

THE CHURCH OF THE RESURRECTION: ENACTING MIRACLES

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Acts 9:36-43

Today is Mother's Day. And because it is Mother's Day, I would like to begin by talking about one particular woman who quite possibly is responsible for the lives of more children than any other woman in history. This woman is Dr. Virginia Apgar. She was born in 1909 in Westfield, New Jersey. She died in 1974 at the age of 65. Her father was a businessman but also an amateur scientist. It is believed that it was from him that she developed a lifelong passion for science and medicine.

Apgar graduated from Mount Holyoke College in 1929 with the hope of becoming a physician. She would liked to have attended Harvard Medical School, but Harvard did not yet allow women. She was, however, accepted at the Columbia University College of Physicians and Surgeons. She was 1 of 9 women in a class of 90. She graduated 4th in her class.

Apgar discovered that she loved surgery and began a two-year surgical internship at Columbia. She performed brilliantly. However, after just a year, she switched from surgery to anesthesia. Why? The reason is unknown, but it is likely due to gender discrimination.

Apgar moved to Wisconsin to train in anesthesia. In 1938 she returned to Columbia to become the Director of the Division of Anesthesia. It sounds impressive but this department had no funding or staff. Over time, Apgar built up the department and became a leader in her field. In 1952, Apgar was named a full professor at Columbia—the first woman to achieve this rank. It was around this time that she shifted her focus to the little-known practice of obstetric anesthesia—providing pain relief for women during childbirth.

In the delivery room, Apgar recognized a problem. While overall infant mortality rates had been dropping through the years, infant deaths in the delivery room remained the same. Doctors didn't know what to do with babies who were malformed or too small or just blue and not breathing well. All too frequently, these infants were listed as stillborn and placed out of sight and left to die. There was no procedure to evaluate newborns.

Apgar had the idea of developing a system to determine a child's well-being in the moments immediately after birth. In 1953, she published a paper titled "A proposal for a new method of a valuation of the newborn infant." There was initial resistance to her system, but, in time, it gained traction and today is used worldwide.

The idea was simple. At one minute after birth, the infant would be scored on 5 physical criteria. Each criterion would be given a score of 0, 1, or 2. Top score was 10, lowest was zero. The five criteria are appearance, pulse, grimace, activity, and respiration.

Appearance refers to skin color—is the child splotchy or pale, or do they have good color.

Pulse refers to heart rate.

Grimace measures the child's response to stimulation.

Activity looks at the child's muscle tone—are they floppy or are they are they resistant.

And **respiration** looks at how well the child is breathing.

The intent of this system is to be a quick, simple, easily memorized diagnostic tool. It is known as the Apgar score because it was developed by Dr. Apgar, but also because the first letter of each criteria spells APGAR—appearance, pulse, grimace, activity, and respiration. Clearly, the doctor had a sense of humor.

Dr. Apgar dedicated the rest of her life to developing the APGAR score and delivering thousands of babies. Apgar and others have used the score to collect massive amounts of valuable data on births which has changed many aspects of the birthing procedures. Because of Virginia Apgar, an untold number of infants who likely would have died have made the transition from womb to life. As one physician put it, "Every baby born in a modern hospital anywhere in the world is looked at first through the eyes of Virginia Apgar."¹

Dr. Apgar has been recognized for her work with numerous awards and citations. In 1994, a postage stamp was released in her honor.

Today, in the Book of Acts, we find a story about another woman who was highly respected in her day. This woman was Tabitha. She lived in the city of Joppa on the coast of Judea northwest of Jerusalem. Tabatha was a Christian and is identified in Acts as a *disciple*. Specifically, the Greek word is *mathetria* which means 'female disciple.' Tabitha is the only person in the New Testament identified as a *mathetria*. She is unique.

As we read, Tabitha *was devoted to good works and acts of charity*. Charity here literally is 'almsgiving.' The English translation here isn't clear. What we don't read is that Tabitha's good works and almsgiving were things that she did continually. It was her life.

Tabatha died and her friends prepared her body and placed it in an upstairs room. Now, Peter the apostle, just happened to be in the town of Lydda, which is

¹ <https://web.archive.org/web/20030225022830/http://web.mit.edu/invent/iow/apgar.html>

only 12 miles from Joppa. The Christian believers in Joppa send two men to locate Peter and request that he come with them back to Joppa.

Now, why did they send for Peter? We don't know. Tabitha was clearly dead. Did they expect a resurrection? Unlikely. I simply believe that Tabitha was greatly loved and admired in the Christian community and that her friends thought it appropriate that a spiritual leader like Peter should acknowledge her death as well as her life.

When Peter arrives, he is taken to the room where Tabitha lay. She is surrounded by grieving women—widows—and they show Peter the cloaks and tunics and other items of clothing that Tabitha had sewn for them.

Peter asks everyone to step outside. He kneels down and he prays. Then he addresses the body saying, *Tabitha, get up*. This is not a request. Peter is not begging. It is a command. Tabitha opens her eyes and sits up. Peter calls in those waiting outside and shows them that Tabitha is alive. People hear about this and they believe in the Lord.

What Peter does is clearly a miracle. He raises Tabitha from the dead. It is truly an extraordinary event. Only a very few people in scripture are brought back to life. Normally, the dead stay dead.

This miracle, like others in the gospels, are signs. They are demonstrations of God's power. People see these signs and are led to believe; they are called to Christ. Miracles are reminders that God is with us. One scholar calls miracles “fuel for our faith.” Miracles are the gas in our tanks.

Our New Testament is full of miracles—Jesus healing the dead, the blind, the lame, the sick. The disciples themselves also performed miracles. Peter comes to Joppa from Lydda where he had just healed Aeneas, a paralyzed man who had been bedridden for eight years.

Today's sermon is the third in a four-part series called *The Church of the Resurrection*—a series guided by stories from the Book of Acts. These stories push us to ask questions about what it means to be a church—specifically, are we a church that reflects Jesus' resurrection? Are we a place of wonder, of glory? Are we different?

In the first sermon, we looked at how, as a church, we confess Christ in all that we do. We tell the world who Jesus is and of our belief in him as savior. In the second sermon we looked at how we, as a church, can embrace the lost. We can reach out to those who have strayed and offer them safe shelter.

Today, in the story of the raising of Tabitha, we can see that *The Church of the Resurrection* is a church that *Enacts Miracles*. Now, as a church, we may find this

daunting. These miracles seem a bit out of our league. When is the last time any of us raised the dead or fed thousands with a few pieces of fish? Yes, our annual fish fry is next week, and may believe in miracles, but we are still purchasing cartons of fish.

But I think it is helpful to point out that there are two types of miracles—big miracles and small miracles. Big miracles are just that—large, splashy, attention getting. But small miracles are just as valuable although they largely go unnoticed. They are the little things we do in the name of Christ for others.

We find evidence of these small miracles in today's reading. Tabitha was known and loved for her good deeds and her almsgiving. She made clothes for widows. These are little miracles. Now, if you were to ask Tabitha if a tunic is a miracle, she would say no. It is just something she likes to do. But, for a widow desperately in need of a tunic—a garment that can mean the difference between survival and death—then receiving one would be a miracle. The cans of food that we collect are not miracles to us, but to a hungry family, they may well be. For someone with no place to stay on a cold night, the shelter of our church Annex can look an awful lot like a miracle. The dollars you give are little green miracles that we send out into the world. Each time a child is evaluated with Dr. Apgar's test, it is a miracle.

Our job as a resurrected church is to enact miracles. We are to be like the farmer in the parable that throws out seeds. Some seeds land on the rocks, some land in the weeds, some are eaten by birds, but some do fall on good soil, and they prosper. These seeds are little miracles. Our job is to spread the seeds. It is not our job to judge where they land. Sometimes the seeds we cast won't take root for years, long after we've forgotten about them. We will never know. But we are to be like Tabitha continually doing good works and acts of charity. The little miracles may be small, but they do add up. There is a correlation—I don't know what it is—between Tabitha's lifetime of little miracles and Peter's one great miracle of raising her to life.

As a church, we are called to be disciples who confess Christ, who embrace those who may be lost, who enact miracles in all their forms. When we do this, we proclaim God to the World. We are the resurrection.

Finally, on this Mother's Day, let us give thanks for those who birthed us and nourished us, for those who guided us through our rebellious years and picked us up when we fell. Our lives today are the sum of those miracles.