

Alumnus Confronts His Fears, Serves Amid Ebola Outbreak in Liberian Hospital

James Appel, '96, has been working as a missionary doctor for many years, but recently came into the national spotlight because of his willingness to serve in Liberia, one of the West African countries that are ground zero for the Ebola outbreak. His skills and sacrifices tell a captivating story amid the heartbreak of this crisis. COLUMNS had a chance to speak with him.

You recently completed two months of service at Cooper Seventh-day Adventist Hospital in Monrovia, Liberia—a city fraught with sickness and panic because of Ebola—but you didn't work directly with Ebola patients. Describe the situation there and your primary responsibilities.

I was called to Liberia from the Republic of Chad, where I normally work (Béré Adventist Hospital), to help out at Cooper in August and September. It was one of the few hospitals still open and treating non-Ebola patients. People there are afraid to come to the hospital, so they will wait until they are on death's door before showing up, making it often too late to save them. One of the other underreported effects of Ebola is the psychological stress on the population. People are afraid and anxious. Not getting enough sleep and being stressed depresses the immune system and makes people more susceptible to disease. All of this combines to make the impact of Ebola higher than fatalities from the disease alone.

Do you know anyone who has contracted Ebola?

Yes, a nurse's aid at Cooper passed away last week from the disease, and another nurse was just diagnosed with it. One of our cleaning staff also died mysteriously, probably of Ebola.

Do you live and work in fear of this disease? How did you make the decision to move closer to the virus when the rest of the world would give anything to stay clear of it? What role did your faith play when contemplating this?

In all of my medical school training, the only thing that really scared me was Ebola, so it is constantly lurking in my subconscious. But the Bible tells us that perfect love casts out fear, and I didn't want to become a victim of my fears, so I made a conscious decision to face Ebola head-on. I didn't do it to be reckless or adventurous, but because I felt I could help out and that God had given me this opportunity to come to the aid in a difficult situation. Still, after accepting the call to Liberia, I didn't sleep well and had nightmares.

The story of Jesus' sacrifice on our behalf is especially relevant given your family's history of risk and loss in Africa. Have you considered coming back to the United States to work in a more traditional environment?

We lost our firstborn son, a twin, to complications of malaria when he was 6 months old. His twin sister, Miriam, had malaria at the same time and survived. She is now 3 years old. We also have an 18-month-old son, Noah, and another son, Isak, about to be born. Some people have asked us why we would risk our children's lives by taking them to Africa, to which we respond: How many African children are our children's lives worth? Hundreds of kids in Chad would be dead if we hadn't gone there. Is our child worth more than someone else's child in God's eyes?

As believers, we know it's a temporary separation. We'll get to see the child we lost grow up in the best possible environment imaginable. I met my wife in Chad, and we both love it here. Even though we have two kids and another on the way, we have no plans of leaving Africa anytime soon.

How can readers best help you and the people you serve in Africa?

Learn French or Arabic and come join us! It's human resources that are lacking in places such as Chad and the rest of Africa; money is not the problem, God can order that around wherever He wants. But because of His loving character, God doesn't manipulate or force people to go where they could be useful. Like Jesus said, "the harvest is ripe but the workers are few."

