

# Your faith challenged and encouraged

By the Rev. Wm Chris Boerger, bishop



**D**uring my sabbatical trip to South Africa, I was confronted with the reality of life under the threat of HIV/AIDS and malaria. In South Africa the number of deaths related to HIV/AIDS is staggering. The numbers of children being raised by their grandmothers or in foster care breaks your heart.

I will always remember the 11-year-old girl who wanted to sing for her North American visitors. She

had a wonderful voice that sang of hope and joy in Jesus. She is also dying of HIV/AIDS. She was essentially skin and bones with a youthful spirit and a childlike faith. She is a child and she is confronting a killer disease.

I visited the cemetery in her township. There were nine freshly dug graves in this cemetery, which is operated by the community development organization in this township.

At our 2009 Churchwide Assembly we adopted initiatives to combat HIV/AIDS and malaria around the world. We have the resources to combat these diseases. Now we need the will and the organization.

Our 2011 synod assembly will focus on these global health initiatives. We have the capacity to change the faces of those confronting the threat of these two diseases.

Yes, this is another opportunity for us to share our financial resources in

support of the widow, the orphan and the stranger. In the case of these two diseases, there are too many widows and orphans. God expects us to reach out to them.

We will hear the stories of pain and of joy in the face of disease. Martin Luther reminds us that it is in these broken stories that we will find the crucified Jesus. We have a theology of the cross that expects to find Jesus in the tragedies of the world. We are sent to be the arms and hands of Jesus to support and stand with those in pain.

The sad fact is that HIV/AIDS is spreading again in this country. This time, middle-aged singles and senior citizens are in the center of the risk groups. We can educate ourselves and live as responsible people. We can also reach out to the world with the cup of cold water that is the HIV/AIDS and malaria initiatives in response to Christ's love. □

## Connecting to God's people

By Dianne Johnson

**M**alaria and HIV/AIDS is spreading and there is much we can do to help. Mission teams from Lord of Life Lutheran Church in Renton saw first-hand what is happening in Africa.

A team that visited Tanzania in 2009 had an opportunity to work for two days with a ministry in Morogoro called Faraja Trust. Their focus is to support families that have a

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child with HIV/AIDS.

The team's first day was dedicated to purchasing and preparing food to be delivered to local families. The group visited the market to make purchases and then worked side-by-side with local women to prepare the grain. Families receive one bag of cornmeal to make *ugali* and a second bag with sorghum, soy and other vitamins to provide a nutritional boost for the patient in the family.

Two days later the group traveled

with a caseworker from Faraja Trust to visit eight families.

The visits were a sad but great experience. Most of the families were comprised of a grandmother raising her grandchildren because their parents are dead. Financial difficulties were evident in all the homes we visited.

Despite the difficulties, the people were resilient and creative in finding

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## God With Us: Tent City 3

By Patrick Meagher

**P**hinney Ridge Lutheran Church in Seattle has twice hosted Tent City 3 (TC3) on its front lawn. The first time occurred in the winter of 2002-03, and the second four years later in 2006-07.

In the beginning, understandably, there was some hesitation from the neighborhood and church. Tent City 3 was still quite new to the city in 2002, and many didn't know what to make of this ministry idea.

An additional complication was the presence of our robust Child Development Center (CDC), serving 75 prekindergarten children and their families. Could we operate the two ministries side-by-side without compromising the safety of either?

Anxiety around this question led to an overflow of vocally concerned parents at the first informational meeting about TC3. Due to the diligence of the staff and volunteers, speakers were listened to and word was proclaimed that TC3 offered a self-policing and effective security system. In addition, plans were worked out for "out of bounds" areas for residents and a schedule of church volunteers who would patrol the grounds during the CDC's open hours.

With some hesitation, CDC families and staff were relieved to the point of being OK moving forward.

TC3 moved in, stayed for two months and moved out, forever altering our community.

We met "the homeless" face-to-face and, lo and behold, we learned of our mutual humanity. Aside from different living situations, we were they, and they were we. Instead of

referring to "the homeless," we now thought of Robert, Mary, Jim and Patricia. This was faith formation unlike any catechumenate class or Sunday sermon could have taught us.

Given this positive experience, our second opportunity to host was met with great rejoicing. Only a handful of CDC parents attended the informational meeting, and most of them were only there to see how they could volunteer. Because we knew what to expect, we focused intently on making the most of this opportunity.

I encouraged the congregation to live with these questions: How can I interact with residents from Tent City with a generosity that might affect a change in a human heart? Furthermore, how might I relate to Tent City

with an openness that allows me to receive life-changing relationships?

An enduring image from our first hosting of TC3 was the church's crèche on our front lawn. Mary and Joseph awaited the arrival of the sacred child under a tarp with tent stakes, which fit into the same visual scheme as the living quarters of TC3 residents.

Had we not walked through the delicate task of educating our neighbors and ministry partners about the opportunity inherent in hosting TC3, we would have missed this enduring lesson about the Incarnation. From the moment of his birth, God was with the poor. Where are we? □

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## Affirmation of mission

**T**ent City 3 moved into the parking lot of Maple Leaf Lutheran Church in Seattle on Nov. 27, 2010, for a 90-day stay.

While Maple Leaf has been a host site for an indoor SHARE shelter for 15 years, this was its first time hosting Tent City.

During Tent City's stay, the congregation had the joy of experiencing many people from other churches and the community who volunteered to help, as well as donating their time and resources. For the congregation this has been a time of reconfirmation of their identity, vision and mission. □



**Residents of Tent City 3 set up their "community."**

# Responding to the vulnerable

**S**t. Luke Lutheran Church in Bellevue has a rich tradition for seeking creative means by which to respond to the growing needs of the impoverished and homeless in our community.

To not respond is to give the most vulnerable over to that which can-

not be survived—hopelessness. To love the poor and the powerful in both program and conversation is our hope and calling.

Tent City 4 (TC4) stayed at St. Luke's for 90 days in early 2006. Approximately 60 men resided outside the windows of our narthex for all to see whenever they were at church.

During their stay we had some extremely cold weather that presented many challenges: from making sure the residents stayed warm to the water freezing in the hose to their showers.

## The benefits

There were several significant things that came out of hosting TC4.

The “outside” community (our neighborhood) contributed money and clothes for the men. The QFC store up the block had a container for donations to TC4.

Our own membership contributed almost every Sunday for their needs either in cash donations so we could shop or by supplying the items.

As a congregation we discovered the residents of TC4 were really just like us and there was no need to fear them.

Another significant blessing that came from hosting TC4 was an intangible. We had an energized congregation. They still talk about and share stories of having them here right in our backyard where we could see the difference we were making in someone's life—and how it felt knowing they appreciated it. □



**A view of Tent City 4 from the narthex of St. Luke Lutheran Church in Bellevue.**

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ways to provide for themselves.

For many, one of the most difficult aspects of living with AIDS in their family was the need to move to the city to have access to medical care, schooling and other resources. But in the move they lost the community that had surrounded them. Faraja Trust works diligently to make sure these families still have a sense of community.

While it was difficult at times to visit with these families, it is encouraging to know that we can contribute to the ministries that provide the community and the physical necessities they need. Funds given through ELCA World Hunger help provide education, medical care and community for those who need it most.

In addition to HIV/AIDS, malaria is spreading. This disease isn't something Americans think about. On my first trip to Tanzania, I was surprised that it was even an issue and that I would need medications for travel. Since the U.S. no longer has active cases of malaria, I assumed the disease had been eradicated globally.

Unfortunately, a disease that is preventable and curable continues to make millions sick each year. In Africa it takes the lives of nearly 800,000—primarily children under 5 and pregnant women.

After meeting people who shared their stories of living with malaria and losing children to the disease, it was clear that their voices needed to be heard so we can respond.

The 2010 World Cup was a time

when most of the world had their eyes on Africa and was a great opportunity to share the story of malaria and how we can make a difference. On July 3, members from Lord of Life and neighboring congregations gathered at an Irish pub in Burien for a World Cup watch party. We cheered on the teams and enjoyed some great Irish food for lunch. Most importantly, we learned about malaria and how we can make a difference for people around the world.

A gift of \$10 can make a difference for one family in Africa. It could be used to provide one bed net, medications in a clinic for early treatment of malaria, and education for the community on how to prevent and recognize signs of the disease for early intervention. □