

Sermon for 6-30-24
Text: Mark 5:21-43

Dear friends in Christ, God's grace and peace be with you today and always. Amen.

In 1973, a geneticist named Victor McKusick, who worked at Johns Hopkins hospital in Baltimore, directed a post-doctoral fellow named Susan Shu to get in touch with the Lacks family to obtain blood samples from them. Because English was Shu's second language, the Lacks family had trouble understanding her, and because they weren't comfortable asking questions of medical professionals, they thought she was screening them for cancer. Deborah Lacks, one of the family members, worried that she was getting screened for the same cancer her mother died from at 31. Deborah was approaching the same age as her mother was when she died and was afraid she would experience the same cancer.

After their blood was drawn, Deborah started to worry more about the blood samples. The Lacks family is Black, and Deborah knew about the Tuskegee experiments that lasted from the 1930s to the 1970s, where black men were lied to by experimenters and not given the treatments they needed, leading to suffering and sometimes death. Deborah worried that the doctors had injected her with her mother's cancer.

Victor McKusick later asked Deborah for another blood sample, and she decided she wanted more answers. That's when she learned that her mother's cancer cells had been used in science for the past 25 years. Her mother's name was Henrietta Lacks.

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Henrietta Lacks died from cervical cancer in 1951. Her cancer cells were cultured, as was common at the time, and it was discovered that they were the first discovered "quote-unquote" "immortal" cells, meaning they reproduce infinitely, and have been invaluable cells in scientific research for 75 years. Yet her family wasn't told anything about it until 25 years after her death.

This is only one example of the incidents and structural issues that lead to mistrust of the medical system by the Black population and communities that experience marginalization.

Studies show that people with lower incomes and people living in poverty also struggle with mistrust of medical care, and it affects quality of life and life expectancy.

Their mistrust is often valid, based on generations of interactions with doctors and medical professionals that condescended to them and left them confused. Of course, we know this is not true of all medical professionals. But the mistrust is not unfounded.

Some of you, and your families, may have experienced this struggle to trust your doctors.

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This is nothing new. In first century Palestine, a woman who had been bleeding for 12 years was at the end of her rope. She'd gone to doctor after doctor, some of them taking her money and giving her false promises and treatments that didn't work. She despaired that she would never be healed.

One day, she heard that Jesus, an extraordinary man with healing powers, was traveling near her home. She knew he was her last chance, so she set off to find him. She may have felt a little ridiculous, weaving her way through the packed crowd, wondering if she was out of her mind. Because of her bleeding, she was considered unclean and had to be isolated from others for over a decade. She wasn't sure how she would be treated in the crowd surrounding Jesus. Would people try to run away from her, or even push her out of the way?

In the Chapel of the Encounter in Magdala, a first-century town located on the shores of the Sea of Galilee and believed to be the hometown of Mary Magdalene, is a powerful mural painted by Daniel Cariola called The Encounter. It's a depiction of the story we hear this morning, but all you see in the painting is feet. When you look at the mural, it feels like you're laying on the ground, staring at Jesus' sandals and the hem of his robe. You also see a hand pushing through the feet, it's finger pointed, stretching

to reach Jesus' hem. And as her hand makes contact with the robe, there is a little point of bright light, like a poster of ET.

It illustrates the perspective of the hemorrhaging woman and her last brave attempt to be healed. She had to find her way through the crowd, leaning down among the dirty feet, in order to barely brush Jesus' robe with her fingertip. This is what faith as a last resort looks and feels like. It's a moment when desperate faith was enough.

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The story of the hemorrhaging woman in Mark is placed next to the story of Jairus' daughter, and the placement is crucial. We're meant to read these two stories together and to notice the differences. The two main characters are opposites.

There are stark class differences between the two stories. Jairus' daughter has more social support and capital than the hemorrhaging woman: she has an influential father, who is a leader in the synagogue, to advocate for her. Jairus approaches Jesus personally and begs him to come and heal his daughter.

The bleeding woman, however, has to push through the crowd, which is the social location of the poor in the Gospels. She is ashamed and tries to find healing anonymously.

Jesus works against the social structures—theologian Chad Myers calls this “reverse contagion”—he makes her well by touching her, which breaks the assumption that her illness will defile him. He restores her bodily wholeness, but he also restores her role in her community. No longer is she ashamed or outcast.

The question we need to be asking as we read these stories is: **who does Jesus prioritize? Who does Jesus prioritize? The woman who is doubly outcast by her poverty and by her health issues.**

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It took 25 years for Henrietta Lacks' family to become aware of the use of her cells. By the time the author of the book “The Immortal Life of Henrietta Lacks” found them in 1999, they were traumatized and

overwhelmed by the attention they'd received. They didn't understand what had happened to Henrietta, and struggled to grasp what doctors and scientists were doing with part of her body that was still living. Was this affecting her spirit?

Henrietta's story, and the famous book written about it, remind us that unjust social structures in medicine failed the Lacks family. Doctors must never forget the individuality of their patients. People today still know the suffering of the hemorrhaging woman, seeking medical care from doctor after doctor and facing condescension, confusion and fear. This leads to people avoiding much-needed medical care. Henrietta's husband avoided an important medical procedure that would have saved his leg later in life because of his deep distrust of the medical community.

Jesus stops on his way to heal Jairus' daughter, and the family is rightly in despair. They think he is too late. He takes the time to heal a desperate woman. Yet the surprise in this story is this: Jairus' daughter, who everyone thought was dead, is alive.

And Jesus calls the hemorrhaging woman "daughter" as well.

Suffering matters to Jesus, and we have a role to play in alleviating the suffering of others. So we do what we can. Tomorrow there is a blood drive at St. Mark, and something that feels small-like giving blood-is an act of hope and care. It makes a difference!

Amen!