A n early morning crisis meant I needed to get across town quickly, so I took a short-cut through my grandma’s old neighborhood. I saw that the Methodist church many of her neighbors used to attend is now home to a different congregation, and the old building has a new banner across its brick surface. The simple, hand-lettered announcement read, “Refugees and Immigrants Welcome Here.”

According to the book of Genesis, soon after God changed Abram’s name to Abraham and Sarai had become Sarah, the old man pitched his tent at a crossroads in the hot afternoon sun and, in no time at all, three strangers came by, one of whom was the Lord in disguise. Abraham, delighted by this course of events, entreated the three of them to stop and enjoy his hospitality. Refreshed by the cool water and fresh meal with which he welcomed them, the Lord gave the newly named “father of nations” the good news he had been longing for — that within a year, his ancient, barren wife Sarah would bear him a son.

According to some scholars, Abraham did not meet the three strangers by chance, but he chose the time and placement of his tent in pursuit of just such an encounter.

What was the old patriarch thinking when he went out in search of strangers? What connection did he make between hospitality to his visitors and the future of a chosen people whose number would be like sands in the desert or stars in the sky? Did Abraham make a connection between the gifts offered to strangers in hospitality and the gifts received from strangers?

“Welcoming the stranger” has become the phrase we use to express the compassionate and socially just response to immigrants and refugees who come into our neighborhoods, schools, work places and health care facilities. But “welcoming the stranger” seems an insufficient response at this time of increasingly hostile attitudes and behavior toward the strangers in our midst. Migrants and refugees need rescue, safe passage, protection, sanctuary and attention to their most basic needs before we can roll out the welcome wagons and send over the casseroles.

Deportation, increased vulnerability to trafficking, strategies for disrupting ICE seizures, foreign medical student harassment, denial of health care to undocumented persons and refugee abuse are all matters that our authors have addressed in this issue of Health Progress. To apply Pope Francis’ analogy of the field hospital yet again: We can’t address the determinants of health until we stanch the bleeding and protect the victims, feed the hungry, give shelter to the homeless, and care for the sick.

There is an urgency expressed in every article in this magazine proportional to the events going on around us. In the days since I wrote the first few paragraphs of this note, a crime in Portland highlighted how deep is the hate and how brave are the Samaritans when it comes to interacting with the strangers among us.

The sign on the repurposed church reminds us that we should not only do the right thing, but we should also declare and show our commitment to doing it. The tradition of Catholic health care has always been, and will continue to be, one of welcome and care for every person. But expecting people who are immigrants, refugees, exiles and migrants to find our facilities and trust our good will isn’t enough right now.

As many of the authors in this magazine point out, we need to be especially proactive in seeking out newcomers who need our services at clinics, emergency departments, OB/GYN practices and urgent care facilities. By our signage, our brochures, intake practices, employee handbooks, orientation protocols and pastoral care, we can show we will not merely tolerate or accommodate the refugees and immigrants who come to us, but that, like old Abraham, we will seek them out for the hospitality we can offer and the gifts they bring to our communities.