

HIV/AIDS and the Response of Christian Churches



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Background

The devastating impact on human life of HIV/AIDS touches on issues of spirituality, sexuality and justice at their most profound level.

Christian churches and church-based development organisations in Canada have been challenged to respond to the issue of HIV/AIDS by their overseas partners. It is the most vulnerable who are most impacted by HIV/AIDS and thus churches must heed the biblical call – to seek justice and to stand in solidarity with the poor. At the same time Christian churches both in Canada as well as in the South are coming to terms with a legacy that has also included silence, denial and stigmatization.

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 that we have avoided. We confess our silence. We confess that sometimes our words 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 the we have contributed to death." ("Plan of Action." Global Consultation on the Ecumenical Response to the Challenge of HIV/AIDS in Africa.)

While the churches were initially slow in responding to the HIV/AIDS crisis they are now becoming leaders of effective pastoral care

programs as well as taking a leading role in promoting advocacy and prevention. In many countries affected by HIV/AIDS, churches are tied together regionally, nationally, and internationally through denominational and ecumenical networks. This fosters strong community-based networks making churches ideally situated to address the stigma and guilt that have impeded programs of information and prevention.

For church-based development agencies the response to HIV/AIDS developed as the impact of HIV/AIDS began to affect their partners' development programs. Most church agencies work directly with local organizations in areas of health, education, and agriculture. Increasingly

these partners have had to cope with reversals in the progress made on a number of fronts as a result of HIV/AIDS.

Past Responses

Some of the Canadian churches have a long history of advocacy and policy positions on HIV/AIDS. These date back to the late 1980s calling for access to medical services, and housing for people affected by HIV/AIDS, education in churches and resources for pastors. The response from the development arms of the churches was more gradual. In the South, in the early years of the HIV epidemic, it was the church clinics and mission hospitals and primary care centres that pioneered the care of people affected by AIDS. They developed some of the earliest home-based care and orphan programs. The churches, however, also had to grapple with reactions of fear, silence, denial and stigmatization within their congregations and institutions.

In the mid-1990s a more coordinated response by church-based agencies began largely as a result of calls made by staff in the field, especially in health care and isolated from other areas of their work. The late 1990s saw more focused efforts and growing public awareness leading to a recognition of the need for a more coordinated response. While the response has generally been very positive, churches in Canada still face resistance from some elements.

Confronting Moral Issues

A key current challenge is to rethink the theological and biblical underpinnings that have fostered some of the negative responses to HIV/AIDS in the churches. The first step in this process is to come to terms with the exclusionary and stigmatizing tendencies that have come out of a particular theological and biblical perspective. The most challenging to confront

"There is no greater moral calling on this continent today than to vanquish the pandemic." (Stephen Lewis. Address to African Religious Leaders' Assembly.)

is the response that AIDS is God’s punishment to those who have sinned through aberrant or immoral sexual behaviour. This view comes with a number of different responses varying from outright condemnation and shunning of PWAs and their families to an approach of “love the sinner while condemning the sin,” which calls for care while maintaining a steadfast position of condemnation on issues like homosexuality and adultery.

Churches continue to hold sway on issues of morality, including beliefs about the disease, and standards for healthy family life and sexual activity. HIV/AIDS is forcing churches to confront their difficulty in dealing directly with issues of sexuality. While the churches’ response has tended to focus on promoting either fidelity within marriage or abstinence, some breakthroughs are occurring at the community level in terms of talking more openly about prevention through the use of condoms.

The response from church agencies still tends to be a sanitized one: it focuses on children and orphanages overseas and avoids connections to Canada because of the traditional association of HIV/AIDS as the “gay cancer.” Taking on the issues of stigma and discrimination means addressing homophobia, racism, and sexism. Making links with affected communities in Canada and in the South means fostering connections with marginalized groups. “By tracking the development of the HIV/AIDS pandemic, we are delineating the fault lines of Canadian society and the world economy.” Christie Neufeldt, “HIV/AIDS is an Issue of Social Justice”

The biggest challenge for churches is to educate church members about the complex social, gender, cultural, economic, and religious contexts out of which HIV/AIDS operates. Work on definitive theological statements is underway to unite churches and lay the way for education campaigns.

Theologian Musa Dube of Botswana has articulated the key theological challenges facing churches and provides some helpful insights on developing a theological and biblical response to HIV/AIDS. She writes:

- 1) The core of Jesus’ mission, and therefore the core of the church’s mission to the world, is care. “Just as you did not do it to the least of these, you did not do it to me.” (Matt. 25:45) The Christian mission is not about converting pagans but about what we do for the hungry, poor, homeless, etc. This underlines the absolute need for compassion. Jesus is personified in lives of the poor and needy.

- 2) When one member of the community suffers, we all suffer (1 Cor. 12:12-27). This is reflected in the campaign themes adopted by a number of churches, such as “the church has AIDS.” The churches can no longer say that HIV/AIDS is a problem of sinners outside the church. There is no longer any “us” and “them” - only us . . . if the church has AIDS and the church is the body of Christ, then Jesus has AIDS . . . Thus, rejection and stigmatization of anyone with AIDS is a rejection of Jesus.
- 3) We need to re-read scriptures to affirm life and counteract death and adopt a hope-based approach. As Archbishop Ndungane of South Africa asserts, “Stop saying we are going to die.” One of the key challenges is to counter the notion that illness and disease are associated with sin and God’s punishment. Instead what needs to be highlighted is Jesus’ mission of healing and solidarity with the poor.
- 4) Now more than ever the mission of the church is to proclaim liberty throughout the land, freedom to slaves, the poor, women, orphans, etc., and insist on redistribution of wealth for all.

(Dube, Musa. “Proclaim the Fullness of Life in the HIV/AIDS and Global Economic Era.”2002)

Current Campaigns

The current campaigns in the churches are largely a response to partner requests for greater support for their struggle with HIV/AIDS. There is an increased consciousness of the devastating impact that HIV/AIDS is having in some countries and of the complicity of churches in fostering denial and stigmatization. Churches are now combining their emergency programs with their education, advocacy, and fundraising arms and are organizing high-profile fundraising campaigns as an interim response. At the same time, they are looking at the long-term, encouraging member congregations to link with local HIV/AIDS organizations as part of their commitment. Not only are churches supporting partners who are working to directly alleviate suffering, they are beginning to take action to address root causes as well. Such actions include support for projects that are not

“Because all churches are either living with or affected by HIV/AIDS, and because HIV/AIDS touches on many fundamental teachings and practices of the church, this pandemic challenges the very essence of what it means to be the church and live out the love of Christ in the world.” (“Plan of Action.” Ecumenical Advocacy Alliance.)

traditionally in the spotlight such as community-based work, health, education and gender empowerment.

Current campaigns and programs are very much partner-led. For some, local participation is a vital part of an effective HIV/AIDS response program. Others will only support work that is connected to the fight against poverty and also connected in some way to larger networks. Some campaigns and programs have set ambitious fundraising targets over the next two to five years to support partners in community-based responses, prevention, and education. The themes of the campaigns vary but most are trying to link the growing pandemic in southern countries to issues of poverty and marginalizing in Canada.. “The world has HIV/AIDS” or “We have AIDS” are examples of such themes.

It is clear that there has been a fundamental shift within many churches, particularly in the past couple of years. This turnaround is especially evident at the level of church leadership, as this excerpt from a Mozambican bishop preaching on the issue illustrates: “Now many of you believe that condoms are a crime against God ... that wasted semen is a sin but I am here today to tell you otherwise. If you are HIV-positive and you have unprotected sex and you infect someone, you have, in the eyes of God, committed murder . . . So, wearing a condom is not a sin . . . not wearing one is.” (Patient, 2003)

One exciting development is a global initiative by churches to coordinate education and advocacy on HIV/AIDS called the Ecumenical Advocacy Alliance (EAA). The EAA was formed in December 2000 by over 50 churches worldwide. After wide consultation and input it chose HIV/AIDS as one of the two main focuses of its work over the next four years. The 2001-2004 campaign theme, “I care. Do you? The churches say yes!,” has four overarching goals:

- a) To work for the dignity and rights of people living with HIV/AIDS and for an attitude of care and solidarity that rejects all forms of stigmatization and discrimination
- b) To advocate to promote prevention activities that address the root causes of vulnerability
- c) To advocate to mobilize resources to prevent HIV/AIDS and promote care and treatment for people living with and affected by HIV/AIDS
- d) To advocate to increase access to care and treatment for people living with and affected by HIV/AIDS

These goals are accompanied by a set of strategies that range from local to global for churches and their partner organizations to utilize.

“For the churches, the most powerful contribution we can make to combating HIV transmission is the eradication of stigma and discrimination.” (“Plan of Action.” Global Consultation on the Ecumenical Response to the Challenge of HIV/AIDS in Africa.)

Integrating HIV/AIDS work

Because most of the churches’ overseas work is partner-based, the most important challenge is to support the efforts of these partners to address HIV/AIDS. This requires a multi-level approach ranging from leadership of the churches to community-based responses. The overwhelming recognition is the need to overcome the stigma and discrimination which the churches have helped to perpetuate.

African churches faced this issue head on at an important gathering of churches in Nairobi in 2001. The groundbreaking statement emerging from the conference calls for a radical rethinking of mission and a transformation of church structures and ways of working together. The resulting Plan of Action contains a series of commitments around ending discrimination and stigmatization, and stimulating ethical and theological reflection, education, training, and advocacy.

Central to efforts in the churches in the South is the enlistment of the support of religious leaders. Historically they have been reluctant to speak out on the issue – but a dramatic shift is underway in many countries. Churches in affected countries are central institutions at the heart of communities affected by AIDS. Religious leaders are the most important actors to address and mobilize, especially in the effort to overcome stigma and inaction. This development is of enormous significance because of the integral role that religious institutions play within the communities that are most affected by HIV/AIDS. Stephen Lewis refers to religious leaders as a “sleeping giant” who offer the best opportunity to influence political leadership of the North. Churches can lay claim to addressing the spiritual as well as physical dimensions of peoples’ lives in the face of the immense suffering and death resulting from HIV/AIDS.

Challenges for the Future

Growing out of relationships with overseas partners is the recognition that effective advocacy requires a comprehensive strategy through networks that have a

global reach. Many church-based agencies have struggled with the issue of how to support broad-based advocacy efforts around critical issues relating to HIV/AIDS – and four key advocacy areas have emerged:

- Increased funding for the Global Fund to Fight AIDS, Tuberculosis, and Malaria (GFATM), accompanied with calls to increase ODA spending, especially in health-related areas
- Access by poorer countries to affordable medicines
- Cancellation of the debts of the poorest countries
- An end to the imposition of structural adjustment programs, specifically cutbacks and user fees in health and education

Most Canadian church-based agencies have been campaigning on some of these issues for more than a decade, often in coordinated ecumenical efforts such as the Canadian Ecumenical Jubilee Initiative. The challenge now involves integrating support for these campaigns without losing focus on the awareness and fundraising campaigns for HIV/AIDS, which tend to focus on a simpler poverty-based message. It is a challenge to educate on the complexities of the WTO TRIPS Agreement without turning off members who would be more inclined to respond to a call to help AIDS orphans.

Creating joint campaigns on key issues like debt reduction, access to medicines, and funding the GFATM, needs coordination. Canadian churches, either through ecumenical coalitions like KAIROS, or global initiatives like the EAA, are actively engaging in coordinated advocacy efforts. It is these efforts which when combined with a co-ordinated education and response strategy at the community level, will contribute in no small part to an eventual victory in the global struggle against AIDS

Suggested publications, Internet sites, and discussion forums for additional information

Canadian Catholic Organization for Development and Peace. “For an Active Role on the Part of Development and Peace in the Fight Against HIV/AIDS.” Draft Policy Statement. April 2003.

Christian Reformed World Relief Committee and Christian Reformed Church. “We have AIDS.” www.crcjustice.org/crjs_aids.htm

Dube, Musa. “Proclaim the Fullness of Life in the HIV/AIDS and Global Economic Era.” International Review of mission Volume XC1, Number 363

Ecumenical Advocacy Alliance. “Plan of Action. The HIV/AIDS Campaign (2002-2004).” www.e-alliance.ch

Lewis, Stephen. “Address to African Religious Leaders’ Assembly on Children and HIV/AIDS, Nairobi, Kenya.” www.crcjustice.org/crjs_aids.htm

Neufeldt, Christie. “HIV/AIDS is an Issue of Social Justice.” United Church of Canada, The Beads of Hope Campaign.

Paterson, Gillian. “Church AIDS and Stigma.” Ecumenical Advocacy Alliance, Discussion Paper. 2002. www.e-alliance.ch

Patient, David. “Mozambique: The Church, Condoms and Sex.” 2003. Africa InfoServ. www.africafiles.org

Global Consultation on the Ecumenical Response to the Challenge of HIV/AIDS in Africa. “Plan of Action: The Ecumenical Response to HIV/AIDS in Africa.” Nairobi, Kenya. Nov. 25-28, 2001.

Presbyterian Church in Canada. World AIDS Day Worship Resources. www.presbyterian.ca/pwsd/hiv aids

Mennonite Central Committee, “Generations at Risk”, www.mcc.org/aids/index.html

Primate’s World Relief and development Fund, www.pwrdf.org

United Church of Canada. “HIV and Emergency Response: the Beads of Hope Campaign.” 2002. www.united-church.ca

Zents, Alicia. “Making Connections: When AIDS, Justice and Gender Meet.” www.crcjustice.org/crjs_aids.htm

For more information about other religions, please see the following sites:

HIV/AIDS and the Jewish Tradition: http://jewishva.org/content_display.html?ArticleID=4614

Buddhist links HIV/AIDS articles: <http://buddhistlinks.org>

Judaism and HIV/AIDS: <http://www.thebody.com/uscj/judaism.html>

Faith-based response to HIV/AIDS: http://www.unicef.org/aids/index_documents.html