

The Cure

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Chapter One

THE GREATEST COMMISSION

As I begin this chapter, I'm writing in one of those places I call a Christian-theology-meets-the-road kind of place. It's a place of scorching heat and sand, a place I can't believe anyone calls a refuge, but that's exactly what it's called by 160,000 Somali refugees.

Dadaab, Kenya, is the home of three, soon to be four UN refugee camps just inside the Kenya border next to Somalia. For many, it's home to a life robbed of hope, a barely-make-it existence made tolerable because of free food rations and the absence of active war. Which, by the way, is why it's a refuge. The problem with the camps here is that a temporary situation has turned agonizingly permanent for so many. Resettlement, the mantra of the United Nations High Commission for Refugees, has been next to impossible for the Somali people because of what seems to be nearly ceaseless government instability

and anarchy. So, for thousands a few months has turned into fifteen years. And time in Dadaab crawls with a determined and sweaty sluggishness.

For me, at this moment, life is good. My face is sixteen inches from a fan set on the highest speed. I finished my day of surgery in the primitive camp hospital, took a lukewarm shower (not that I have any choice about the temperature, mind you; it just comes straight out of the single tap that way), and now have only another hour before the sun will dive straight into the equatorial horizon and relieve everyone else who isn't so blessed to be sitting in front of an electric fan.

In a casual moment I might even tell you, "I love my fan," and that would be true, but it only illustrates something else that bugs me about common English language. We use the word *love* with such cavalier abandon that when we stop to think about it in the context of proper theology, it takes us a while to understand that its biblical meaning is huge in comparison.

I can't be here without remembering my first visit. I was helping run a surgery clinic and was short on time late one afternoon. My translators kept telling me, "You have to leave. The driver is here. The other passengers are waiting."

I looked around and realized there would be no satisfaction for the dozens of patients who remained. Try and imagine what it was like. The closest thing I can say to paint an accurate picture in your mind is that it's like seeing patients in an old outbuilding you'd see in the Midwest, one of those drafty barns with a corrugated metal roof, a cement floor, and unfinished boards lining the walls, luckily with cracks between the boards so they let a little extra light in along with a welcome breeze. There were a few wooden chairs, a desk, and a hard table where patients could lie down for an exam. I think the patients knew I had to leave. In the last ten minutes, half of

the patients waiting outside squeezed in around us, each one pushing a ragged collection of papers in his or her fists toward my face. It was the camp's way of doing medical records. The patients keep all of the handwritten notes from all of their visits, each one folded and refolded until they are torn along the seams. How to unfold them was the puzzle at the beginning of each patient visit.

“Dhaktar! You need to go.”

I held up my hands. I was missionary-tired and didn't want to be the bad guy to send everyone away. If I surrendered, at least I hoped the patients would see I was being forced to close the clinic for the day.

My eyes fell upon a woman sitting at the corner of my desk. She'd insinuated herself into position and had sat quietly while I'd been interviewing and examining the previous patient. Medical privacy, I've discovered, is a relative concept. A necessary and valued concept in the West, but in the refugee camps, giving the patient ahead of you privacy might mean you'll never be seen because many others will crowd in ahead of you.

I sighed. The woman had been waiting so patiently. I couldn't just leave her. “What about her?” I said.

Now my assistant sighed. “Okay. But this is the last one.”

With the clock ticking and my driver waiting in the heat with all the other passengers, I waited impatiently for the answers to my questions. “Why is she here?”

The woman sat in silence.

I repeated my question.

She leaned closer to my translator. He looked at me. “She won't say unless she's in private.”

I looked around. *Privacy here?* Dozens of patients and a few staff members had crowded into the two-room building. In the

corner of the room, a wooden table was partially hidden by a portable fabric screen. It would have to do.

I retreated with my patient and a translator. Once in the corner, the woman began to talk.

Now, I need you to understand that she was dressed like a typical Somali woman. Somali people are all Muslims. Okay, not all, but 99.9 percent, and this woman was clothed modestly like most of them. I could see the front of her face only. Her neck, cheeks, and the top of her head were veiled. As I studied her face, I got a gut-check discomfort. My patient was just too masculine to be dressed the way she was.

After some discussion, which seemed intolerably long because the car was waiting, the translator turned to me with a matter-of-fact tone. “She wants you to tell her whether she’s a man or a woman.”

Immediately I understood that I wouldn’t be able to answer her question while the driver was waiting. I asked her to lie down and made sure the portable screen offered a for-our-eyes-only exam for myself and my medical translator.

I began my exam with the genitalia and immediately understood the confusion. I was confused at first too. I had suspicions that the patient suffered from a combination of common anomalies that were both easily correctable. The crime of it was that because she’d been raised in the bush with little access to medical care, her parents made an assumption based on a best guess. And so my patient had spent the first thirty-five years of her life as a female.

My heart was touched. Only where medical care is unavailable, only where despair and fatalism rule can such a tragedy unfold. *Africa*. “I’m not sure,” I said. “But we’ll bring you to Kijabe Hospital. A few easy tests will tell us the answer.”

Why tell that story now? Because as we begin exploring the great metaphor that likens the church to the body of Christ, I wanted to go back to the very basic thing that defines us all, the very wonderful and marvelous molecule known as our DNA.

You see, from the very moment of conception each of us inherits DNA from our parents. DNA is a helical-shaped molecule with two strands. Think of a ladder that's been twisted so that the normally parallel uprights curl around each other. We got one strand from dad, the other from mom.

Our DNA contains the genetic code, some thirty thousand genes that are code for all the amazing proteins that make up the structure and guide the chemical processes of our life. It's all quite incredible and a bit mystifying, but suffice it to say that within our DNA are the basic blueprints that define everything about us. Everything! Blue eyes. Curly hair. When we're going to have a growth spurt and how tall we'll grow as a result (assuming we have the proper nourishment). Less well understood, but equally important are features such as a tendency toward depression, colon cancer, and a propensity to alcohol dependency.

So, for my patient in the refugee camp this was all true. A message resided in every nucleated cell revealing the identity as male or female. As far as determination of sex is concerned, we all learned in high-school biology that XX equals female and XY equals male. The problem with my patient wasn't that the cells didn't have the message. The message had just been scrambled a bit in development.

A DNA fingerprint is the unique feature that has turned forensic evidence for or against thousands of people suspected of committing crimes. A woman is attacked, defending herself by scratching her assailant. Later skin cells are collected from beneath her fingernails. The DNA from those cells is examined,

revealing a perfect blueprint unique to the perpetrator, assuming the criminal isn't an identical twin.

DNA present within the cells provides an exact identification. What about the body of Christ? Is there a feature that can provide the proof that will convict us of belonging to Jesus? Is there enough forensic evidence left in our wake to identify us as individual members of his body?

Has a vital message been scrambled?

Take time this week and ask the people around you if there is any observable feature that sets a person apart and lets you know that he or she is a Christian. The answers you hear may be encouraging. Or a bit threatening.

Speaking from the viewpoint of a missionary, having lived around people of several different worldviews, I'll encourage you to be sure that your answer has nothing to do with Western culture. In short, it can have nothing to do with externals. It has to be something within us that, given appropriate nourishment, will result in a defining quality.

Jesus gives us the answer.

“By this all people will know that you are my disciples, if you have love for one another.”

—John 13:35

After ten of the original twelve apostles were martyred for their faith in Christ, John lived on, the only apostle to live into old age. And in those years, the message he heard from Jesus resonated and matured within him and was revived by the Holy Spirit in the following passage:

Little children, let us not love in word or talk but in deed and in truth. By this we shall know that we are of the truth and reassure our heart before him.

—1 John 3:18–19

And again, a little later,

Beloved, let us love one another, for love is from God, and whoever loves has been born of God and knows God.

—1 John 4:7

Can we ask for a clearer answer than this?

Unfortunately, around the world, particularly in areas of Muslim dominance, Christianity is confused with Western culture and has nothing to do with love. In the age of the Internet and videos, Christians are defined by the dress of Hollywood's elite. To the missionary's dismay, Christianity is defined by American culture and American politics. It's an unfair assumption, but one we have to deal with nonetheless. "Christian America" defines my faith in the minds of anyone not willing to take a critical look at Jesus.

I made a trip last month into Somaliland to teach in a struggling medical school. During my stay, U.S. jets bombed suspected terrorist sites in Mogadishu, the capital city of Somalia to the south. While Somaliland considers itself independent from Somalia, there is nothing like an attack involving U.S. forces to raise concern for their southern neighbors.

"Mr. Bush is a Christian," one Somalilander said to me. "Why does he behave in this way?"

I wanted to steer clear of political topics. If I defended President Bush, I would have precipitated more difficult questions. But to condemn the President would have been a denial of my

own conscience. My country had just attacked theirs. It hardly seemed wise to praise my government's decision from within their borders, *even though I thought the attack was justified*. I responded, "It's best to judge Christianity from a close examination of Jesus Christ, not from the actions of Christians."

Was my answer a cop-out? Perhaps, but I know there are many times when I don't want Christianity defined by my life.

I think criticism of Christianity on the basis of Christians is bogus, but unfortunately our actions can become stumbling blocks for others who are considering the faith. I've spoken to Muslims who are offended by people judging Islam on the basis of suicide bombers, so I guess I understand the predicament.

"By this all people will know . . ." These words can be hammer-blows to our consciences. I wince at the memory of numerous times I've acted in ways that were nothing like love. But these words are not meant to discourage. John certainly knew that we would be unloving. Hadn't he just said, in chapter 2 of 1 John (see especially verses 1–2), that our sins have been forgiven?

The truth remains: love is to be the defining, dominant characteristic of the body of Christ, the evidence of our discipleship to a world longing for love.

The rub is in the "how to." I'll get to that later. Suffice it to say that so much of the process begins with an understanding of our need.

Love isn't an optional fruit. I believe in the indwelling of God's Spirit, though it's a bit hard to get my mind around that fact. Nonetheless, I believe in "Christ in me." Paul refers to this as a mystery, so I don't feel too cranially challenged for not getting it myself.

To them God chose to make known how great among the Gentiles are the riches of the glory of this mystery, which is Christ in you, the hope of glory.

—Colossians 1:27

If God resides in me and he defines himself as love, then I have to believe that love has taken up residence in me in some way. His character may not be completely manifest in me, but I believe that must be my fault, not his.

Let's go back to our analogy. The DNA sends a definite message to every nucleated cell: "Be male" or "be female." The message will be translated and retranslated, but the end result is structural proteins that make a person either male or female. In the case of my patient at the refugee camp, the message was clear at its origin (the DNA), but it became a bit mixed during the last few steps, resulting in a male without all of the externals being completely developed. We made this diagnosis by doing a simple biopsy. The hard part was determining what to do next. Suffice it to say, I had a long conversation with my patient! Often in these cases a clear gender identification has occurred because of the way the person has been raised. Not so in the case of my patient, who had always felt male and wanted to be male. Fortunately the man had a few relatively simple anomalies that combined to lead to his parents' (and his) confusion. Each defect was corrected surgically, and he returned to a different refugee camp as a male.

Likewise, a clear message has gone out to every member of Christ's body: "Love!" Over and over, like the DNA message sent to every cell, the message is unmistakable. Love! Jesus issues it as an order, calling it "a new commandment" (John 13:34) or "my commandment" (John 15:12). That's strong language. It's not a suggestion but a clear mandate. In fact, the language could not be more forceful and is certainly as powerful (and more frequent) as the instructions we know as the Great Com-

mission. I believe if we as the body of Christ would focus as much attention on loving each other and loving our neighbors (and the rest of a love-starved world), we might just find the Great Commission occurring as naturally as smoke follows fire. Hand in hand. And maybe that was Jesus' point, after all.

Lots of things can happen to scramble a DNA message, to hamper its full instigation in every cell. Competing messages, inadequate nutrition, or illness can interfere with a cell's ability to respond. *But the DNA reveals the way things were intended to be.*

Some of you are uncomfortable with my analogy. We're uneasy hearing such stories of gender confusion. And yet I have the audacity to use it in a spiritual analogy. Why? Because a condition like my patient's is a tragedy; just hearing about it makes us ill at ease. Don't get me wrong! It's appropriate to recoil at such an example, but I really want you to see the parallel tragedy that is occurring every day in the body of Christ.

My patient's life was a heartbreaking misfortune, a real tragedy. He lived for thirty-five years not understanding who he was. Because of access to medical care, calamities like this are avoided in the developed world. But not in the Horn of Africa. We look on with a sense of shock and revulsion. *This all could have been avoided!*

But where is our shock over the defining condition of the body of Christ? God's clear message of love has been scrambled. We are carrying the DNA message that defines us, but we are confused about our identity. The world looks on, and they don't know either. Is the Christian church known for love? Or something less holy? This is the true tragedy that should make us recoil in disgust.

I cringe to hear how Christianity is thought of within some Muslim circles. We're misunderstood, and our teachings are

twisted. We're known for the escapades of our Hollywood celebrities, agents who unwillingly stand for Christianity because they come from a "Christian" nation. Confusion like this is understood when you realize that there is no separation of church and state within the religion of Islam.

What is more disturbing is when I find myself recoiling from the truth of accusations that Christ's church stands for malice, ill will, and intolerance. Listen to the sometimes too-true words of Spinoza, a Jewish philosopher:

I have often wondered that persons who make boast of professing the Christian religion—namely love, joy, peace, temperance, and charity to all men—should quarrel with such rancorous animosity and display daily towards one another such bitter hatred, that this, rather than the virtues they profess, is the readiest criteria of their faith.

The problem lies within all of us. We're more conscious of our sin than of God's love. We've feasted on judgment and justice instead of grace. We've given mental assent to the truth that God loves us, but little more. Our souls remain crusty, with our receivers tuned only to our own negative runaway thoughts. Or worse, we've tuned our ears to the deceiver himself. *You're unlovely.*

But the solution lies within each member of the body of Christ. *What? Didn't you just say the problem lies within us? And now you say the answer is there too?*

You see, accepting God's love message accelerates a transformation of the heart.

When Christ, love personified, entered my heart, he sent out a message of love, a message of *the way things were intended to be.*

What are the things that keep me from responding? Has Christ's command been scrambled along the way?

Sometimes, for me, the answer is yes. Not always, mind you. And the good news is, there is a remedy for the times when my heart can't seem to find a way to love. Can you bear to have me continue my analogy? Spiritual remedies may require a spiritual scalpel of sorts. This is sometimes painful, but very often this is just what the doctor ordered.

We'll talk about that a bit later.

For Further Reflection

1. Do you agree that the body of Christ, the church, has a DNA? How would you define or describe that DNA?
2. In what ways do people confuse true Christianity with Western or American culture? How would you help individuals see the difference?
3. Do you agree that "Love isn't an optional fruit"? How visible is this fruit in your life? What actions do you need to take to allow it to blossom more in you?
4. Do you agree that "if we as the body of Christ would focus as much attention on loving each other and loving our neighbors (and the rest of a love-starved world), we might just find the Great Commission occurring as naturally as smoke follows fire"? Why or why not?
5. Is the Christian church generally known for love for God and one another or for something else? If the latter, what? Were Spinoza's caustic remarks too harsh or on-target?