental Ministry Accounting 2021-2022	
GBP	
Balance 1 April 2021	7,842
Funds received 2021-2022	4,953
Expenditure 2021-2022	4,552
Balance 1 April 2022	8,243

Lynne Smith

CDF Conferences 2022 and 2023 - Face 2 Face at last!

Whilst seeing familiar faces on Zoom for the monthly prayer meetings has been a great way to keep in touch, nothing beats sharing a weekend together in worship, Bible study, fellowship and good food, in restful surroundings with a bit of dentistry thrown in for good measure! A lot has changed for many of us both personally and as a profession so this is a great opportunity to gather for refreshment and encouragement in both our professional and faith journeys. If you've not joined us for the annual family conference before, may I encourage you to take the plunge and do so this year?

Our annual family conference is for any Christians working in dentistry, their partners and families. From around the UK, we gather 5pm onwards on the Friday, have a packed programme including several talks by a guest speaker, a clinical lecture, mission partner updates, chance to find out what the committee have been up to and to discuss the way ahead, worship and prayer times all interspersed with lots of coffee breaks and free time to catch up with long lost friends and to make new ones. Non clinical partners and children are well catered for with separate sessions to enable the whole family to relax. We part company after lunch on the Sunday re-energised to serve God in our profession and community, reassured that whatever we are facing we are not alone.



This year we shall return, after a break of many years, to High Leigh in Hertfordshire. Ruth Perrin has kindly agreed to be our speaker – I'll let her introduce herself and the theme of the conference in her own words...

To say that times are 'unprecedented' is now a cliché. Perhaps 'relentless' would be better? Many of us find that the daily news is overwhelming, inducing anxiety and that our personal circumstances continue to be challenging. Whether our faith in Jesus is currently a sure foundation we stand firmly on, a high tower we are hiding in, or a thread we are hanging on by, this weekend is a great opportunity to re-centre our souls, refresh our perspective and allow God to restore our hope and all that brings.



Dr Ruth Perrin will be speaking on the theme of "Liminality – meeting God in the desert" and exploring how we might embrace uncertainty - be it global, cultural or personal - and grow as disciples of Jesus as we do so.

Ruth is a preacher, trainer, researcher and writer based in Durham. She has 25 years of mission and ministry experience, has published two books on young adult faith, and regularly teaches in local church, national conference and

international events. Currently on sabbatical, she is exploring how to rest (not her natural gift as it turns out) so you can expect a good amount of reflection on that in the mix too. For more info check out www.ruthperrin.net.

BOOK NOW for the CDF Conference Friday 4th – Sunday 6th November 2022

Due to changes in the conference business in general, the Christian Conference Trust (CCT) who owns both High Leigh and Hayes centres now request specific booking for number of adults and children a long way in advance. So the more accurate we can be the better! The CCT are by far in the best position to provide the most appropriate facilities and ambience for our conferences, now several other centres are no longer hosting conferences. We will be sharing the venues with other Christian groups which will give us the perfect opportunity to promote CDF outside of the current membership too!

So please book early using the booking form on line or by contacting me direct. The CDF conference bursary fund is used to subsidise places for families, clergy, mission partners and students. In addition the CCT have their own bursary funds which I can access on request- so if funds are the issue - please don't hesitate to contact me in confidence and I'll do my best to help.

Special offer- Hot off the press - Save the date

2023 conference at Hayes Centre,
Derbyshire October 13-15th

Contact me for details how to secure your place for 2023 at this year's prices!

Please don't leave it too late- the more notice I have the better, as numbers are fixed and can only be changed if the centre has availability- this includes the capacity to add day visitors- Don't delay- book today!

Victoria Graham
confsec@cdf-org.uk



Deadline for the next issue of Three-in-One is 1st July 2022. Please send contributions to Tracey Dalby: editor@cdf-uk.org

Email: cdfadmin@cdf-uk.org Website: www.cdf-uk.org

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