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If someone strikes you on the right cheek, turn to him the other also. And if someone wants to sue you and take your tunic, let him have your cloak as well. If someone forces you to go one mile, go with him two miles. Give to the one who asks you, and do not turn away from the one who wants to borrow from you.—Mt 5:39-42

Dear Friends in Christ,

It is hard to believe that we have now been back in the US for ten months. Kenya is still so fresh but yet so distant. We have settled in to our “in-between” life of home assignment—one foot here, and one foot in Africa.

Matthew is being enjoyed by both sets of grandparents, and we are happy to have the opportunity to share his energy! We have settled into a new church home here in Dallas (Church of the Holy Communion, of the Reformed Episcopal Church) while keeping in touch with other church families around the country. I have undertaken distance education courses through Gordon-Conwell Theological Seminary in Massachusetts, an experience which has thus far been rich and rewarding.

I think most of you know that we are expecting our second child. Amanda is due at any moment now. Matthew eagerly awaits the arrival of his playmate.

We have continued to remain involved with the AIDSRelief ministry in Kijabe. I have been working with Kenneth Miriti to develop further the training curriculum. Our generous friends have assisted with the growth of the HIV clinic in Naivasha.

HIV care in the US is a completely different ballgame. Here, the “solutions” to problems are technological: Patients decide not to take their medicines, so we will develop new ones! No such luxury of multiple cocktails is available in Africa, where the approach must involve a collective response from the community. The hyper-individualism of American life makes such community care un-thinkable. I was told that the hospital in Dallas will not provide visiting nurses because the malpractice costs are too high!

Still, there are moments of grace amidst the social decay and hectic pace which characterize an American HIV clinic. In caring for Robert I learned—yet again—the danger of rash generalizations. I first met him in the acute care area. He was wasted away from uncontrolled diarrhea. His skin was in terrible shape and his hair was falling out. Hostile and seemingly on death’s doorstep, his immune system virtually non-functional, Robert was taking a multitude of medicines, many of them incorrectly. I judgmentally thought, “Here is another urban drug user who won’t follow directions.”

I told him to stop this and that, but to continue these and those, and then return the following week—and he did so. But on the day he arrived I was busy trying to perform a lumbar puncture (on a patient from Africa, no less). This procedure proved difficult and

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dragged on and on, meaning by the time I saw Robert he had waited in the room over two hours. He was not happy.

“Who are you to make me wait this long? Why can’t you come in here and tell me what is taking so long?” Fair questions, but having worked continuously all morning I did not take kindly to the tone, and I felt like I had been slapped in the face. My gut response was to respond in kind, with hostility and acrimony. I paused, and took a moment to ask myself what Christ would have me do. The Sermon on the Mount is not easy. I knew I must swallow my pride. I wish I could say I always do so, but that would be untrue.

“Robert, I am really sorry. I was stuck in a procedure. But you are right, I should have come in to tell you what was happening. I understand your frustration. Can I make it up to you?” He was dumbstruck. I could see the frustration and anger melting away. We proceeded with the visit, talked about his HIV infection, his need for a new regimen of drugs, and what he should do to become healthy. I made a simple chart of his medicines, just like in Kenya. He was amazed. “Can I keep this?” he asked.

That was five months ago. Today, Robert has an undetectable viral load, his skin has cleared up and his hair has come back. He has gained weight and is back to an active (and so far, sober) life. He now treats me with a great deal of respect and follows all of my recommendations. Liz Wanjiru (a Kikuyu who hails from near Kijabe!), one of the nurses in the clinic, said to me the other day, “Wow! Robert looks really good.”

One may stand perplexed by some thought, especially seeing men’s sin, asking oneself: “Shall I take it by force, or by humble love?” Always resolve to take it by humble love. If you so resolve once and for all, you will be able to overcome the whole world. A loving humility is a terrible power, the most powerful of all...--Zosima, The Brothers Karamazov

The ultimate example of loving humility is Jesus Christ. I am ashamed how often I fail to live up to His teachings in the Sermon on the Mount. But when we actually manage to do so, the effects are extraordinary...

We would request prayer for the following:

- Safety and health for Amanda and the baby
- Continued physical rest and spiritual rejuvenation for our family
- Resources to expand the clinic complex in Naivasha
- Strength and encouragement for our friends in Kijabe

Grace and Peace,

Jon, Amanda and Matthew Fielder