Dr. Donald Laub is a retired plastic surgeon who spent most of his career in the Bay Area.\(^1\) He is known as a pioneer in gender reassignment surgeries, having been involved in a program at Stanford in the 60s that provided surgical interventions for gender dysphoria – an otherwise unimaginable and unattainable possibility at the time. Laub, a good Catholic boy from the Midwest, came slowly to this calling, and it was ultimately his patients – their clarity, their desperation – that appealed to both his altruism and his ambition. When he looks back on his first consults and his first surgeries, what stands out most is his desire to help people, and his willingness to take big personal and professional risks to that end.

So perhaps it comes as no surprise that, in addition to pioneering treatments for what would come to be called the transgender community, he was also one of the first doctors to organize international medical missions. In 1965, a fourteen-year-old boy with a cleft lip came to Stanford’s Medical Center from Mexicali, Mexico, where his condition had rendered him a social pariah. He didn’t go to school. He had no work or familial prospects as an adult. And there was no treatment available to him back home. One of Laub’s colleagues performed three relatively simple operations, and, presto, the boy was restored to a life and a future that had been previously beyond reach. Laub was so moved by this that he organized multidisciplinary teams to travel to Mexico and provide free surgeries for children with birth defects, burns and other severe scars.

Being a pioneer is tricky. Laub was constantly pushing the envelope – inventing visionary but highly controversial surgical techniques; leading friends and colleagues into foreign countries and foreign medical systems without the benefit of any norms or regulations. There’s no question that Laub did help people, but he also found himself in some sticky situations.

\(^1\) The following stories come about Dr. Laub come from an episode of the NPR podcast, “Hidden Brain” with host Shankar Vedantam, called The Fox and the Hedgehog and first aired on May 15, 2017. You can find it online at https://www.npr.org/templates/
One day, about two years into the program in Mexico, a mother brought her young son to the clinic. He had bilateral clefts – slightly more complicated than a cleft pallet. During the initial assessment, Laub realized the boy had a hole in his heart. In the U.S., this would be relatively simple to fix, but in Mexicali didn’t have the necessary equipment. Undergoing surgery was deemed too risky for the boy, and he and his mother were sent away. Months passed. The team returned to the US, and returned to Mexico, and eventually the mother and son returned to the clinic. The mother begged Laub to perform the surgery anyway. Her son had no friends. The other kids in their village called him a monster. This was his only hope. He, again, explained her son’s condition to her and described the risks of surgery. The mother insisted. She cried. She pleaded. Laub knew that the right thing to do was to say no. He knew this was the right call according to medical protocol. It was the conventional response. He also knew that the mother was right: that without treatment her son would have no life. So he gave in.

A few weeks later, the boy walked himself into the operating room. The doctors anesthetized him and began the surgery. All was going well, until suddenly they lost his pulse. The doctors tried everything but the boy was dead. Laub was crushed - guilty, sad, and more than a little afraid of the consequences of his decision. But when he informed the boy’s mother of his death, heartbroken as she was, she didn’t respond with anger or blame. Instead, she was comforted knowing that “the child is seeing God with a complete face.” Hearing this only made Laub’s stomach drop further, because what he knew that she did not is that the boy had died before they could complete the repair.

When the time came to turn the boy’s body over to his family, Laub just couldn’t do it. He gathered the team and suggested they finish the surgery, even though the child had died, even though there were living children waiting for their services. “It’s against the law,” he told his friends, “but I think in this case we should.” The group was unanimous and 25 minutes later the thing was done. It was illegal. It was against medical protocol. It was morally and ethically questionable. But was it wrong?

I imagine that whatever discomfort, distress, even disgust this story might bring up in us is comparable to how the Pharisees felt in the face of defilement and impurity. In this morning’s Gospel, Jesus draws the attention and the ire of this group once again, who notice that he and his disciples were eating without first washing their hands. Which seems like such a small thing. A matter of personal health and hygiene, perhaps. And yet it comes up over and over again in the
Gospels as a sticking point among Jesus’ critics. Why? Because among ancient Jews this practice was part of the tradition of the elders, a wide and vast tradition encompassing not only the written law – the Torah – given by God, but the customs and rituals of those seeking to walk in God’s ways. In a culture primarily concerned with ritual purity, defilement was to be avoided at all costs. It was a system designed to literally and spiritually clean up on the mess and muckiness of life.

But some groups, such as the Pharisees, took this a bit too far. They insisted on the strictest interpretation of these customs, they became obsessed with the rules, and as their focus narrowed they lost sight of what those rules were intended for – to draw people closer to God – and incapable of course correcting when the rules themselves got in the way. The Pharisees are like people who confuse the menu for the meal, the map for the destination.

Cue Jesus, who comes along flouting these customs, turning his nose up at the norms, chucking protocol, pointing out the error of their ways. (Which, as we all know, usually goes super well.) Washing hands. It seems like such a small thing. But the feelings involved, the moral and ethical boundaries being crossed, they are on the scale of those Laub and his colleagues encountered when they chose to do a surgery on a dead child. Jesus was also a pioneer. He was constantly pushing the envelope. He challenged people’s core beliefs. He made them profoundly uncomfortable. So uncomfortable that those around him would rather put him to death than wrestle with their conflicted feelings, their anxiety, their humanity.

It is worth pondering, from time to time, how open we really are to the invitation and the challenge that Jesus holds out to us, because when we talk about being his disciples, about modeling our lives on his ways, we need to remember that more often than not Jesus will come to us in ways that unsettle, that push us beyond our comfort zones. He will come to us in the beauty and joy of our worship, for sure, in the stillness and quiet of prayer, in hope and consolation, but he will also come to us in what seems a morally ambiguous issue at work, an ethical conundrum in the family, a troubling conversation, a challenge and affront to our worldview and affiliations. He will come pointing out our hypocrisy, our idols, and goodness knows the temptation will be to look away, to turn aside, to cover our ears, to defer to convention, to leave it to the experts.

Jesus doesn’t do this because he enjoys making people miserable. After all, he is in his person the fullness of God – a God of love and compassion, of mercy and grace, of wonder and
delight. No. Jesus does this to wake us up to the fullness of life before us. To the freedom before us. And in order to live into that fullness of life, that fearsome freedom, he calls us to live from our hearts, from which both our light and darkness come. Jesus was not again the law. He loved the law. He sought to walk fully in God’s ways, to fulfill the law, to accomplish its purposes in his life and in the world. But he put pastoral considerations above legal ones, people above principles, always and over and over again. He chose healing over strict adherence to the Sabbath. He chose inclusion at his table over an obsession with hand-washing. He chose kinship with the sick and the crazy and the dying over his own purity. And then, when he had been killed for holding to these commitments, he handed his ministry on to his followers - to the Church - and called us to do the same.

At some point in the process, those preparing for ordination in the Episcopal Church and most other mainline protestant denominations have to complete a unit of Clinical Pastoral Education, or “C.P.E.,” often by serving as a hospital chaplain for about four months. At least that is how I did it, and my friend, Mary, too. A few weeks into her CPE, Mary and I had breakfast one morning. Having gone through this just a year before, I knew the intensity of what she was experiencing. Mary told me that the night before she had been called to Labor and Delivery, which was unusual because this is generally the ward to which chaplains retreat when we are overwhelmed by all the hurt and sadness and injustice of the world, overwhelmed by our helplessness, by how small our prayers seem to be in the face of cancer and motorcycle accidents and drug overdoses. Labor and Delivery was the one place in the hospital where happy things routinely happened. Which means being called there was never good.

Mary went to the room whose number showed on her pager and walked into the wake of a completely unexpected stillbirth, the parents in shock - utterly grief-stricken. The woman held a small blanket to her chest, crying, unable and uninterested in letting go of her baby, as Mary introduced herself. “I’m so glad you’re here,” the mother choked. “You have to baptize her.” Mary stopped breathing. As lay people serving as chaplains, we were all trained in how to baptize babies born with serious health issues in an emergency, but as a soon to be Episcopal priest, Mary also knew that baptism is for the living. (Like surgery.) There is no theologically sound reason for baptizing someone who has already died, because they are already with God, already enjoying the fullness of God’s embrace.
But instead of saying, “No,” Mary asked if she could sit down, and she talked with the couple for a long time, trying to understand why they would even ask for such a thing. Mary was clearly disturbed as she told me this story, and she paused for a long time. “What did you do?” I asked. “I baptized her,” she said. I’m sure, in that moment, I felt some of what she had felt at first: alarm, distress, confusion. Washing hands to cleanse defilement seems like a faraway concern, but washing heads to cleanse sin – that I have feelings about. And this was a definite no-no. And yet, I knew Mary to be a deeply compassionate, deeply faithful, deeply committed person.

She continued, “I tried to explain to them … to help them understand … but they needed to know that their baby was with God, and nothing I said was going to convince them of that, even though I knew it with everything in me. This was the only way to show them. And they needed that. They needed to know how much God loved them all. So I did it.” That decision cost Mary deeply, not because anyone ever reprimanded her for it, but because it forced her to wrestle so much with her heart, her faith, and with the rules of the Church she intended to give her life to. It was a hard and uncomfortable choice, but she has never regretted it, because in that moment she put the pastoral needs of God’s people before everything else; she prayed and asked for God’s guidance and had to trust God would be with her in the grey, the muddle, the wilderness.

It seems to me that in that moment she had a choice: to following God right into the muck and messiness of the lives of this family, or to turn from the terrible scene, to wall it off, to manage the situation - the grief, the anxiety – with a stock answer. I’m not saying that Mary’s would be the right choice in every situation, or Dr. Laub’s, for that matter, but I do believe that at some point or another Jesus will call each and every one of us to be a pioneer, too. To push the envelope. To prayerfully challenge our beloved customs and conventions. To trust that God is still speaking, still guiding, still troubling, still surprising us. And perhaps when that moment comes, we’ll realize that the hard and harried road can also lead to holy ground. Amen.