

Jesus' Holistic Paradigm: The Key to Reaching the Final Ethne

By DR. "JASON LEE"

Dr. "Jason Lee" is a medical doctor working long-term with his family and team to catalyze disciple-making movements and transformational health movements among a cluster of Frontier People Groups in the Sahel of Africa.

Jesus' Paradigm

"Friend, your sins are forgiven... get up, and pick up your stretcher, and go home." 1

Jesus consistently intertwined life-changing teaching, piercing stories and convicting questions alongside definitive healing, powerful deliverance and a love that cut through the dark physical realities of our world.

He would, in one breath, definitively address both the spiritual and physical condition of the person or family in front of Him.

"Friend, your sins are forgiven... get up, and pick up your stretcher, and go home."

He taught us to pray, not only that our sins and debts would be forgiven, but that we would be given our daily bread and that His will would be done on earth as it is in Heaven.²

He deftly moved a conversation with a Samaritan adulteress from His own physical need for water to true worship and the Messiah. He immediately sent that now-changed Samaritan adulteress to be the messenger to her entire city.³



He went from powerfully confronting the Legion of demons in a Gerasene man to end his suffering, to commissioning that now-changed man, hair still long and wild, voice still hoarse from screaming, wearing someone else's clothing to be the messenger to the entire Decapolis.⁴

Jesus defined the paradigm of addressing the spiritual alongside the physical in homes and among families:

He seamlessly moved Peter and Andrew, and James, John, and Zebedee from discussing their family businesses of fishing to making them fishers of men.⁵

He spiritually fed a massive crowd of families in a secluded place, speaking about the kingdom of God, but then also He fed them physically, multiplying resources they already had.⁶

And while this holistic paradigm of Jesus is reflective of His great love for us, it is also reflective of His purpose to stop the stranglehold that the enemy has on every facet of human life: spiritual, mental, emotional, social and physical. "The Son of God appeared for this purpose, to destroy the works of the devil."

This holistic paradigm of Jesus is the outworking of the "warfare worldview" in Scripture.⁸ That we are, in partnership with Him, locked in the latest iteration of

¹ Luke 5:17-26

² Matthew 6:9-13

³ John 4:1-42

⁴ Mark 5:1-20

⁵ Matthew 4:18-22

⁶ Luke 9:12-17

^{7 1} John 3:8

⁸ GA Boyd. (1997) God at War.



an ancient war with the demonic enemies of God, and our purpose too is "destroying the works of the devil."

The Early Disciples Emulated Jesus' Paradigm

The first apostles and disciples emulated this paradigm while they walked with Jesus. But even after the ascension, Peter and John ministered holistically to the man at the Beautiful Gate;⁹ Paul and his team ministered holistically to Publius' whole household on Malta, including his sick father.¹⁰

In the second and third centuries, disciples continued to follow this paradigm. During the epidemics that swept the Roman Empire, it was the disciples of Jesus who sacrificially cared for the sick, offering truth and love along with tangible care, not only to their brothers and sisters in Christ, but also to their pagan neighbors. This care, and the church growth that resulted, was so significant that the emperor instituted pagan charities attempting to match the Christians' level of aid to stem the rate of conversions to Christ.¹¹

These were not bishops or missionaries or special church-designated physicians doing this holistic outreach. Rather, these were ordinary disciples of Jesus who so sought to emulate Jesus in their lives, that they were willing to risk death to share love, healing and truth with their pagan neighbors.

Missions Compartmentalization

However, in the following 1700 years, clergy and Christian physicians and educators became increasingly specialized and compartmentalized from one another. Some specialization may be expected with increasing sophistication of health care and educational institutions. However, as a result, Jesus' mandate to make disciples became compartmentalized and fractured from His mandate to love your neighbor. "Forgive us our debts" became fractured from "May Your will be done on earth."

Today: The Preachers

Many streams of missions have returned to emulating some of the ways of Jesus: abundant prayer, teaching by telling stories and asking questions, discipling by creating experiential learning opportunities rather than just sharing knowledge, ¹² ministering in the *oikos*, ¹³ and empowering disciples to pursue the miraculous with His Spirit. ¹⁴

These were not bishops or missionaries or special church-designated physicians doing this holistic outreach. Rather, these were ordinary disciples of Jesus who so sought to emulate Jesus in their lives, that they were willing to risk death to share love, healing and truth with their pagan neighbors.

Most importantly, the focus of missions in these streams has again been placed squarely where Jesus clearly articulated it to belong: "make disciples." 15

In many cases, though, half of Jesus' paradigm is missing. These streams have rarely emulated the way that Jesus consistently intertwined the physical with the spiritual. There are exceptions, but rarely in these streams does physical outreach gain footing comparable to that of Jesus' ministry. These streams have made disciples and catalyzed movements, but how much more might be possible if they emulated more of Jesus' paradigm?

After the example of Dr. Charles Fielding in his essential book, *Preach and Heal*¹⁶ (referencing Luke 9:6), I will call these streams "*preachers*."

⁹ Acts 3:1-10

¹⁰ Acts 28:1-10

¹¹ R Stark. (1996) The Rise of Christianity.

¹² R Moran. (2015) *Spent Matches*, p.88ff. Also at roymoran. com/top-ten-mind-shifts-for-a-disciple-making-movement-to-emerge/

¹³ For an excellent study of the Biblical concept of *oikos*, see T and B Lewis. "As For Me and My House: The Family in the Purposes of God." *Mission Frontiers* Mar-Apr 2012.

¹⁴ John 14:12

¹⁵ Matthew 28:19

¹⁶ C Fielding. (2008) Preach and Heal.



These include not only preachers *per se*, but movement catalysts, church-planters, seminary and Bible-school teachers, and the like.

Today: The Healers

To be sure, an entire other stream of missions has been striving to minister both spiritually and physically since the early 1800s:¹⁷ traditional western healthcare missions. The same is true of several other streams: agricultural workers, development professionals, teachers, and others. After Dr. Fielding's example, I will call these streams "healers." As I am a product of western healthcare missions, I will speak in most detail of this particular stream of the "healers."

"Healers" are no less devoted to Christ than "preachers." In fact, many healthcare professionals complete seven to 13 years of intense graduate and post-graduate training before they go to the field, forsaking six-digit incomes in the west.

"Healers" are no less devoted to Christ than "preachers." In fact, many healthcare professionals complete seven to 13 years of intense graduate and postgraduate training before they go to the field, forsaking six-digit incomes in the west.

However, as the level of care provided by healthcare missions has become more complex over the last two centuries, the focus of Matthew 28:19 has been diluted. Certain healthcare benchmarks are used to mark success, recruit supporters, and demonstrate God's blessing. Some examples are hospital infrastructure expansions, hospital admissions, surgeries performed, babies delivered, numbers of students or residents trained and development goals achieved.

Again, there are exceptions: the patient who started to read Scripture and follow Jesus while hospitalized... the chaplain who has faithfully served the hospital, sharing the gospel for years... but these are generally overshadowed by the shear mass of healthcare benchmarks.



In contrast to the "preachers," it is rare to hear from the "healers" about Bible study groups, churches planted, or movements to Christ. Most glaringly, it is even rare to hear from "healers" about "making disciples," the very heart of the Great Commission.¹⁸

Why Jesus' Holistic Paradigm is Particularly Important among the Final Ethne

RW Lewis, in her essential, iconoclastic 2018 article, refocused our pursuit of the remaining *ethne*. She advanced beyond defining the final *ethne* as *Unreached People Groups*, people groups with less than 2% evangelicals. She urged us to focus instead on *Frontier People Groups (FPGs)*, defined as "only those unreached people groups that have never had an indigenous movement to Christ." ¹⁹

¹⁷ It could be argued that the monastic mission station tradition institutionally pursued both spiritual and physical outreach in varying degrees beginning far earlier than the 1800s

¹⁸ Some healthcare workers do mentor and train younger healthcare professionals who are already Christians. This is a good endeavor, but this is different in my mind than "making disciples from all the ethne" as in Matthew 28:19.

¹⁹ RW Lewis. "Losing Sight of the Frontier Mission Task." *International Journal of Frontier Mission* 35(1) Spring 2018.



Compared with other people groups, *FPGs* are more likely to originally be from countries with a lower *Human Development Index (HDI)*. Most *FPGs* live in countries whose *HDI* is below the world average. In other words, broadly speaking, *FPGs*, the final people groups that most need the gospel and movements of disciples to Christ, often have greater physical needs than people groups that are not *FPGs*. They need better and more sustainable health care and lay health education. They need more effective and more accessible basic and secondary education. They need more equitable and more efficient business practices to provide the capital for development.

We Must Become More Like Jesus

As we continue to focus on the final *ethne* that still need movements of disciples, we must continue to critically assess how closely we are emulating Jesus' holistic paradigm. We must then be willing to make whatever changes are needed in order to better emulate Jesus, no matter how drastic.²² We must do this on every level: personally, in our organizations and institutions and as the Church.

Like Jesus, we must fluidly integrate addressing both the spiritual and physical condition of every *FPG*.

Like Jesus, we must adopt the biblical "warfare worldview," realizing that sickness, poverty, and malnutrition are just as much works of the devil as are sin, corruption and injustice.

Like Jesus, we must do all of this in ways that are fully sustainable and reproducible, so that new, local disciples are empowered to continue to make the next generations of disciples emulating the Jesus paradigm.

We Must Help Local Disciples to Discover How to Become More Like Jesus

In most *FPGs*, by definition, there are few to no local disciples. Some *FPGs* may be blessed with proximate disciples from other people groups who may already speak the language and know the culture. Other *FPGs* may have proximate disciples that are from people groups that are so disdained by those in the *FPG* that an expatriate disciple may have more rapport with them than the proximate disciple.



In our field context, we are working among a cluster of 19 FPGs, 15 of which are otherwise unengaged. Five years ago, my wife and another expat teammate led a local Muslim-background woman to follow Jesus. I'll call her "Bisharra." They had led her and some other women in her immediate oikos through our set of ten health lessons and "Prophet Stories" (Bible stories from Adam and Eve to Jesus). She is from an FPG outside of our cluster that is thought to have a few disciples in other areas of our host country, but none in our area and no movement yet. With discipleship and coaching from my wife and our teammate, Bisharra then led two other women from her extended family (her oikos) to also follow Jesus through reproducing the same health lessons and Prophet Stories. All three women are illiterate and either widows or estranged from their husbands. Our health lessons and Prophet Stories are designed

²⁰ hdr.undp.org/data-center/human-development-index#/indicies/HDI

²¹ personal research

²² As an example, I trained in and practiced general surgery for eight years. On our way to the field, it became clear that spending hours every day hunched over anesthetized patients wasn't the best way to enter the *oikos* of the *FPGs* we work among in order to understand their lives, hear their stories, and share God's story. I now do very little surgery. Instead, we focus on locally reproducible, grassroots health education and Bible storying in homes as well as some relational primary health care and prayer for healing, trying to follow Jesus' principles of disciple-making and movements.

to be done with, and reproducible by, anyone in our context, even those who are illiterate or who have no education.

Bisharra and her two *oikos* "sisters" continued to share concepts from the health lessons and the Bible stories in their daily lives, both orally and from SD cards on their phones; at the market, at the well, at their homes with visitors and at their neighbors' homes. Soon word spread to an outlying village where they have additional, extended family. The women in this village wanted them to come do the health lessons and Bible stories with all of them as well! This is a mixed village with people both from their people group, some of our target *FPGs*, as well as additional *FPGs*.

Bisharra and her two disciples talked with my wife and our teammate about this opportunity.

"We need you to come with us," they pleaded.

At this point these three ladies had been disciples for at least a year, Bisharra for five.

"No, you are ready to do this on your own! You know all the lessons and all the stories! Besides, it will make a scene if we, as outsiders, come to this rural village. They might miss the importance of the message. You will be much more effective than us!" my wife and teammate replied.

Emulating Jesus in seamlessly addressing the spiritual alongside the physical in homes and families of the Frontier People Groups is the key to reaching the final ethne.

Reluctantly, these three illiterate women, virtually irrelevant in the world's eyes, but bold Ambassadors for Christ in the kingdom, began travelling the three hours each way every weekend to reproduce the health lessons and Bible stories with their extended family. They were well-received, and they completed the entire lesson set, demonstrating important basic health concepts and sharing the truth about who Jesus really is and what really happened on the cross, and praying with and for the other ladies in the group, each week urging these ladies to share with family and neighbors, just as they had done. They were then invited to continue coming and doing oral Discovery Bible Study with the ladies in this village, just as my wife and teammate and Bisharra had done with them. My wife and I and the other expat family have now been away for a time, and we are eager to hear from these bold disciples what God has been doing in their midst.

These women could have never overseen a mission hospital or a budgeted development project; these are just too complex and unsustainable. But they could share basic, sustainable concepts about health that give their communities more power over their health, as well as sharing the truth about Jesus in a reproducible way, hopefully catalyzing Disciple-Making Movements and transformational health movements among unengaged *FPGs*.





The Key to the Final Ethne is Emulating Jesus' Holistic Paradigm

I am not advocating that "preachers" necessarily do specialty health or development training, or that "healers" necessarily do specialty theological training.

Rather, I am advocating that every disciple of Jesus, including our newest disciples from among the *FPGs*, pursue hyper-detailed emulation of Jesus, sacrificially imitating every twist and turn of His holistic words and actions, and that missions sending organizations and churches do the same.

Emulating Jesus in seamlessly addressing the spiritual alongside the physical in homes and families of the *Frontier People Groups* is the key to reaching the final *ethne*.

How "Preachers" Can "Heal" More Like Jesus

Catch Jesus' vision for God's will done on earth as it is in heaven; realize and teach from Scripture that the spiritual and the physical are inextricably intertwined.

Model for and train seekers and disciples to pray for and tangibly address physical needs of their *oikos* and community, no matter their education level or skill set.

Engage in direct prayer with the lost, seekers and disciples for physical healing and for God's intervention in the suffering they face on earth.

How "Healers" Can "Preach" More Like Jesus

Catch Jesus' vision for disciples in every people group; focus on the *Frontier People Groups*; allocate new missionaries and local disciples to go to people groups that have zero disciples, regardless of where existing "healing" institutions or efforts are located.

Enter the *oikos* of locals as Jesus did, and train local disciples to sustainably do the same. Mission hospitals and large development programs may make a physical difference, but they rarely sustainably enter the households of the local people in the reproducible paradigm of Jesus that leads to movements of disciples.²³

Center health and development efforts around making disciples from among the lost as Jesus did; stop viewing numbers of patients seen, surgeries performed or babies delivered as markers of success. Stop divorcing Jesus and His commission to make disciples from what we call healthcare or development "missions" and rediscover Jesus' gold standard for missions effectiveness: disciples in all the *ethne*.

²³ See Fielding (2008), "Part Three: Health Strategy Possibilities," for an excellent comparison of how well various health strategies enter the *oikos* and make disciples.