



mission catalyst



Resources for Ministers from the BMS General Director

www.bmsworldmission.org/catalyst

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THIS ISSUE: HIV/ AIDS

Dear Minister/Leader

I'm old enough to remember the polio victim kids wearing leg callipers. And there were plenty of stories of scarlet fever, diphtheria, whooping cough, and we all had the compulsory tests for TB. But I don't remember any of my generation being afraid. It was the age of antibiotics and medical discovery. We reckoned immunisations protected us from almost everything, and there were cures for the rest. Naive, but that's how it was.

Aids has killed naivety. People are dying. They're dying in this country, but the really scary death toll is in Africa and increasingly in Asia. Aids is the special focus of this Mission Catalyst.

Aids is not God's plague on gays for their Sodom-like wickedness. Nor is it just desserts for needle-sharing junkies. It's a medical condition – a syndrome to be precise – and it kills people. It's killing them in huge numbers, taking more than ten per cent off the lifespan of people in many African countries. Vast numbers of children are being left parentless. Teachers are dying too, and doctors, nurses, and government officials. Yes, there are lifestyle issues for many, but as you'll see in this MC the spectre of poverty isn't absent.

We can't stand back, shake our heads in sorrow and get on with our comfortable, mostly risk-free lives any more than it was right for the priest and Levite to walk by the wounded man on the road to Jericho. It's our job to care, to help, to effect change as far as we can. Some direct aid must happen, and so must campaigning on a big scale to governments and international bodies.

People matter, and millions are suffering and dying because of Aids. It merits special attention and special action. I hope the resources here help inform and encourage us to take action, at least a little.

Yours sincerely

Alistair Brown

Impact on education: in some countries teachers are dying of Aids faster than new recruits can be trained



Quotes

“ He has sent me to bind up the broken-hearted, to proclaim freedom for the captives and release from darkness for the prisoners, to proclaim the year of the Lord's favour and the day of vengeance of our God, to comfort all who mourn, and provide for those who grieve.”
Isaiah 61: 1-3 (NIV)

“ The drama of Aids threatens not just some nations or societies, but the whole of humanity. It knows no frontiers of geography, race, age or social condition... (calling) for a supreme effort of international co-operation on the part of government, the world medical and scientific community and all those who exercise influence in developing a sense of more responsibility in society.”
– Pope John Paul II, visit to Tanzania, 1990

Forgotten families

Orphans who have lost parents to Aids are being left in the care of older people, usually their grandparents. World Bank studies found that in Uganda and South Africa 40 per cent of orphaned children were living with their grandparents, and in Zimbabwe over half.

This can have a huge economic, social and psychological impact on families. Poverty is the main problem. In countries such as South Africa, economic support such as non-contributory pensions is provided, and community-based programmes help older carers to boost income.

Families affected by HIV/Aids often feel rejected by society. Older people have less awareness of the issues surrounding HIV/Aids and can have difficulty giving advice to the young people in their care.

(Main source: *Developments magazine, third quarter 2003*)



Beatrice is a patient at the Vorsi-Congo Aids project in Kinshasa, D R Congo. The project has been supported in the past by the BMS Relief Fund.

Statistics

- About 40 million people are living with HIV/Aids: 2.5 million are children under the age of 15.
- In 2003 three million people died from Aids, 77 per cent in sub-Saharan Africa.
- Five million people became infected with HIV in 2003.
- About 67 per cent of people living with HIV are in sub-Saharan Africa, and 1.5 per cent in Western Europe.
- Every day 8,000 people die and 13,000 people become infected with HIV. That's about six deaths and nine new infections a second.
- Ninety-five per cent of new infections and deaths are in developing countries, over half in Africa.
- Aids will have killed about 68 million people by 2020, more than triple the number who died in the first 20 years of the epidemic.
- Life expectancy in the 35 worst affected countries in Africa is estimated at 48.3 years. This is 6.5 years less than it would have been in the absence of Aids.
- In 1999 alone about 860,000 children in sub-Saharan Africa lost their teachers to Aids.
- About 66 per cent of people with access to antiretrovirals live in high-income countries.
- More than 800,000 children under 15 contracted HIV in 2002, over 90 per cent through transmission from their mother.

(Sources: WHO update 2003, Christian Aid, United Nations, DfID)

Action by the UK

Britain is the second largest bilateral donor on HIV/Aids working in over 40 countries. The government has recently doubled its funding for UNAIDS to £6 million from April 2004 in an attempt to step-up the fight against Aids. (Main source: DfID, 2003)

The 'three by five' initiative

A global initiative to provide antiretroviral therapy (ART) to three million people with HIV/Aids in developing countries by the end of 2005 has been launched by the World Health Organisation (WHO) and UNAIDS. It is called the *three by five* initiative. Currently just 0.1 per cent of the 28.5 million people living with HIV/Aids in Africa have access to ART. (Main source: UNAIDS 2004)

“Let us touch the dying, the poor, the lonely and the unwanted according to the graces we have received and let us not be ashamed or slow to do the humble work.”
– Mother Teresa

“What will we tell our children about how we acted while millions were dying? Are we bystanders, contributors to the indifference, or are we fighters?”
– Rabbi Harley Karz-Wagman in a Global Aids sermon, November 2002.

Bible reflection

Caring for people because they deserved it didn't figure in Jesus' value system. "If you love those who love you, what reward will you get?" (Matt 5: 46) Love isn't about deserving; it's about having compassion for someone in need whatever the cause and whatever the circumstances.

That's how Jesus delivered help:

- He drove a demon from a child, though some would have thought she was of the wrong race for God to be interested (Mark 7: 24-30)
- He fed huge crowds because they were hungry though he'd wanted peace and rest (Mark 6: 30-44)
- He touched the untouchable, a man with leprosy (Luke 5: 13)
- He ate with a man thought a traitor, a servant of the occupying

force (Luke 19: 1-10)

- He taught that people should cross cultural and religious boundaries to help anyone in need (Luke 10: 30-37)

This is loving God and loving our neighbour (Matt 22: 37-40), which is what God's law is all about.

Jesus would have helped people with Aids. He'd have wept for their poverty, hopelessness, helplessness and the desperate price being paid by so many for a sickness wiping out a generation. He'd have healed and restored, and where necessary forgiven and delivered. No hesitation. No conditions. Just compassion. Just mercy.

"Go and do likewise..." (Luke 10: 37) he says still.

The Church's response



Jane Thompson, a GP, was a BMS volunteer in Uganda working on community HIV/AIDS education projects

The churches responded quickly and effectively to the Aids epidemic, providing care for many who were sick and dying. The area of HIV prevention was largely avoided, due partly to difficulties talking about sex, and partly to fears sex education may have encouraged promiscuity. But research has shown that sex education programmes do not lead to an increase in the number of sexual partners, nor do they encourage young people to have sex sooner. There is also evidence

that such programmes reduce rates of pregnancy and STD infection (including HIV).

The Church is in a position to influence society at all levels – it must engage with young people on issues of sexuality and HIV in an open and supportive way. Moral principles do not need to be compromised, but the issues affecting young people must be addressed before it's too late.

'The churches are living with HIV/AIDS. God's children are dying of Aids. As people of faith we have done much, and yet there is much we have avoided. We confess our silence. We confess that sometimes our works and deeds have been harmful and have denied the dignity of each person. We preach the good news 'that all may have life', and yet we fear that we have contributed to death.' – World Council of Churches, 2001

(Main source: Christian Aid report 'Young people, HIV and the churches' 2003)

“The impact of stigma can be as detrimental as the virus itself. The solitude and lack of support it imposes are deeply wounding to those who suffer it. It should also hurt every one of us, for it is an affront to our common humanity.”

Kofi Annan, Secretary General of the UN, speaking on World Aids Day, 1 December 2003



A health education poster from Uganda

From our own correspondent

HIV/AIDS challenges all communities including and especially Christian communities. The problem is huge in Africa, due mainly to associated economic reasons rather than sexual promiscuity. Poverty and disease accompany the spread of HIV and unless the root causes of social and economic exploitation are addressed by the global community, no amount of teaching and preaching about morality by the churches will have any real effect on turning the tide.

In Uganda the HIV rate has fallen from 21 per cent to 9.8 per cent in the past ten years due to increased economic growth accompanied by a good educational programme. The Ugandan government has been supported by other international organisations and together they have addressed the real social problems.

Andrew North, BMS Regional Secretary for sub-Saharan Africa

Debt for Aids



Family members gather round the bedside of an Aids patient in Guinea

Two major obstacles prevent the Millennium Development Goals (MDGs) being met in many poor countries: the HIV/Aids epidemic and the debt crisis.

Aids causes poverty and poverty worsens the spread of Aids. Debt relief could release funds in poor countries to improve HIV/Aids programmes. A strategy to target Aids and debt together has been developed by UNAIDS and the World Bank. It will use a mechanism called 'debt swaps', which is defined by UNDP as 'the cancellation of external debt in exchange for the debtor government's commitment to mobilise domestic resources for an agreed purpose.'

'Debt-for-Aids' is one example of a debt swap that is particularly relevant for countries in sub-Saharan Africa.

Debt relief under the enhanced HIPC (heavily indebted poor countries) initiative is not enough to successfully fight Aids in the worst-affected countries: global funding needs are estimated to reach US\$15 billion by the year 2007. The HIPC process does allow the chance to influence debtor countries in their policy making to prioritise HIV/Aids control.

(Main source: UNAIDS policy information briefing published February 2004)

Useful websites and sources

www.undp.org

United Nations Development Programme. Contains information about the Millennium Development Goals, the Africa 2015 campaign and details of the UN response to Aids.

www.who.int/en/

World Health Organisation. Contains information on HIV/Aids and related topics, details of the *three by five* initiative, and individual case studies.

www.unaids.org

Joint United Nations programme on HIV/Aids. Contains downloadable PDF version of the UNAIDS publication 'Debt-for-Aids swaps'.

www.christianaid.org.uk

Christian Aid UK. For in-depth reports on HIV/Aids visit www.christianaid.org.uk/indepth/hiv aids.htm

www.dfid.gov.uk

Department for International Development (UK government). Gives detailed information about the UK government's response to the Aids epidemic.

www.un.org/issues/m-aids.asp

United Nations site for specific information about Aids programmes and developments, speeches, details of partnerships and other general information.

Profile - Orphaned by Aids

Mary is 12 years old and is the primary carer for her two younger brothers, Moses who is ten, and Benson who is three. Benson was born with HIV. They live in a small village in Zimbabwe. Their father was a migrant worker, who contracted HIV from a prostitute four years ago. During one visit home he passed the infection onto his wife. With no money for HIV drugs their

immune systems rapidly weakened and they both developed TB within two years. Mary and Moses had to leave school to care for their parents during the final stages of their illness.

Now Moses works on a nearby farm for very little money, while Mary cares for Benson at home. Like most children in developing countries infected with HIV from birth,

Benson is unlikely to see his fifth birthday.

This story is fictional but not untypical – there are 16 million children under 15 who have lost at least one parent to HIV/Aids. They are at risk of increased poverty, school absenteeism, malnutrition, psychological problems and exploitation. Four out of five children orphaned by Aids live in sub-Saharan Africa.

Compiled by the General Director and Researcher Emma Pulley