Whether you attract kids like a modern-day Pied Piper or you avoid the "rug rats" whenever possible, you must acknowledge children's great potential—as teachers. Too often as parents (potential or present), teachers, and college students we adults view children only as learners, eager to reap the benefits of our vast experience; how much we could teach a second grader about life! But children, despite their "lack of experience," can also teach us through their examples of innocence, enthusiasm, and fascination with life's small wonders. We are even commanded to imitate childlike behavior when Jesus points to children as models for His adult followers: "except you become as little children, you can never enter the Kingdom of heaven."

So read these pages devoted to children and all they have to teach us. Learn about education from their schools, about life from their birth, about love from their love for parents of any color, and about overcoming fear from their literature. Read and realize: children are not only pliable minds to be molded and taught; they are not only our students. Children are also our textbooks and teachers if we will look and listen.

—Mary Boerman
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This month's Dialogue cover was drawn by Jonathan VanderBrug, a 12-year-old student at Oakdale Christian School.
Using the World as a Classroom

by Patricia Westerhof

Because education is so important in our society, different schools of thought have established very different types of educational institutions. Today, parents can choose from a wide variety of schools: public schools, church-affiliated schools, Montessori schools, and foreign-language schools, to name a few. Some of these options are more popular than others, and some of the options are popular only with certain groups. One option, which draws members from many groups, yet which most people remain leery of, is home-schooling. John Cox, a visiting Professor of English from Hope College, and his wife, Karen, are educating their three children at home and have found it to be an exciting, legitimate alternative.

John and Karen began educating their children at home when they left British Columbia, where their two school-age children attended a small one-room school directed by Karen. They moved to Cambridge, Massachusetts, where it wasn’t financially feasible to send the children to the sort of school to which they were accustomed. The public schools in Cambridge had a disappointing reputation, so, as Karen explains, “We just suddenly decided in August that we would use the city as our classroom for that year.” Their plan worked so well that they have continued with it for five-and-a-half years now.

Although the Coxes have chosen not to use traditional schools, they do not disapprove of the educational institutions available. In fact, they both have been involved in them for many years. Karen, a certified Montessori teacher, has taught at the pre-school, first grade, third grade, and high-school levels. John has taught not only college and university students but also seventh-graders. “I always knew that I would choose an alternate setting over a traditional school,” states Karen. A major alternative in Western Michigan is the Christian school movement. “We’re very glad for people who have their children in Christian schools. But I do think that it’s not inconsistent with the Christian school ideal for us to do what we are doing because the statements that back up the Christian school movement specify that the ultimate responsibility for education lies with the parents.”

Possibly 10,000 people in the United States are home schoolers; obviously there must be advantages to educating at home. John and Karen believe one advantage to be that children of different ages are together. “We’ve always been interested in more of a one-room school-house situation. One of our main principles is that people learn in different ways and at different ages. Maybe a third-grader is really at ninth-grade reading level but at a third-grade math level; she can do both things in our situation,” Karen explains. “Another Ad-

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In kindergarten, Pat Westerhof was sent to the principal’s office because she stuck her tongue out at a car after it honked at her while she was walking down the middle of the street. The driver of the car was the principal.
The excitement of a two-year-old has about the world doesn't die when the child is four or five—not naturally anyway. We have discovered that the child’s interest can and does continue if a typical day includes what the child is interested in. Our children find out about things just the way a very young child does. There are several reasons for that, not the least of them being that we have been around to carry that interest through. We don’t say to our ten-year-old when he is interested in military history, ‘Well, you wouldn’t understand that right now; wait three or four years,’ because in three or four years he’s probably not going to be interested in it anymore.” The idea is, then, to feed the children’s interests as thoroughly and quickly as possible. If a child says she wishes she knew what the Japanese language looks like, the parents try to show it to her. And if the parents don’t know, they try to find out. “That way the children have the notion that you can just go on finding out about things endlessly,” John concludes.

Home-schooling is not the best term for what the Cox family is doing. “I think some people fear that this is a little family huddled around its wood stove, with the parents trying to keep their kids pure and untouched by the rest of the world,” Karen muses. In fact, however, the Cox children do not stay at home; they probably have more contact with the world than children in traditional schools. Besides being involved in a choir and having friends from church and the neighborhood, the children meet and form relationships with people they meet while doing their projects. “We try to use the world as our classroom,” explains Karen. If one of the children expresses interest in blacksmithing, John and Karen try to take him/her to a blacksmith. One of the children “apprenticed” with a potter for a time. The Coxs have friends who have started their own dairy, and the children spend time with them. Thus, the children learn things by being actively involved in them and meet a variety of people along the way.

Obviously, not every family can or should be home-schoolers. Educating the children at home requires a great deal of time, energy, and creativity. In most cases, one of the parents gives up a full-time career outside the home. Home education is expensive because the parents must purchase their own materials and supplies, as well as pay taxes for public schools. However, home education is a legitimate alternative which is working for many families. The parents know their child’s needs and interests and can respond to them, which is something a teacher of twenty or thirty students probably can’t do. A child-centered education where the child learns in the context of the world around him is something those of us who went through traditional schools can envy.
Love Across Racial Barriers

compiled by Ruth McBurney

Dialogue, in the person of Ruth McBurney, interviewed Neil Molenaar and his fifteen-year-old adopted Black daughter, Ruth Ann. (Neil, however, did most of the actual interviewing.) Both Molenaars spoke of their experience with transracial adoption.

Dialogue: How did you decide to adopt transracially?

Neil: When we first started thinking about adoption, we weren't thinking along those lines at all. We had three children already, all boys, and my wife and I decided we wanted a girl to balance things out. It looked the only way we were going to get a girl would be to adopt one. As we started looking into adoption we heard a lot about this biracial adoption. I wasn't too sure about it, but my wife was real excited so we went to some seminars and classes together, and, as you can see, ended up deciding that this was for us.

We were living in Washington at the time and when we adopted, Ruth Ann was the only Black child in a small all-White town.

D: What was the reaction of the community?

Neil: Well, I think we took them by surprise. There was one family that called us and said, "You know, we've appreciated having your family here because you're so open to trying new things, but this time you've gone too far." But in the long run, I think we won them over.

We were grocery shopping, and it was fun to watch people meet her. They were always interested in her hair; you know, they always wanted to feel it. Ruth Ann was always very personable. She always charmed people. I think it was good for them to be able to interact with a little Black girl like that.

Then we moved to Grand Rapids when Ruth was two or three... Ruth Ann: I was four, dad.

Neil: ... when she was four, and we found that several other families had done the same thing [adopted Black kids]. So there were other kids like her, and we sent our kids to an integrated school, so I think that made things easier, right, Ruth Ann?

Ruth Ann: I don't know, I guess... I really haven't had any problems. Most of my friends now are White because most of my high school is White. They accept me because of my personality—you know, 'cause I'm so crazy. They'll dare me to do anything and I'll do it. I'll try anything.

Neil: But that's not because you're Black.

Ruth Ann: No, they don't think of me as different. I'm one of their friends. I fit in because I'm so charming and, of course, cute.

Neil: How about other Black kids? Do they treat you differently?

Ruth Ann: Not really. The only thing they notice is the accent. Last week we were at a gymnastics meet and my friends introduced me to some Black girls from the other team and I said something to them, "Hi, nice to meet you," or something, and they said to my friend, "Where'd she come from?" They figured I was probably pretty rich because richer Black families don't have the same accent, but they never guessed that I have a White family. And that's really the only way I'm different is the accent and maybe the way I dress.

It's funny sometimes when other Black kids start talking to me because they assume I know the accent, but sometimes I can't even understand them. They start saying all this stuff and I'm like, "What?!"

Neil: But it doesn't bother them that you have White parents?

Ruth Ann: Well, I always warn friends before I bring them home. I say, "I've got to warn you about one thing: My parents are White." Otherwise they might be pretty surprised. But it never bothers them.

D: What about church? Do you feel that the church has responded well?

Neil: The church we go to [Church of the Servant] is very accepting.

Ruth Ann: Yeah, no problem.

Neil: You know, next Sunday Ruth is making profession of faith, and by doing that she's saying that she accepts the beliefs and values
she's saying that she wants to become more a part of the community here.

D: In Grand Rapids there is a lot of variety in Christian Reformed churches and ours [C.O.S.] isn't typical. Do you think that when you leave home you will feel at ease in a typical all-White Christian Reformed congregation?

Ruth Ann: It all depends on what they're like. Once when we were on vacation we went to a Christian Reformed church. It was a straight church, you know, one of those churches with the three-piece suits and fancy dresses. I walked in by myself and I wasn't very dressed up. I think I had on dress pants or something and I got looks like "Where did you come from?" I felt out of place.

D: Because they were all White or because of the dress?

Ruth Ann: I don't know. Our church is mostly White and that's no problem because I fit in there. It's not the color really. It just depends on what they're like.

Neil: We've found people for the most part very open to our family.

Ruth Ann: Sometimes people get confused, like once my brother Tim was talking to one of his friends and he said something about having a little Black sister and his friend said, "Wait a minute; you have a little Black sister?"

And Tim said, "yes."

"But that's impossible. You're White."

"Right."

"And your parents are White."

"Right."

"So how can you have a Black sister?"

"She's ADOPTED."

Neil: And when we go out together, say to eat or something, we often confuse the waitresses.

Ruth Ann: Yeah, like this one time when I went out to lunch with my mom the waitress came to our table and said, "Will this be separate checks, ladies?" And I said, "I don't know. What do you think, Mom? Shall we get separate checks?" She was so embarrassed. It was really funny.

Neil: I think the next few years should prove to be interesting.

"Any family that can love a child and care for a child should be able to adopt a child no matter what race. . . ."

Ann will turning sixteen in a few months and her dating years will be starting soon . . .

Ruth Ann: They already have . . .

Neil: . . . and it will be interesting to see who she decides to date and who she decides to settle down with eventually and marry.

Ruth Ann: Well, give me a little time, dad. I'm not quite ready for that, yet. But it doesn't matter to me if he's Black or White or Oriental or whatever. If I like him (and he's cute), I'll date him. Simple.

D: And if you decide to move away from Grand Rapids to another city, will you look for a Black or White community to live in?

Ruth Ann: Probably White.

D: Why?

Ruth Ann: Because of the type of area. I wouldn't want to live in a downtown area because it would be dangerous, and that's where most Black neighborhoods are. I'd want to live in the suburbs.

Neil: Then would you look for Black friends or White friends?

Ruth Ann: I'll look for all kinds of friends. If someone's nice to me and wants to be my friend, she's my friend, but if someone wants trouble—stay away.

Neil: Well, what else could we tell her? Do you think it's a good idea to let families keep doing this [adopting transracially]?

Ruth Ann: Sure. Any family that can love a child and care for a child should be able to adopt a child no matter what race the family or the baby is.

D: So you don't think there are any extra problems unique to transracial adoption?

Ruth Ann: What could the problems be? Sure, people could call me "honkey" or "bastard" but I know that I'm not. It would just be showing their own insecurity. If a family wants to take care of a child and can take care of that child, I think they should be allowed to do it, regardless of color.

Neil: We've had a real good experience with this, as you can see. We think it's just great that we've been able to be a big influence in her life, and we've really enjoyed her as a part of our family. We like to think of it as our journey together and it's been thoroughly enjoyable.
Growing Up in the Mission Fields

by Maarten Pereboom

Do American children brought up outside Canada or the United States miss out in some way? Do they miss out on educational opportunities available to their peers back home? Are they socially deprived? Do they experience culture shock when they arrive back in America?

I spoke recently with two missionary families, and they answer "no" to all of these questions. For the Dekkers, who lived in Central America with their daughters for four years, and for the Smits, who lived in Japan for about seventeen years and had three children during that time, the experience of raising children and growing up in a foreign country was a positive one. Living in a culture different from that in which their parents grew up seems to bring about a kind of "international awareness" that can only benefit people in a world where so much today depends upon mutual understanding.

Jim and Rose Dekker lived in San Jose, Costa Rica, from 1978 to 1979 and in Guatemala City, Guatemala, from 1979 until September 1982, when they were forced to flee for their safety. The Dekkers worked with the Indians of Guatemala, who suffer under a burden of poverty and oppression. It was because of this missionary work that Jim became the target of a kidnapping attempt; the whole family escaped after the police picked up the wrong man.

Yet the family did not live in great danger until near the end, and Rose believes that the children's experience of having observed poverty and oppression did not have a palling effect upon them. On the contrary, she believes that it made them aware of a problem which all people need to recognize.

Of course one of Rose and Jim's main concerns was education. As Erica and Anna approached school age, their parents had to decide whether they wanted their children to be educated in English or Spanish. Erica went to an English-speaking kindergarten in San Jose, but when Anna started school in Guatemala, Jim and Rose decided to send both Anna and Erica to a Spanish school. The Dekker parents did this for a number of reasons: bilingualism can be a good thing in and of itself; in addition to that, they believed that the children needed to be able to relate to the culture in which they were living. By learning Spanish, the girls were able to participate in the church and interact with the Spanish-speaking children there.

The Spanish school was a private one; the quality of education there was higher than in the public schools, which did not meet the children's academic needs. Erica and Anna soon became fluent in Spanish. Of course they were different from the other students—they were the only blondes in the school—but they had no trouble making friends. The teachers treated them well, and the school was only two blocks away from home, an important consideration in a place as volatile as Guatemala.

On March 23, 1982, Rose went to pick up Erica and Anna from school. The children were leaving a little earlier than usual. When Rose asked about the commotion, she found out that a coup had taken place. The coup brought an army officer and "born-again Christian," Efrain Rios Montt, to power. Ironically, it was during his administration that the Dekkers had to flee back to the United States.

One advantage of the Dekkers being back in Grand Rapids is that the children can see their grandparents, aunts, uncles, and cousins. In Guatemala Jim and Rose made sure that they spent a lot of time with the children to make up for the absence of an extended family.

A Day in the Life

by Joel Koedoot

Living in a foreign country can have its difficulties, but it can also have its advantages and interesting points. The children of those who live in a foreign country, however, usually see neither the special problems nor the advantages of living where they do; they are simply too busy growing up. Having myself grown up in Japan as the child of CRC missionaries, I know that I always considered my childhood rather typical, perhaps because I never thought about it much.

The way I travelled to school, for example, was probably anything but typical. From first grade on, instead of walking a few blocks or hopping on a yellow school bus, I depended on the magnificent Tokyo public transportation system to take me the one-and-a-half hours to school. I must admit, though, that I cared little about magnificence and inefficiency of the Japanese National Railways and the millions of workers it punctually moved every day. Rather, I thought more about how I would entertain myself during my daily three hours of travel, including six transfers and often much crowding.

In the second grade, I and some dozen of my friends from school, who were in the same condition as I, thought that we had our entertainment problem solved.

When he was two, Maarten Pereboom greeted his newborn sister Jodie with "nice puppy."
although in missionary communities friendships among families tend to be very close as well.

But the Dekkers are a missionary family, and they anxiously await visas that will allow them to work in Venezuela. The children, too, realize that they will be leaving the United States, but they seem to share their parents’ missionary zeal—“We want to get to Venezuela,” says Erica—and a strong ability to adapt to new situations.

The Smits lived in Japan on and off for seventeen years. Though never slated as candidates for kidnapping, they had to battle traffic in the affluent modern city of Yokohama in order to get Nancy, Houston, and Knighten to school on time.

Japan became the children’s home. They lived in one house in Yokohama suburb for twelve years. Parents Harvey and Edna decided to send their children to a nearby Japanese school; the Japanese educational system, unlike the Guatemalan, is highly developed. In Japanese schools, the children were exposed to a totally different way of thinking. They did not go to English school until junior high, when they went to the Yokohama International School, with students from twenty-four countries.

Edna, a teacher by profession, taught the children to read English at home, although she admits that at one point they knew the Bible better in Japanese than they did in English. This was probably also due to the fact that the Smits’ work in the church was, of course, done in Japanese. As with the Dekkers, the Smit children were better able to participate in the church once they knew Japanese.

The children thus grew up among the Japanese. In kindergarten and elementary school they were the only Americans in the school. They played with Japanese friends, and the mothers in the neighborhood kept a special eye out for them. The Smit children were respected and admired but not placed on a pedestal above Japanese children. The Japanese are proud of their culture as this comment on one of Nancy’s report cards illustrates: “Nancy does very well considering she is culturally deprived and has an illiterate mother.”

Although the Smits had close cultural ties with the Japanese, they also remained part of the missionary community, which was also like an extended family for them. Edna believes that the children who grow up in these communities begin to “think more internationally.” These young people later on form the bridge of international relations, because they have learned several different cultures. Eighty-five percent of “third-culture children”—children who grow up in a culture different from that of their parents—later on again become part of this international community. The Smits themselves are an illustration of this phenomenon. Harvey grew up in Shanghai, and Nancy is going to teach English in Japan next year.

The Smits have no regrets about their years in Japan. Academically, the children did not suffer at all. Nancy, Houston, and Knighten realized when they came back to the United States that America’s culture was different from Japan’s, but adjusting to new situations is something they and most other people have to do all their lives. They now have ties to both Japan and the United States.

Growing up in a foreign country, then, is perhaps not as difficult as one might think, especially when parents are sensitive to their children’s special needs. The Smits and the Dekkers seem to have made the most of the experience, helping their children to benefit from exposure to and involvement in a culture different from their own.
Hospital Literature: Getting Better with Books

by Karen Hoogeboom

"Children's literature is a major field," says Charlotte Otten, professor of English and instructor of English 325, Children's Literature. No longer do scholars scoff at "kiddie lit"; instead, many are realizing the importance of the messages conveyed by the books intended for a young audience. Because books have a large influence on young readers, the situations and stereotypes which these books relate are very important; for a child, a book situation or person is a real situation.

Karen Hoogeboom wrote about this relationship of books to life in a paper for her class in Children's Literature. Karen centers on the children's books. Her work on this subject follows.

Children going to the hospital for the first time have specific fears regarding their stay. Some of these fears are dependent on the age of the patient, but most are generally felt by all children. Probably the most basic fear is that of what will happen to them in the hospital. They want to know if they will be hurt, if they will be alone, how long they will have to stay, and if they are going to die there. For some children, the first contact with the hospital is having an elderly relative enter with a terminal disease and never come home (Newsweek, 1972). To them the hospital may represent the last stop before death. Children three years old and under may feel as though they are being deserted or punished by their parents. At ages four to six the child fears damage to his body: he is afraid he might not be able to run, or ride his bike, or look like he did before. There is an intense fear of losing blood at this age. Fears of dying because of a simple blood test are not uncommon. Older children, ages five to eight, may feel a loss of control over their lives since they are fed, washed, watched, and helped constantly (Nolen, 1980). All of these concerns produce anxiety in the child.

Adults also have their worries. Parents sometimes feel guilty about their child's illness, thinking that perhaps with a better parental care, their child might not have to be in the hospital. Parents fear procedures they do not understand, especially if the procedure will cause their child to feel pain. Feeling hopelessly inadequate to answer their child's questions, while struggling with their own, and wishing they could take the child's place only adds to parental anxiety. The siblings often react to the hospitalization with a mixture of sadness for and resentment toward their brother/sister who has to receive so much attention.

If these fears are not expressed or attended to, the child and family may have a traumatic experience in the hospital whether or not the actual physical problem is serious. More and more, physicians and nurses are expressing concern about the emotional effects of hospitalization on children and are recommending that children be well-prepared for their hospital experience.

Although the concept of preparing children mentally and emotionally for the hospital experience has been in existence for a number of years, it has only received quite a bit of publicity since the early 1970's to the present. Lee Salk, a writer of a medical column in McCall's magazine, states, "The more you can eliminate the uncertainties of the hospital experience and provide emotional support for your child during the difficult time, the less will be his or her anxiety" (November 1978, p. 132). Children will be anxious about the new things which happen to them but this anxiety can be channeled either as nervous excitement or as paralyzing fear. When the child is not sure of what will be happening to him, his imagination runs wild. The hospital atmosphere, with its countless uniformed employees, wire-and-tube-sprouting electrical equipment, and pain-inflicting procedures, certainly is conducive to frightening fantasies. By orienting the child (and his parents) beforehand to the people, equipment, and procedures of the hospital, the nurse can diminish many of these fears, turning the experience into a positive, rather exciting memory.

To be prepared, the child needs detailed information as well as opportunities to work out his feelings and fears about going to the hospital. Many excellent resource books are available to give the child the information which not only brings knowledge, but stimulates expression of feelings as well.
Books, especially illustrated ones, are a real asset to the parent or health care provider. Nurses should have some knowledge of titles of books to suggest to the parents before they bring their child to the hospital. Some books, written as stories, follow a child through a simple operation, such as an ophthalmectomy, covering the basic procedure and standard questions with which children may be concerned. Others are more informational books describing specific people and their roles, objects and their uses, and procedures, both their purposes and implementation. Some books deal specifically with feelings expressed (or not expressed) by both the child and the parents. Others are coloring, punch-out, pop-up, etc., books which the child can participate in as well as read.

All good children's books need intensity, character, style, sincerity, ruth, and creativity. But a preparatory book has demands beyond these. Important criteria for a good hospital preparatory book include accurate information, some discussion of the unpleasant realities of a hospital experience, some surfacing of the emotions of the child as well as, perhaps, the parents, and a positive attitude over all. Every book should have some combination of these four attributes; of course, some books (as listed above) may specifically deal with one aspect more than another.

To properly prepare a child, a book must give him accurate information. Books which give lists of descriptions of things, people, procedures, emotions, etc., without following a story line are examples of books loaded only with information. However, all books dealing with the subject must present their story based on facts. To have accurate information, the book must be up to date. With technology adding more equipment to the medical front and research devising new tests and procedures, this criterion is not easily accomplished. Some items, like bedpans, have remained practically unchanged over the years, but computerized axial tomography machines, more commonly known as CAT scanners, are relatively new additions to the list of diagnostic aids. The author must be aware of new developments in medical machinery and decide whether or not this reader may be exposed to them or have questions about them.

Not only should information about equipment be given, but descriptions of procedures using the equipment are very important also. For example, a person having a CAT scan needs to know that he will by lying down on a table with his head raised and that the part of the body being X-rayed will be placed through a circular opening of the machine. Of course, a photograph or some type of illustration is almost essential when describing detailed apparatuses or procedures such as this. An excellent example of such an informational book, complete with back and white photographs, is The Hospital Book by James Howe (1981).

The many people seen in a hospital are important to know about too. The days of a patient seeing a few nurses and doctors busily doing everything in the hospital have long been over. Within the past fifteen years, authors have begun including in their books the variety of health care workers involved directly and indirectly with the patient. "Why Am I Going to the Hospital?" (1981) includes a discussion of nurse aides, X-ray technicians, clerks, pharmacists, childlife volunteers, and descriptions of doctors including orthopedists, hematologists, radiologists, surgeons, and pediatricians. Other books focus on areas or rooms in the hospital which contribute to patient care, beyond the standard pediatric ward or operating room. James Collier's book Danny Goes to the Hospital (1970) describes the laundry room, kitchen, maintenance and repair shop, sewing room, and library. These are important inclusions because they are very necessary members and parts of the health care team interacting with the child.

A book written under the supervision of a doctor or recommended by a medical professional has better chance of being accurate, in contrast to a book written by a layman unfamiliar with the hospital or its occupants. Most preparatory books have some sort of preface to the parents explaining the book's purpose of preparing a child for the hospital experience and acknowledging its medical sources. Some books have been researched by hospital professionals with children. An example of a well-tested book is Claire Cilotta and Carole Livingston's "Why Am I Going to the Hospital?" (1981) which was "tested upon scores of children who themselves were hospitalized or were about to be" (jacket cover).

Secondly, a good preparatory book must deal with unpleasant aspects of hospitalization. Entering the hospital, for some children, is to have fears of desertion and separation from parents come horrifyingly true. There are also painful procedures like shots, intravenous medications or feedings, and sometimes surgery to be endured. Books must be honest and straightforward with children about such things. The illustrations should show the emotions of anger and frustration and the feelings of pain which are undoubtedly felt. For example, all of the books I reviewed that dealt with injections described them as something that would hurt but only for a little while.

Surgery too must be explained as something which will not hurt while
the child is actually in it, but which may be painful when the anesthetic wears off. It is important that children be told what they will feel like before, during, and after surgery. Without a book's recognition of the physical sensations accompanying an operation, the child is left in the dark and, as stated before, can fantasize things indescribably worse than the actual thing. This can cause already-present fear to turn to panic.

A Night Without Stars (Howe, 1983) is a good example of a book which explains surgery in a fine way. The protagonist is an eleven-year-old girl with a ventricular septal defect who is undergoing surgery to place a patch over the opening. She is continually asking the nurses, her roommates, and her doctor questions about surgery, but she is getting no answers. At last, while nervously roaming the halls the night before surgery, she meets someone who has not only gone through many surgeries, but is apprehensively unable to sleep, thinking about his surgery the next morning too. He tells her everything he can, which reassures them both. It is very important for children to know specifics, especially about painful procedures.

However, children who fear mutilation or some disfiguring of their bodies should have words to describe the procedures chosen very carefully. For example, when telling a child he will be anesthetized, it would not be good to tell him he will be "put to sleep" which may remind him of his pet dog who died that way. Words describing the cutting involved in surgery can be euphemized to avoid enunciating this child's fears further. This is not to say that the child should not be told what will happen, only that the words chosen should not sensationalize the procedure.

Books, parents, and medical professionals should never lie to child about going to the hospital or about procedures done there because they will lose the child's trust. This can cause possible anger, defiance, and even resistance to procedures and care. A negative attitude toward health care can also be created, one which may emotionally scar a child for the rest of his life. The child who is informed honestly about a procedure may be apprehensive and even cry at first, but later will remember that what happened was just like what was told him, thus strengthening the trust between his care-givers and himself. The child also has the chance to mobilize his coping mechanisms to deal with the stress if he knows what it will be like before it actually happens. A book which does not deal with the unpleasant parts of the hospital stay is presenting a distorted picture which may cause resentment or doubt as to the trustworthiness of the rest of the contents.

Not only physical sensations but also emotional needs should be brought to the surface by books. Some stories provide the loving parent figure or conscientious health professional to answer questions and explore fears right in the text. Other books simply raise the issues then leave the child and parent to express the feelings and work out meaningful answers on their own. Narrative books generally deal more with the psychological and emotional reactions and needs of children than do information books. (The Hospital Book (Howe, 1981) and "Why Am I Going to the Hospital?" (Ciliotta and Livingston, 1981) are important exceptions.) Through dialogue, most traditionally between parents and child, or between medical professional and child, or friends and child, or through a monologue of the child's musing to himself, the author can introduce feelings in a realistic context.

Illustrations, especially photographs, can be very effective in drawing out and alleviating fears. The child can see the actual places where he will be staying, bringing feelings of belonging and safety. Some books include pictures of parent lounges so the child knows exactly where his parents will be when they are not with him. This also helps him feel safe and alleviates the fears of being deserted. Pictures of other children receiving nursing care and wearing expressions of pain, fear, or boredom may stimulate the child's thoughts of evaluation of his own anxiety or other feelings.

Both parents and nurses can encourage the child to talk about his feelings and fear concerning the impending hospitalization. As the child feels free to bring up his emotions, the parents or nurse can respond appropriately. Sometimes the child will not feel free to express his fears and questions. Therefore, it is important for the parent or nurse to radiate acceptance and interest in the concerns the child may have. A good book may especially help the nurse, who does not have the intimate trust relationship with the child that the parents have, to encourage the child to express his feelings and recognize their validity and importance to him.
Parents also need to express feelings. Most books introduce the parent to the book so that they have some idea what is being accomplished through the story. One exceptionally good variation of this idea is A Hospital Story by Sara Bonnett Stein (1974). This book has two texts: one for children, which follows Jill through a simple tonsillectomy; and one for adults, which explains in detail not only the procedure but the psychology behind the children's text. Tips on how to explain things to the child and how to deal with both the child's and one's own feelings are also offered.

Sometimes parents simply need to know that they are not the only one going through a first-time hospital experience with their child. Numerous articles have been published in household journals giving parents both advice and support in preparing their children and themselves for a hospital experience. Photographic essays on the subject have been published in Life magazine and Today's Health. There are also support groups for parents with children who are terminally ill or who have a rare, incurable disease. Books dealing with many illnesses or even common childhood problems can be found almost everywhere. Topics range from the traditional tonsillectomy to eye surgery, appendectomy, stitches, broken limbs, heart defects, and arthritis. These can give the parents the reassurance they too need.

Finally, good books should be written within the framework of a positive attitude toward health care. Using upbeat language with simple but specific terms, emphasizing the positive experiences of the hospital, and being conscious of the power of graphics in a book, the author can shape the effect of the book. Bright colored illustrations or realistic action photographs are essential to capture the interest of the younger child. The older child will appreciate realistic explanations and confrontations of disease or procedure. The excitement of the first-time hospital experience can be described, as in Curious George Goes to the Hospital (Rey, 1966).

The positive experience of making a special friendship or coming to terms with a long-term disease are the subjects of A Night Without Stars (Howe, 1983) and Angie and Me (Jones, 1981) respectively.

Ethnic groups can gain a positive impression of health care through books including pictures of their race or cultural group. A book integrating a number of ethnic groups in a well-written narrative is The Hospital Scares Me by Paula Hogan (1980). In this story Dan, a Black boy, breaks his leg and is attended by an Asian nurse, a Chicano resident, a white anesthetist, and an Asian surgeon.

The superficial niceties should be used cautiously, however. A positive impression of health care is not derived solely on the basis of the number of smiling faces that can be counted in a book. Neither will promises of "all the ice cream" wanted after an operation create a positive impression if the hospital does not happen to serve anything but crushed ice chips to their post-tonsillectomy patients. The positive attitude comes instead from a realization that the hospital is there to help sick people get better. Some good examples are the following:

There are times when the job of making you well is too big for just a little medicine and a lot of loving family care. It's so big that the doctor decided you need special "star" treatment. That's when you have to go to the hospital.

Every child who goes to the hospital is there for a very special reason. You are there because your family loves you and wants you to get the best care possible to help you get well. (Ciliotta and Livingston, 1981, pp. 6 and 45.)

People go to the hospital for all kinds of reasons. Sometimes they have to be tested to find out what's wrong with them. Sometimes they are too sick to stay at home, and they need the attention of professional helpers day and night. And sometimes they need special medical treatment that only a hospital can provide. (Howe, 1981, p. 13.)

Believing that the hospital is a place where people care about him and will try their very best to make him feel better is important for the child. A positive attitude towards getting better can at times have more effectiveness than all the medicine in the world. A good book can instill that knowledge in both the child and his parents.

Going to the hospital for the first time is a momentous experience for both the child and the rest of family. If the child is well-prepared, the parents will be assured that the child is not overly anxious and in capable care. The child can feel proud of himself for knowing what will happen to him, conquering his fears, rallying himself to go to the hospital and through the procedures, and coming back home.
Grandma's Knee

Her knee was star of many Harlem scenes.
Although it did not wear the finer silk,
it strained three flights with pounds of collard greens,
and never failed to fetch the quart of milk.
It slumbered by my brother's fevered bed
until the sweat of temperature had chilled.
It carried Afro-herbs that he was fed,
assuming that his tummy would stay filled.
It tapped the time of piano lesson notes.
It rocked the frightened cousin while she slept.
It perched my little sister for her oates,
and cushioned battered heads of those who wept.
Ask why do I remember Grandma's knee?
Because it bent in prayer and made me me.

—James B. White

Freddy

Ruth McBurney
Sara VanderGoot, now nine, wrote this book when she was eight years old.
Once upon a time there were two princesses. Their names were Helen and Margaret. They lived with their Dad, the King, and their Mom, the Queen.
One day Helen and Margaret were taking a walk and suddenly they fell into a hole and there before them stood a big ugly witch. She said to them you are my slaves I want you to clean my hut make my beds and scrub the floor. The princesses were very surprised because they had never worked before.
Then one day the witch told Margaret to pick some strawberries but Margaret said no.
Then the witch said if you don't I will turn you into a witch just like me. But Margaret insisted and Shiroo she was turned into a witch.
After two weeks had passed the witch told Helen that if she found the magic ribbon she and her sister would be set free. Every day after Helen's work was done she would look for the ribbon. Then one day it came to her that she had the magic ribbon in her hair.
She told the witch about it and the witch
said oh hokey that's not it. But Helen
said oh yes it is. Then the witch
said let me see it and sure enough
it was the magic ribbon. Because the moment
the witch grabbed for it she fell dead.
Immediately Margaret changed into a princess and the two went home. Helen became Queen and because Margaret had not listened to the witch she stayed a princess forever.
THE

End
Defining Children’s Church

by Ross Hoogewerf

What is the children’s place in worship? Should they be kept at home until they are “old enough” to participate in worship? We must look at these questions after we understand what worship is and how we proceed to worship.

Worship is essentially the active dialogue between God and His people (us). I stress the active because so often worship is regarded as the passive attending of church to listen to the sermon, sing a little, or give money to the benevolent fund. Worship should be actively applying what we learn in the sermon to life situations, singing with all our hearts, and giving of ourselves, not just our money. The liturgy is the way or means of worship, that is, the tool the people of the church should actively use to make the most out of worship.

I think the children’s place is definitely in worship and they should be integrated into the liturgy as much as possible. Following are some possible answers to the question of the place of children in worship.

Remembering that we are all children at one time, we ought to realize our awesome responsibility, as adults, to teach children the blessings of God rather than focus so intensely on the curses. We so often do this by telling the child about God’s love, forgiveness, mercy, grace, oneness with Him, etc., with words while communicating by our actions that we cannot be forgiven, receive mercy, or grade, and that God is really separated from us. We communicate the fact that because of the Fall we cannot receive blessing from God; therefore, we turn our children into “work saints” trying to earn their salvation although eventually giving up this effort because it really is impossible. Children can get the feeling of self-hatred because of the Fall when really sin doesn’t annul blessing at all. If the child doesn’t experience blessing through experiences at a young age (experiences that we are responsible for giving to them), how can he be expected to understand blessing at all? We must practice passing the blessing and emphasizing that Christ is the way of experiencing that blessing, that He is present with His community and the child. This relationship to Christ will cause the abundant blessing to be seen. Adults must be encouraged to help children understand these blessings in the children’s relationship to himself, others, society, nature, and God. By worship and teaching experiences with adults leading the way, children will receive the confidence in life that blessing can be found in many experiences. We should make this one of the most important functions of our congregations because God commands it.

In addition, the church congregation should include both adults and children (and everyone in-between), and we ought to consider the option of integrating the children into the liturgy and worship service. This option sounds like an ideal situation, and indeed it could be but, if the minister has a special talent in communication to all, this integration could be done. But again, why not have a lay person with a talent for Bible reading or prayer help out the minister and thus prevent pastor “burn-out?” Also I believe we should consider the “part-in, part-out” concept of children’s worship. This is a compromise between the options of children spending all the time out of the service and spending all the time in the service, but we should begin with such a compromise. The children would benefit from being in the service part of the time and seeing baptism, Lord’s Supper, and
then benefit from going to their own place of worship to understand more of what is really going on. In this way they might, upon growing up, choose to worship instead of feeling forced to worship.

We ought not to consider either keeping children in the worship service all the time or out of the service all the time. In the first case, the children are being forced to worship, possibly without understanding a thing. True, maybe some parents explain worship procedures to their children, but many others do not. Worship should be a matter of choice, and due to our innate need to worship, the children will, upon instruction and understanding of it, worship. Keeping children out of a service all the time will shield them from important observations of worship, and the minister might be tempted to speak too intellectually to the rest of the congregation.

Children must also be considered when choosing church music; we must take care to choose music which teaches our children. Are the words of our songs biblically and theologically sound? Is the music appropriate for worship? Is the range of the music too difficult for children? "Peppy" and "cutesy" songs aren't always appropriate; instead, we must consider: will children learn from the song? Is it fun to sing? Also, teaching some great hymns of the church will help children when they get older to sing in the corporate worship and understand what they are singing.

In conclusion, I would also like to challenge us to think seriously about the sacrament of the Lord's Supper. Historically this was frequently done. I personally see no advantage here because the children never know the experience of celebration and the feeling of being one with the Church.

1. Total Absence: The children are kept from the table while the congregation partakes. Historically this was frequently done. I personally see no advantage here because the children never know the experience of celebration and the feeling of being one with the Church.

2. Participant Observers: Here children are able to sing songs they know during the Communion service. They receive the sense of awe and reverence. The parents have a responsibility here to explain the procedures and the sacrament.

3. Explanation: A layperson or minister after passing the communion would explain the significance of the Lord's Supper to the children.

4. Blessing Participation: The congregation comes forward to receive the elements and the children are encouraged to come up to receive words of blessing. The encouragement can cause children to think about confirming their faith and thus partaking later. A disadvantage here is the fact that such a practice could produce anxiety in some children because they might feel they are "on display."

5. Full Participation: Why not allow the children to partake? If the children participate, their experience is not one of doctrinal knowledge but rather is one of simple faith, the "childlike faith" that Jesus describes. Of course this faith should be accompanied by a knowledge of the symbolism involved in the Lord's Supper and a knowledge and acceptance of membership in the Christian community.

I end with the requirements to partake of the Lord's Supper put forth by the Reformed Church in America's synod:

A participant must have:

1. faith in and love of the Saviour;
2. ability to comprehend the symbols and meaning of the table of God; and
3. acceptance that he or she is a part of the covenant community.

These criteria do not imply that a person who participates in communion must be of a specific age. The problem with these criteria comes when they encounter tradition: Will tradition stand in the way of growth?

As members of the Christian Church, we must consider, reflect, and pray about these things, that the Lord, above all, will guide us in our decisions and actions in the future as we as a Church consider the role of children in worship.
Another Labor Option: Home Birth

by Mary Beerman

Long ago, women gave birth to their children at home, while husbands frantically boiled water for a still-undetermined reason. Then modern technology entered the delivery process, and anesthetized women brought children into the sterile world of bright hospital lights while husbands paced waiting rooms. But in recent years, this scene too has changed. Many hospitals now allow fathers into the delivery room, women have the option of special birthing rooms and birthing beds, and together many couples attend classes to prepare them for the birth of their child. Even with these options and advancement, however, some couples choose yet another delivery option: home birth. Joan and Steve Huyser-Honig are one such couple; if all goes as planned, their second child, due the beginning of May, will come into the world—not via a hospital and with the help of a doctor—but in their own home and with the assistance of a trained midwife.

Steve and Joan stress that home birth is best for them, but it may not be for everyone. “I’m not saying every couple has to have their baby at home; some would be too nervous,” says Joan. Steve adds, “For us, the option of having our baby at home took a big load off our minds.” The Huyser-Honigs base their decision largely on the unpleasant experiences they had when Abram, their first child, was born; but they understand that many couples have had and do have enjoyable hospital births. “A lot of people have wonderful hospital births,” Joan concedes. “But for me, it just wasn’t relaxing.”

This lack of relaxed atmosphere is a primary complaint of Steve and Joan, but other conflicts with hospital procedure did arise, in spite of the fact that they had taken Lamaze classes and were given a birthing bed and room. “It’s still a hospital; it’s not relaxed,” explains Joan. Steve agrees. “It smells like a hospital; it looks like a hospital; it sounds like a hospital; people are walking around in uniforms. And you can hear the people screaming down the hall.” A scheduling conflict also meant that Joan’s doctor was in surgery the morning that Abram wanted to be born. In the hospital, Joan notes, “People just weren’t there when we needed them.” Steve expands on this idea when he remarks, “It’s an issue of control; in the hospital, you’re not in control.” As a finale, Joan adds, “I couldn’t eat or drink for the six hours that I was trying to resist the urge to push. And later when I could eat, the food tasted as if it were steamed in sugar. All I was hungry for was beans and tortillas and a beer,” she laughs.

The Lamaze method also proved disappointing to Joan and Steve. Joan relates her perspective on the situation: “The whole method is based on the idea that ‘if you don’t think about it, it won’t hurt!’ Lamaze doesn’t mention the pain, and believe me, it hurts! Then when it does hurt, you feel like a failure. I felt like I didn’t know how to have a baby. I thought, ‘If I could just relax and do this right, it won’t hurt.’” Steve, too, tells of the feeling that he failed somewhat as Joan’s “coach”; “I kept saying, ‘you can do it.’” Both Steve and Joan express a disillusionment with the philosophy of the Lamaze method. “With Lamaze, you manufacture a baby,” asserts Steve. “With all the paperwork you have to do [writing down contraction length, breathing method, etc.] you forget that what you’re delivering is a human being. The ironic thing is the fact that Lamaze is called ‘natural childbirth.’ There’s nothing natural about a process that’s been conditioned for weeks; it’s more like behavior modification.” Such a routine does not allow for variation; specific timing of contractions, etc., entails specific action and reaction by mother and father. But Joan’s case didn’t proceed perfectly. As Joan puts it, “The book doesn’t say what to do if you’ve been nine centimeters dilated [one centimeter short of the required measurement before a woman in labor is allowed to “push”] for six hours. By the time I was allowed to push, I was too tired.”

In third grade, Mary Beerman was the only girl who didn’t say “oh yuck!” when a film showed a human heart beating.
These events contrast sharply with the procedure Joan and Steve can expect from a home birth with the assistance of a midwife. Home birth means that Joan and Steve will be surrounded by people who love and support them, in their case two midwives, an apprentice midwife, and Joan's sister, Deb, who is a registered nurse. Abram will not be present at the birth of his new brother or sister because, his parents explain with a smile, "We don't want people who need help and who may be distracting." But, Joan is quick to add, "Abram will be able to see me and the baby very soon after the birth. When we send him away just before the baby comes, he'll think he's just going to visit grandma (although he does know the baby's coming) and his life will be far less disrupted."

Although the home birthing procedure itself will be quite different from a hospital delivery, an equally important difference comes in preparation for the birth. Joan believes her midwife gives "more care than a doctor can," especially in the area of nutrition and its importance to expectant mothers. In addition, while a doctor "makes birth a medical transaction" and treats the perspective parents in a "professional manner," says Steve, the midwife gives personal attention to her patients. Joan illustrates the difference between visiting her midwife and visiting her doctor: "With the midwife, you go to her home, she gives you tea and she has all the time you need to talk. She wants to be sure you understand what her actions will be and what your role as mother or father will be. With a doctor, you spend lots of time waiting and very little time with the actual doctor. He controls what questions he'll answer because you hardly have time to think of what you wanted to ask:"

"...what about complications?"

Joan and Steve will also be attending midwife classes beginning in April. At these classes they will learn what they need for a home birth, about the stages of labor, and about possible breathing patterns. The last session of these classes will be open to Abram, Deb, and other concerned parties, such as Joan's parents. The most outstanding difference in these preparatory classes is the overall attitude toward birth. "The idea of home birth involves working with your body, with the idea that 'your body can do this'; with Lamaze and hospital procedures, you work to control your body," says Joan. "It's mind over body in the hospital," Steve adds.

The most common question concerning home birth that Joan and Steve encounter is "what about complications?" Steve says such a question often arises from emotion and not from thought. "What complications?" we ask. Most complications arise from poor education and poor nutrition. In other countries, problems arise because of non-sterile conditions. None of these reasons exists in our case." But the Huyser-Honigs are not careless. Joan has gone to a doctor in her fifth month of pregnancy, and she will go again in her eighth month, as she says, "just in case something goes wrong and they tell us we have to go to a hospital anyway." This doctor will also be "on call" should Joan need him during delivery. Their sessions with the midwife include screening to detect any chance of complication. The midwives come in a van equipped with oxygen should problems come up during the delivery which mean that the mother must go to the hospital. "We're about a mile and a half from Blodgett here," Steve points out.

Joan and Steve both enthusiastically stress the fine record their midwives have: these two women have delivered more than five hundred children, averaging seven per month, and only one child has died, a child born with a heart defect. Joan is especially pleased with the midwives' record in comparison with a hospital's: "Midwives do few cesareans, they perform fewer episiotomies [incisions to enlarge the opening through which the baby will pass] and they encounter far less post-partum depression in their patients." Along with the actual delivery, midwives are involved with the mother every day for three days after the birth, and they check on mother and child at least once a week for the three weeks following delivery.

In spite of these impressive statistics, however, some people still think Joan and Steve are indulgent or fool-hardy for wanting to have their baby at home. To such people, Steve and Joan can only explain their reasons and relate the reassurance that past experience—thems and the midwives'—can give. To those people who want to know more about home birth, Joan and Steve are willing to talk about its great advantages. But in neither case are the Huyser-Honigs dogmatic or insistent; they only feel that home birth should be presented as an acceptable option for delivery alongside the other options open to women already. "You shouldn't have a baby at home if you don't want to," repeats Joan. "But you as a parent have made the choice to have a child, you have the choice in how you want to raise your child, and so you should be able to choose how you want to have your child."
Review

Morals for Mortals

by Lori Kort


Lewis Smedes is, first of all, reasonable. He writes about “what God expects from ordinary people,” and he succeeds in doing so in a way that makes sense to those very people. What he offers is not a rigid map for living the Christian life but a sensitive search for guideposts in our “complex and crazy” world. He guides his readers in a search for a “biblically informed view . . . consistent with our own experiences and supported by what we experience and see around us” (165), in other words, a reasonable way.

Mere Morality discusses first the nature of justice and love in general and then specifically each of the laws of the second table of the decalogue. Smedes uses the laws as starting points for his chapters because the law is God’s clear and direct command to His people about how human beings should live.

Why does Smedes write this book? He writes because God’s commands, although clear and direct in themselves, do not apply so clearly and directly to the complicated events of our lives that we do not struggle at times to know what is right.

Smedes begins in common sense with each of the laws. He asks three questions each time: Why is obedience to this command required of human beings? And how can we obey this command in our “changing and broken world”?

Applying God’s law to such a world requires more than an ability to recite the law. It requires “moral creativity” (91). With an understanding of the “what” and “why” of each command, human beings must responsibly search for the “how” in their own situation, to “take the commandment from Sinai’s mountaintop to the streets of our city” (17).

An Interview with Lewis

In his discussion of morality, Smedes touches on several moral dilemmas which have to do with children. Because the theme of this issue is children, Dialogue asked Smedes a few questions about these dilemmas. Following are his responses.

Dialogue: In your book Mere Morality you make the distinction between natural impulse and moral choice (71). Shouldn’t more married couples keep that distinction in mind when they decide to have children? My spouse and I would love to have a child, but is it moral for us to have one?

Smedes: I think there is a deep human impulse to turn sex into creation. But the moral self transcends all our impulses, even natural, that is, human ones. So it may be that a person responsibly goes against good impulses sometimes. But it takes a serious and discerning person to do it. To do it right. On such matters, I can only help someone consider all the angles; I cannot tell him or her what should be done.

Dialogue: The Christian community still becomes quite alarmed when a husband, let’s say, breaks the vow of faithfulness to his wife. But isn’t the community too tolerant of parents who break troth with their children by neglecting the “calling to pass on the moral and spiritual reality of life to their children” (80)?

S: I think the Christian community is often indifferent to the psychic and spiritual brutality that parents assault their children with. Religious people are often very brutal. When a parent tells a child he is worthless, rotten, depraved, that parent is brutalizing a child. And I think the Christian community often has mistaken this brutality for discipline in humility. I worry about this sort of troth-breaking. The one you mention too, though it is on the other side of the fence. So, to answer your specific question: I think the Christian community should help parents discover the courage to tell children what they (the parents) think is worth living for and worth dying for. I don’t know what to do with your word “tolerant,” however. Parents need help, not tolerance or intolerance.

Dialogue: Some mothers of pre-school children believe it is “immoral” to “abandon” their children to day-care centers. Others feel no qualms about sending their children to such centers. Is there a moral issue here?

In kindergarten, Lori Kort learned how to whistle. She practiced in church.

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Smedes

S: Yes, day care centers are a moral issue for parents, but not the kind of moral issue that demands a choice for or against them. Some children are better off in day care centers than at home. Some parents give children more caring and loving and disciplining in a few hours than other parents do in twenty-four. So, for some, day care centers are fine. And they are inevitable in our culture. So the moral challenge is this: help parents concentrate a lot of parenting in the shorter time they have.

D: In the abortion issue we talk about the rights of the fetus; we talk about the rights of the mother and also the rights of the father. What about the rights of the children already members of the family? How does a decision to abort (or not to) affect them?

S: Yes, the other kids are sometimes the neglected factor in decisions about abortion. Most often parents decide on abortion for the sake of the other children (if there are others). But a young child who knows his mother aborted for his sake could well fear that he might be dispensed with for his sister's sake.

And he may accept terrible guilt for being the reason an unborn "brother" was terminated. And there are lots of other things that could go on in the "other child's" head. But it still could be true, given some pretty terrible conditions, that an abortion would make life easier for other children. I know of a mentally retarded child, living at home, whose mother is pregnant with a fetus which, if brought to birth, will be a terribly sick child. Would it be better for the retarded child if the mother aborted? Most likely. How much better? Who can say?

D: In your books you project an air of optimism—even joyful optimism. Don't you ever despair? Don't you ever wonder if society is simply leading its children down the road to perdition?

S: I want to be hopeful. But I hope against despair very often. I am terribly afraid. I ask God to give me a courage that looks fear full in the face and is not overcome by it, that discovers a little joy in the middle of it, and that grabs at Christ for a crumb from his courage. Once in a while, I think, He gives it. And I am glad when it shows.

Nor is God's law an easy law to live. Smedes deals with contemporary issues such as suicide, abortion, and capital punishment. He also discusses conflicts that arise in situations where one must determine the lesser of two evils. Smedes does not attempt to list thousands of do's and don't's for contemporary living. Instead he leads his readers toward a way of responsibly living God's law in their society.

Through all of our society's complexity and despair, Smedes ends with hope. "Only a complacent soul enjoys a feeling of success when he thinks deeply about mere morality. What needs to be said to this human situation is simply that the God who commands is also the God who forgives ... Once forgiven, we hear his commands, not as a burden, but as an invitation to enjoy our humanity, and in our joy to glorify our Creator" (242-243).

A significant book? Certainly. Not only does Smedes write readable prose, but he also gives evidence of extensive Christian scholarship, and his knowledge of God's word is assuring and convincing to his readers. His approach is ordered and clear so that the ordinary reader understands Smedes' meaning without great difficulty. He presents issues openly, from all angles, and with understanding and insight, and his book is filled with examples and stories common to our experience which help us to see how law can be applied to living. Above all, I think, he shows that he is sensitive, Christianly sensitive, to the pain, the hurt, the desperation of people in this generation. But he is joyfully optimistic. Why? Because we have a God of infinite grace and mercy, of infinite love. Christians who take obedience to God seriously would do well to read and reread Mere Morality.
Wayne and Anamarie Joosse have decided not to have children; Dialogue asked them the following questions to explore the reasons for and ramifications of such a decision.

Why did you decide to not have children?
AJ: The choice was not as decisively made as you might imagine. Rather, it seemed to evolve over years and through a variety of smaller decisions.

We grew up liking children and assumed, even when we married, that someday we would be parents. Indeed, Wayne’s high school and college friends still express surprise that we are not because they remember him being attracted to and involved with kids.

We did not start a family right after marriage because, like many couples, we thought it wise to have a few years together without children. After about two years we began to think more about children and prayed a lot about the decision. But with Wayne having to begin a doctoral program it was not the ideal time. When I was also awarded funding for graduate study, it seemed to us that God was opening that door.

WJ: After grad school, we again faced the decision. It’s hard to recall or convey all our thinking but I know that at the time we were very impressed by the number of needy and hurting people there were in the world, particularly because of Anamarie’s extensive work with retarded and emotionally disturbed children. Increasingly it seemed to us that God was calling us to respond to the needs of existing people rather than to bring 2-3 of our own children into the world.

We were traditional enough that it largely hinged on Anamarie’s role. She doubted that it should be primarily one or the other. My recollection is that it wasn’t a great struggle. We were painfully aware of great unmet needs, Anamarie seemed to have natural gifts for such work, God had provided graduate degrees and then a job-offer from Pine Rest… Again at this juncture, we felt called to do something other than to begin a family. Then, and to this day, it has always seemed more like a “positive” call to do X or Y, not a “negative” decision about children… though it was increasingly clear that the two were opposite sides of one decision.

AJ: Other factors eventually finalized the decision. For some years I had been having some physical problems which gave us some concern about pregnancy and childbirth. We also began to sense that perhaps we wouldn’t be particularly good parents. Finally, older age makes parenthood less appropriate.

Do you think that Christians have a moral responsibility to have children?
AJ: We don’t or we would have tried our best to obey. We take seriously God’s claim on our lives and believe that we are called to a life of obedience. That has many dimensions but we don’t believe it means that everyone must have children, anymore than it means that all must marry. I don’t believe that the command to “be fruitful and multiply” applies to all people at all times.

It could be, I suppose, that we’re too influenced by the cultural winds of our time. During the ’60’s, the best years for us to have children, there was far more talk than now about over-population, ecological disasters, and the need to reduce birth rate. Christians did not talk as if we had a moral responsibility to reproduce. Ironically, we have friends who have six children, and they say they were confronted by Christians on that count.

WJ: Perhaps the opposite point could be made; i.e., perhaps God calls some people to not have children so they can be used by him in certain ways. The Bible suggests that some should remain single because it could facilitate a single-minded commitment to some calling from God. Perhaps an even stronger case could be made for being married (potentially the source of great satisfaction and mutual support) but remaining childless (which frees up considerable time, energy, and money which can be used in service to God and others). Many “heroes of the faith” did not marry; even more did not have children. That includes Christ, even though He was fully human.

I hope I can illustrate that “freeing up” idea without sounding messianic or self-righteous. Anamarie now spends a lot of evening and weekend time, either in person or on the phone, with...
troubled persons. If we had children either she would not be a counselor or, if she were, good family life would preclude most of those involvements. Quite simply, a lot of hurting people would have to find another source of help and support. Perhaps they would…though not easily; the demand seems to far exceed the supply.

Relatedly, over the years we have taken into our home individuals who had needs we thought we could meet. Some stayed a short time; some over a year. Occasionally these individuals became disturbed or even suicidal, and we’ve had some wild scenes. I believe that we did some good for those folks, but it did some good for those folks, but it

A final example. Interim has plenty of problems but also, I think, great potential. Consequently, I put a lot of time and energy into my interim courses, like the recently concluded “Common Christian Struggles.” Apparently, it was a very meaningful course for nearly all of the 65 students; some have told me that it changed the nature or direction of their Christian life. I’m obviously gratified by that feedback because I’m very aware of my limits and those of the course. But my reason for bringing it up is this: If I were a parent, I could not have done it. Our work is pretty much our life.

We have chosen occupations and involvements which are conducive to emphasizing and expressing Christian values and concerns. Because we are not spending a lot of our resources for 20-25 years in order to raise 2-3 children, we can offer something extra to the thousands of people we will work with, God willing, over those 25 years. At the very least that seems like a legitimate option and for us and perhaps others, even a preferred route.

AJ: A quick P.S. We are aware that it’s not just “extra time” but also “extra need.” That is, needs some people meet through their children—e.g., a desire to have an impact on life even after death—we perhaps try to meet through our work. Our work is pretty much our life.

Sometimes it seems like the wrong people are choosing to have or not have children. Because you both had psychological training, could you not have been especially good parents?

AJ: We probably don’t agree with your assumption. We haven’t seen much evidence that people in psychology are better persons, spouses, parents, Christians, or whatever. The opposite might be true. In any case, we’ve come to believe that our package of strengths, weaknesses, training, opportunities, etc., fits better with being a teacher and counselor than being parents.

Do people ask you difficult or nosey questions?

AJ: Only folks from Dialogue! Actually, it’s just the opposite; people treat it like a taboo topic and rarely bring it up. It’s as if being childless and talking about it is in bad taste. I’m far enough beyond adolescent self-consciousness that I don’t think everyone is observing and talking about me, but I’m pretty sure that people think/talk/judge/
speculate about someone not having children far more often than they actually ask about it...which is rarely. **Is there a prejudice against childless couples?**

WJ: I think there is, and it may be strongest among Christians. Periodically, I've been astounded and angered by articles on this topic in Christian magazines. I can recall two which seemed to me incredibly simplistic and biased, though written by people I respect who generally address issues perceptively and fairly. Essentially, the articles praised the selflessness of those who have children and condemned the selfishness, maladjusted nature, and implied immorality of those who don't.

Now there may be some truth in such caricatures, but it seems obvious to me that people and their motivations are far more complex. Admittedly, some people remain childless so they can live in a self-indulgent way or because they are unable or unwilling to share their lives. But most childless couples we know seem to be rather unselfish people who give much of themselves to others. They don’t deserve that kind of defamation. I’ll admit to plenty of faults and sins, but I think that people who know how we actually live do not consider us selfish.

Conversely, being a good parent obviously requires much selflessness...but that’s not the whole story. Most people have children primarily because they want to; they want that potentially fulfilling experience. Research indicates that other people have children because of social pressures, to feel like a “real” man/woman/adult, in hopes of filling a void in their life or marriage, to avoid loneliness in later life, and other reasons that seem rather self-serving and not particularly admirable. I suspect that we need more insight and honesty “on both sides” about actual motivations vs. self-delusions.

It’s not as if there is a pool of unborn babies from which each of us might take his fair share. There is, however, a pool of existing persons with all sorts of needs to whom each of us is called to respond. Who is really unselfish? From my view, it’s those folks who resist the desire to produce “someone like us” in favor of adopting, particularly the older, handicapped, bi-racial, and others who are hard to place.

AJ: It seems to us that this issue, like so many, comes down to motives, to the **why** behind the behavior. There are probably many “good” and “bad” reasons for both having and not having children; people fall on each side for both selfish and unselfish reasons. In most cases, the decision probably reflects a combination of reasons. We would like to see discussions on this topic reflect more of that complexity, not the over-simplified and self-serving view that has prevailed.

WJ: I’d like to add something which may anger people but I believe it merits serious consideration. Because of the prejudices we’ve been discussing, single persons and childless couples are often labeled as selfish, et. al. even when it’s not accurate. On the other hand, there are families who seem to spend almost all their time/money/energy on themselves, an only slightly expanded circle of self-centeredness. Yet both secular and Christian observers hail such tight-knit families as all-American. We hear a lot of talk about the breakdown of the family but I think there is also an opposite danger: a preoccupation with one’s nuclear family. The Bible puts far more emphasis on many other concerns (e.g. “The family of God”); Christ specifically called for a commitment that had priority over family ties.

AJ: It was because of the prejudice that we initially declined to do this interview and why we still remain ambivalent. These are emotion-lized matters, and we all have subjective perceptions and strong defenses. Given the prevailing attitudes, it is hard to argue our views without appearing defensive and difficult to cite evidence that might justify one’s life-style without appearing self-righteous.

Still, if this interview causes people to look at this issue more fairly, it’s worth those risks. We know of childless couples who have been deeply bruised or wounded by the attitudes and presumptions we’ve discussed. When this happens among members of the Body of Christ, we all should be concerned.

**Why do you think there is that prejudice?**

WJ: I don’t fully understand it and would prefer not to try to analyze others. But some possible explanations have recently been widely publicized. Though people commonly perceive childless couples as miserably unhappy, research on “life satisfaction” suggests that such couples tend to be happier than those with children. Moreover, the latter group reports greater happiness before children come and after they leave. There was also that famous Ann Landers column where something like 80-100,000 parents wrote in to say that, like the original provocative letter writer, they too would not be parents again if they could do it over again. Perhaps unhappiness with parenthood combines with a jealousy towards non-parents to fuel a need to see us as selfish,
It's a way of still being "on the right side; I may be unhappy but that's better than being abnormal." I'm just speculating but it sounds plausible.

AJ: Although the "what if everyone did what you're doing" argument isn't always valid, we recognize that society could not continue without parents. We also appreciate that raising children has never been easy and may be harder today. So—Wayne and I applaud those who take seriously the important challenge of being parents.

Paradoxically, there is a sense in which marriage might be easier when you have kids. In some ways kids are a buffer; parents can get so involved in all that's involved in being parents that they can pretty much avoid having to interact with each other. I think that is why we see so much divorce among couples approaching the "empty nest" stage; they discover that without kids there isn't much left to their relationship. In some ways, then, non-parents have to face the challenge of marriage and the needs of each other more directly. Perhaps that (not kids vs. no kids) is what causes the greater happiness in childless couples.

**Do you ever regret your decision?**

AJ: Yes and no. Mostly "no" because all-in-all, we think it was the best decision for us. But sometimes I regret some of the ramifications of the decision—that I won't experience what it's like to be pregnant, give birth, and be a mother.

WJ: We are missing out on a central and profoundly human experience... and that can not be glibly dismissed. Occasionally something a parent reports, a neat experience I have with a child, or even an ad on TV will give me a deep pain of regret.

But most decisions involve trade-offs. We made this one thoughtfully and prayerfully and remain convinced that it was right for us. **Are there other things you wanted to say that didn't seem to follow from our questions?**

AJ: In general, I would urge people to be alert for unfair stereotypes, pre-judgments, and the like, which we've tried to discuss. With so many other matters it seems that people can easily see that God gives different gifts and tasks to different members of the Body...but that we need and belong to each other. There is diversity within our common call to obedience. For some reason, people seem to have trouble including childless couples in that view of things.

WJ: There is another kind of fairness that I think Christians need to think about. Those of us with two incomes and no children are expected to give far more than our share of the church budget, we are among the first called for special needs, and in most churches we help to pay the tuition bill of other families. Now I want to be very clear that I think all that is right; the new baptismal vows are appropriately more communal in nature. "From each according to his ability; to each according to his need" has always sounded to me more Christian than Marxist.

But what about when I am old and should not be climbing a ladder to do storm-windows but have no grown son to do it for me? Will the parents of four kids whose tuition we now partially pay still remember what we have done? I see little if any evidence that the church is also sensitive to "the other side" of being childless. They know where we are when they need us; I'm not sure anyone is thinking about how or when we will need them. As single persons have made clear, the church seems oriented around conventional families. Allow me to overstate in order to make a point: It isn't hard for childless couples to feel unfairly judged and stigmatized, financially exploited, but then largely ignored or forgotten. I think the Christian community needs to consider whether there is an awareness in its treatment of childless couples.

AJ: Finally, I would encourage students to become aware of the societal pressures which influence our decision-making. Seniors know well the pressure that says, "Normal people get married in their early twenties. If you don't marry you are a real loser!" As a result, people marry for poor reasons... and live to regret it. As Gary Collins roughly puts it, "It's much better to be single and wish you were married than married and wishing you were single." Now reread the above with the "having children" decision in mind. Pressures and stigmas, good reasons and bad, wishes and regrets... In brief, you have a choice.

WJ: OK, but let's make sure we don't end on what sounds like an echo of our secular culture. We have choices, but we do not have the right to live our lives any way we please. We believe very strongly that we are called to a life of obedience and discipleship and loving service to God and others. Within that context the primary question is not whether to have kids but, given my unique constellation of experiences, talents, limitations, and opportunities, how can God best use my life to promote His kingdom? We think that for some Christians that question may and perhaps should lead to an emphasis on nonparental commitments and involvements.
The Following Moon

Out into the air, just before sunrise
(Already the horizon glowed red)
I greeted a full orange moon
Hung just above houses to the west.

I paused in due respect to tip my hat
(To the man of the moon),
Bid "Good morning," and paused again
To wonder if he would come with me.

He came with me—through the trees
(At equal distance all along)
And when I turned a corner,
Over my shoulder he followed me.

He followed as a silent presence
(Never a word did he say)—
High, dignified, yet nonetheless
Drawn by a string that I held.

Before going in for the day's long work
I stopped again to tip my hat
And say "Good night" 'til the next day
To my friend, the following moon.

—Lori Kort
Street of Time

Five floors up one sits and waits
For a call from the street below:
"Rapunzel, Rapunzel,
Let down your golden hair."

Five floors up—maybe six—
She combs her hair and pulls it straight
And listens for the voice from the spacious street
While days drag by.

Six stories up—maybe seven—
Leaves outside her window
Turn brown and blow away,
But soon, she thinks, one will come and call.

Seven stories up, and waiting still,
Paint fades on the wall
And books on sagging shelves turn yellow.
But now she hears the quiet voice:
"Rapunzel, Rapunzel,
Let down your golden hair."

She leans from her window; her
Hair hangs low toward the space of the street.
She looks out and sees that the caller is gone,
And the curling hair, that falls
Short of the empty street,
Is gray.

—Lori Kort
A Tale of Two Schools

by Nancy Jacobs

Christians generally raise their children as God's children: believing children are children of Abraham and of the covenant God made with him. Reformed Christians especially have treasured the theology of the covenant and in recognition of covenantal responsibility have often sent their children to Christian schools. These Christian schools, enthusiastically founded many years ago by covenant-minded parents, were meant to educate children in the faith, but often have been just as successful in sheltering children from the world. Many Christian schools are like hothouses, nurturing children in artificial environs rather than preparing them for the outside world's harsher climate. Now, because of reformed Christian's growing awareness of the "outside world" and because of the growing enrollments of "outsiders" in Christian schools, the protectionist rationale for a Christian education is disappearing. The new trend in Christian education is that a school should not be just a "hothouse" for a new generation of Christians, but also be a presence, a pervasive force, serving and training servants of its community.

An outward-looking Christian school's personality and goals are then defined by its community environment. A conscientious school in the city of Grand Rapids will be different from a conscientious school in Holland, as Oakdale Christian Elementary and Junior High School in Grand Rapids is, in fact, different from Holland Christian High School. Oakdale is an old school, recently remodeled, committing itself to an inner-city Black neighborhood with few reformed Christians. Located in a basically homogeneous community with a strong minority supporting Christian education, Holland Christian High is a new building which shares a large plot of land on the outskirts of the city with an almost-completed middle school. These two Christian schools are fraternal rather than identical twins, prejudices, to establish credibility in the neighborhood. If successful, Oakdale's enrollment rises, which may bring the problem of parents who want a Christian education for their children but cannot afford it. Oakdale experienced these mixed blessings of success a few years ago, and so it appealed to the broader Christian community for financial help, an appeal which Boss says landed with a "dull thud," the perceivable attitude being that Christian schools should expand, but must exist within reasonable bounds. Oakdale's neighborhood presence can be strong only if it can court both the parents to enroll their children and outside supporters to fund the effort.

Holland Christian does not recruit its students, yet it has the majority of the city's Christian Reformed students, many Reformed students, and a growing representation from other churches. VanderArk says that reformed families enroll their children because of their often unarticulated belief in the covenant. Non-reformed families sent their children to Holland Christian for many reasons: for a strong academic education, for moral training, for firm discipline, or, as many reformed families do, for a shelter from undesirable influences, which they fear in the public.

"The new trend in Christian education is that a school should not be just a 'hothouse'. . . but a presence. . . ."

but principals of both schools agree on their basic purpose. Dan VanderArk of Holland Christian tries to "raise children to serve God in the world, not shield them. They must go out and transform the world." Ron Boss of Oakdale Christian wants to "collect power in a Christian school, collect resources, and bring them to bear on the tragedy of human need."

The Christian school's missionary potential is much more obvious in Oakdale's situation than in Holland Christian's. Oakdale's admission procedure states that "the Christian school must seek to enroll the children of all believers in the community it serves. It must not merely be open to the children of believers, but it must actively recruit them." Theoretically open to all Christian children, Boss admits that Oakdale's recruitment policy comes and goes. Some potential Oakdale parents are wary of private education, dismissing it as a privilege for a select middle class few. Oakdale tries to erase these...
schools. Although Holland Christian has a healthy enrollment, VanderArk thinks that a good, respectable prep school would provide strong competition for some of Holland Christian’s students. In reformed circles, similarly, some Holland families are no longer enrolling their children in Christian schools, the covenant being more of a tradition taken for granted than a basis for educational practices.

Boss dislikes the casual way reformed circles and schools claim the covenant. “They’re hung up on . . . What is it?” he asks. “People say that God owns the whole world, all his cattle on a thousand hills . . . but only certain children. We are all God’s children. Some of us just know it. Covenantal people must be aware of the work to be done. God has asked us and we must do his work.” For Boss part of the work covenantal people are missing by clinging tightly to the covenant is the kind of work which Oakdale is trying to do: bring non-reformed, covenantal children into the school. VanderArk does not agree that covenantal theology restrains Christian education from its potential fulfillment. “The covenant as a purpose for Christian schools does not exclude mission. The Catholic child is a covenant child too. The Christian school should be a society of parents who want to train their covenant children for God, so we must be careful not to reserve the Christian school as ‘onze [Dutch for ‘our’] school.’”

Both Boss and VanderArk are idealists. They are leaders of schools and communities which do not always follow. They understand a Christian school’s potential but cannot always realize it. VanderArk explains the problems facing both schools. “In Oakdale, it’s racism; in Holland, tradition has kept us back. Ron’s problem is that he has a whole community of Christian black parents who don’t know the rationale for Christian education. Our problem in Holland is that we’re sitting in the middle of a safe, comfortable tradition with few outside influences. We assumed parents knew the rationale for Christian education, but because we don’t value, evaluate, articulate Christian education to even our own children, let alone others’, we’re losing our commitment through atrophy.”

Both schools ultimately want to prepare Christians for service. Boss wants Oakdale’s graduates to go through life “choosing alternatives. Given the chance, Christianity would be chosen: it works.” Boss stresses the suffering world which Christians are called to comfort. VanderArk wants Holland Christian graduates, too, to choose Christianity. Many leave the “Dutch citadel” and he is proud of their work in the broader world, but he hopes that Holland Christian teaches its students that they can serve God in Holland also. “A plumber in Holland can do God’s work, a farmer in East Saugatuck, a practical nurse in Holland hospital can do more in God’s kingdom than one of the CRC’s top ten ministers.”

The principals of Oakdale Christian and Holland Christian share a deep commitment to the faith in Christian education, not to shelter reformed youth, but to train covenant children from many backgrounds for God’s service. The policies for realizing these goals are, on the surface, different in these two schools, but the ultimate end is the same. As Ron Boss says, “God’s children are his flowers, and he has room for many different types in his garden.” While it seems best that these flowers are not grown in a “hothouse,” Boss and VanderArk prove that they can thrive in different types of gardens.

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**Intersection**

On the corner where Division Street meets Wealthy (at an angle of ninety degrees),
a man in jeans frayed at the bottom danced barefoot on the pavement, lightly.

People in passing smiled and gave quarters and one gave a dollar—brand new without a wrinkle—sadly.

A dollar seemed hardly enough to buy dinner here at the corner where Division Street meets Wealthy (at an angle of ninety degrees),

So I took off my shoes and danced with him.

—Lori Kort
I'm torn again from the salty dried-on tear tracks, a cry of getting lost a bit in the tangled nonsense fragileness of who we are as children learning how to fly. There's beauty to this learning, to the reaching on and setting free and being all that we can and want to be even though we're sure that this will never be enough. Never be enough to heal, to make a difference, to know, really know, a drizzled Iowa hayfield, a soul.

There's beauty to this all, I've heard, because of a holy, whispered grace that comes to us from beyond our learning, reaching on to setting free—comes to us in the midst of this growing-up in a Kingdom come, almost. Painted whispers that call from the shadows of struggle for us to come just as we are, all tangled up in the nonsense fragileness. Come and look and be for Him and with Him inside the paradox so He can heal and make shining holy our crooked cries so we can fly.

—Natalie Dykstra

Grandpa always said that a tree was God's most beautiful architecture. There are not many trees in Iowa soil, no mighty forests. Yet between his home and the homeplace there is what he called the timber. And Grandpa cherished the timber, those common trees. I would try to see what Grandpa saw in that gathering of wood. I would squint and study and imagine.

Grandpa cannot see anymore. He cannot see the dark majesty of a leafless oak or the stubborn greenness of a pine. He cannot see me reach to touch a star, to touch a sparkle of light. He cannot see me squint and study and imagine. He would understand though, for he always said that a tree was God's most beautiful architecture.

—Natalie Dykstra