

EHAIA NEWS



Newsletter of the Ecumenical HIV/AIDS Initiative in Africa

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The Church is HIV Positive+.... Poverty destroys

Observations from the Heads of Churches Summit on HIV/AIDS and NEPAD Nairobi, June 7 to 10, 2004 By Christoph E. Mann

The organizers of the Heads of Churches Summit purposely chose a title with a double meaning: yes the church has HIV because the church is part of the people; and: yes the church wants to do away with stigma and discrimination and take positive action to tackle the problem of HIV/AIDS.

During the course of the conference it became clear that this was not only the idea of the organizing committee but also of the participants. Considering that never before had there been so many Heads of Churches gathered on the subject of HIV/AIDS (no replacements for the head of church was permitted), the number of participants was indeed a sign of how serious African churches are taking the epidemic.

The inputs to the summit were mostly thoughtful, broad, honest, and based on speakers' deep involvement in the struggle. Some aspects have never been spoken out and discussed on that level of church leaders, e.g.: How about behavior change of church leaders? Why do most positive clergy not dare to come out? What can be done about intergenerational sex in its various forms? If such discussions can be carried from lamenting among leaders into the parishes, there will be a big increase in positive action in the churches.

A summit has to pass a declaration. Again the heads of churches reached a new quality of resolve: Firstly the Declaration does not start from scratch just repeating correct statements and desirable objectives like many others before. Instead it starts with reaffirming commitment to existing basic documents, namely the AACC Covenant on HIV/AIDS of Youndé 2003 and the Ecumenical Plan of Action of Nairobi 2001, the latter being the base of EHAIA. Secondly the Declaration tries to operationalise into concrete steps the insights and commitments of previous documents. Here are just a few examples of many:

- The last Sunday of November will be dedicated to fasting and prayer for the rapid end of HIV/AIDS related stigma, discrimination, inaction and misaction.
- The leaders committed themselves to promote their active participation of church institutions in the 3 x 5 programme of WHO (3 million persons in ARV treatment by 2005).
- They promised support to their overburdened health facilities, e.g. through lobbying with governments for recognition of their contribution or for getting them represented in National AIDS Councils and Country Coordinating Mechanisms of the Global Fund

Thirdly the declaration makes several times a clear commitment to the communities, that is to where people live and suffer. The heads of churches want them to become centres of mutual spiritual and material support, of knowledge, advocacy and resources.

A last remarkable aspect of the summit was the endorsement of the plan of AACC organizers to take the process to the next level of church leadership, the general secretaries or CEOs of churches: four regional conferences were scheduled during the rest of the year 2004. These administrative heads are always left out from discussions of substance, while on the other side they are expected to find money and make things happen. (EHAIA Reference Groups and staff usually get to see the Bishop and the AIDS activists in the church, but rarely the General Secretary – we should not wonder if programmes are not coming up or running as smoothly as we hope, if we leave out the managerial level!)

The two days of HIV/AIDS deliberations were followed by one day of discussions on NEPAD. From EHAIA perspective the summit took the African church leadership a big step forward in HIV/AIDS action. The spirit of resolve that was clearly there will hopefully carry the action to community level as intended.

The full report of the Summit is available from the All Africa Conference of Churches in Nairobi.

The Lusophone Conference on HIV/AIDS Luanda 24 – 26 May 2004

By Dr Sue Parry: EHAIA Southern Africa Regional Coordinator

An HIV/AIDS Conference for Portuguese speaking countries was held in Luanda, Angola in May 25-27, 2004. This conference brought together representatives from all the major Portuguese speaking countries in Africa: Angola, Mozambique, Cape Verde, Guinea Bissau, Sao Tome & Principe, with additional representation from Portugal and Brazil. It involved key stakeholders and the faith based organisations that are in the forefront of care initiatives and have an untapped potential to more seriously deal with the key determinants of the pandemic.

EHAIA and Caritas hosted the Conference, with the Christian Council of Angola and the Christian Medical Commission coordinating the conference from the Angolan side. EHAIA and WCC were the principle funders with assistance from ICCO, Church World Service, Norwegian Church AID and a pledge from Christian AID. The Catholic Church of Mozambique paid airfares of their delegates, and Caritas funded the transport of the Angolans.

This Lusophone Conference was a unique and thus historic event in that, for the first time ever, these representatives and countries were meeting together to confront the issues of HIV and AIDS.

The Conference was organised in response to a call from the Portuguese speaking countries in Africa, who felt they were being side-lined by the Franco-and Anglophone countries, when it comes to major HIV/AIDS meetings, and to the availability of appropriate literature and resource.

Angola was chosen because, although it currently has a low HIV sero-prevalence, it has just emerged from over three decades of conflict. Conflicts generate and entrench many of the conditions and human rights abuses in which the HIV/AIDS epidemic flourishes. Added to which, large numbers of refugees, from countries of high sero-prevalence, will soon be returning to that country. HIV/AIDS is *also* a source of conflict. There is much to learn from other countries that have experienced similar trauma and are seriously affected by HIV/AIDS.

Orphans and other vulnerable children are a serious concern in many of these countries, and few know how best to respond sensitively, specifically and sustainably, empowering the children and giving them hope for the future.

As HIV/AIDS impacts on all sectors of society, we were seeking to enhance collaboration in response to HIV/AIDS. The need to respond effectively and with urgency has never been greater and hence the conference sought to highlight and motivate around these pertinent issues.

Thus the aim of the Conference was to raise awareness of the situations within these countries, share

best practices and form networks of Faith Based Organisations (FBOs) around HIV/AIDS within and between the countries.

A core of 6 – 10 people per country had been invited so that post - conference activities in individual countries could be more easily facilitated than with only 1 or 2 persons. Participant selection from each of the representing countries had, in itself, created small networks of stakeholders as they met to discuss who would be most representative of their respective countries. For some, this was the first time they were meeting with other denominations and HIV/AIDS programme managers within their own countries. There was a tangible sense of high expectations and commitment to the issues at stake. This led to frequent and open participation.

Some countries sent a representative from their Government National AIDS Commission, or other similarly involved Ministry, who acted as resource persons for the country concerned and also forged greater collaboration with the Faith Based Organisations as a consequence of this exposure. Particularly impressive was the delegation from Mozambique which included representation from the National AIDS Council, the Christian Council, the Christian AIDS Network, the Interfaith AIDS Network (led by Mohammed de Costa Ali, a Moslem), the Circle of Concerned African Theologians, World Conference of Religions and Peace, a Journalist and the director of Justa Pax. Their collective, complementary experiences and deep commitment significantly added to the quality of discussions and ensuing recommendations

In preparation for the HIV/AIDS Conference, on Sunday afternoon 23 May, an Ecumenical Service was celebrated at the Methodist Church of Luanda. The service was supported by a wonderful host of choirs from different denominations, as well as the band of the Salvation Army, and truly demonstrated the Angolans' capacity to sing. Many of the hymns and songs were written specifically to address issues of HIV/AIDS, isolation, conflict, compassion and solidarity. Rev. Matsolo (Mozambique) led the sermon. It was an appropriate start.

The Conference opened the following morning with 98 participants and several invited dignitaries.

Rev. Luis Nguimbi of CICA welcomed the delegates to Angola and introduced the theme and reason for the forth-coming conference: "The time has come for lusophone countries to write their own page. It is the intention of this gathering to blot out the poor image, which was ours in International gatherings. We have to impose our right to a space, a space that is not handed down on a silver platter but has to be earned. The conquest is achieved by dedication, orientation and hard work."

The three-day programme was arranged to cover different themes, which were further developed in group- work. The recommendations raised culmi

nated in a final "Luanda Declaration" (see frame) which was released to the press during the concluding ceremony.

Proceedings each day commenced with a reflection to set the tone for the day with an appropriate scriptural challenge.

Day One was devoted to country reports on the national responses of Churches to HIV/AIDS. Some countries had prepared very detailed studies of the HIV/AIDS situation, including details of the Government national strategic response, whilst others were less well prepared showing very little knowledge of the local situations and with very little qualitative or quantitative data presented. The level of response between the countries is very marked, highlighting the urgent need to increase awareness and upscale responses.

A moving testimony from a person living with HIV brought the 'human face' to the statistics.

Deliberations then centred on the Church and HIV/AIDS: past, present and future as well as HIV/AIDS as a source of conflict: in the family, in society and in the Church.

Day Two centred on "Challenges" and focused on issues relating to orphans and vulnerable children, stigma, gender challenges and on developing efficient strategies to combat HIV/AIDS through a multisectoral approach, involving the Churches, between and within the lusophone countries.

Churches were also challenged to find the resources needed to finance their programmes by responding to the possibilities presented by the global non-traditional donors: "If necessary, cross denominational barriers and join hands in accessing resources to respond to the huge threat of HIV" (C. Mann).

A local drama entertained the audience revealing common perceptions on transmission and stigma.

The final day had the theme of "Working Together," looking at examples of networks and areas of collaboration from Rede Crista (Mozambique), Koinonia (Brazil) and Catholic Relief Services. In addition, the EHAIA Plan of Action was introduced as a possible structure for action. In depth discussions ensued on the creation of national networks and the identification of possible problems and solutions.

The Conference had highlighted the sense of isolation experienced by many of the African lusophone countries in relation to HIV/AIDS, and the lack of resource material to assist their programmes. A serious intention to strengthen ties and cooperation between the respective countries was expressed, as well as the need to develop more visible and effective responses to HIV/AIDS amongst faith communities. It was a positive conference, well worth the effort, and heralded the start of on-going relationships and support for each other.

To all, sincere gratitude is expressed for the commitment

FAITH BASED ORGANISATIONS OF THE PORTUGUESE SPEAKING COUNTRIES: CONFERENCE ON HIV/AIDS 24-26 MAY 2004

LUANDA DECLARATION

(summary of commitments made)

Gathered in this great Conference in the Luanda city, Angola, as the Faith Based Organisations of the Portuguese speaking countries, we unanimously commit ourselves to redouble our efforts in the fight against the HIV/AIDS pandemic by:

- 1. Establishing an Ecumenical Network of the Faith Based Organisations of the Portuguese speaking countries, in a two year rotational system, starting with Angola. This network will be designated: "The Ecumenical Network of the Lusophone Countries in the Fight Against HIV/AIDS."
- 2. Establish and reinforce, in each member country, a 'Network of the Faith Based Organisations,' as well as strengthen links of complementarities and cooperation with the respective Governments, NGOs and International Agencies.
- 3. Establish mechanisms of propagation of information among the lusophone partner countries (exchange information and share best practices)
- 4. Create conditions enabling the empowerment of the national networks in issues relating to the management and implementation of HIV/AIDS projects and programmes.
- 5. Create the conditions allowing the next conference to take place in Mozambique, falling to this country the responsibility of coordination and organisation of the event in question.

The churches of Madagascar Meet for the First Time in their History to Talk About the Struggle Aainst HIV/AIDS

"As the EHAIA Bulletin is a place for lively sharing of practical and spiritual experiences in connection with the struggle against the spread of HIV/AIDS, we are happy to send you these few lines from Madagascar". Vololona Randriamanantena

During the third week in June 2004, on the occasion of a visit from the heads of EHAIA, Doctors Christoph Mann and Sue Parry, who had come to the Big Island to get acquainted with our local reality, the churches as well as leaders of the Malagasy government and of other associations experienced a high point in our struggle against the spread of HIV/AIDS.

Of course the members of the Federation of Christian Churches of Madagascar (FFKM), that is the Reformed, Anglican, Roman Catholic and Lutheran churches, meet periodically to discuss our involvement in the life of our country. But this was the first time in their history that the churches had held a working meeting devoted to the AIDS struggle. It was held at the office of the National Committee on the Struggle Against AIDS (CNLS) with Drs. Mann and Parry.

This time of sharing was an opportunity for the churches and associations present to get to know one another better, so as to cooperate in the future. On this occasion an important step was taken in the struggle against AIDS and the challenges which it poses.

At present each church is working within its own region, as far as its own resources and finances permit, but in the course of this meeting the possibility was raised of creating a forum, gathering together all religious groups on the island.

The churches are very influential, since they are present even in the most remote areas. At this time, thanks to them, awareness of HIV/AIDS prevention is reaching 50% of local church members.

For five years the church has essentially been advocating sexual abstinence and faithfulness, and has not mentioned condoms. But now it should study how concretely to recommend abstinence and faithfulness in its teachings, through sermons, Bible studies and its practices in witness and helping.

The Filadelfia and Fifafi Associations are beginning to take over the care of HIV-positive persons.

At this meeting the church representatives had the joy of hearing about the EHAIA ecumenical initiative, which seeks to give the church competence in dealing with HIV/AIDS and also promotes the establishment of inter-church relations.

There is positive cooperation between church and state in the struggle against AIDS [in Madagascar], as witnessed the meeting with the director of the Ministry of Population and the head of the President's office.

We learned from this visit that the churches are called to meet challenges such as openness and perseverance; openness towards other churches and confessions on the Big Island, and to other religions such as Islam and traditional religions, thus to free themselves of every sort of behaviour which is contrary to the will of God; perseverance, because in view of the material and human resources which the churches have at their disposal, it will take time for us to reach the community at the grass-roots level and bring it a clear and compelling message. The church is called to be unflagging in its active participation and keep the struggle on track to prevent the spread of HIV/AIDS. It is also called to transform itself in-

wardly, to become a loving and welcoming community, a church equipped to serve effectively.

The churches of Madagascar, as the body of Christ, follow the Lord's example in words and deeds in the struggle against AIDS. The aims of EHAIA are the aims of our churches, and our desire is to be competent in the struggle against HIV/AIDS.

Christian Aid – interfaith in practice

a contribution from Christian Aid

Christian Aid's mission statement emphasises that it works with people of all faiths and none. Islam, Buddhism, Hinduism, and various indigenous and traditional faiths are the religions of hundreds of millions of the poorest. If "all should be included in the feast of life," then all forms of interfaith dialogue and co-operation (IFDC) fulfil an important role in development work.

This is as true in the context of HIV as it is anywhere. People's attitudes towards religion play a significant role in determining their risk behaviour, and all development work needs to be contextualised in order to reach proponents of particular faiths.

Research suggests that the relationship between religious and spiritual beliefs and individual perceptions, attitudes and behaviour is complex. People's beliefs and their ability to overcome fatalism seem strongly correlated to attitudes towards sexual and reproductive health, and have far-reaching implications for those involved in HIV education and prevention work. Such beliefs influence people's decision-making and must be considered in any prevention programmes seeking to encourage behaviour change to reduce the spread of HIV. Educational campaigns about HIV prevention often fail in spite of well-calculated strategies because many do not believe that they are able to take meaningful action to protect their own health.

Many FBOs and religious leaders have formally acknowledged their initial resistance to involvement in HIV work - a slow response that encouraged silence and denial, and even exacerbated stigma and discrimination. A considerable amount of HIV work has been done by all religions, however, both separately and together; but not enough through IFDC. Furthermore, much of such work remains limited by a lack of understanding of the issues and the people affected, and lack of direct PLHA involvement. Dogmatic, conservative or fundamentalist religious approaches to HIV, continuing its associations with sin, may persist even where information on HIV is available.

In addition, there is still poor understanding amongst FBOs of how social inequalities, including gender inequity, exacerbate the problems faced by poor men and women and reduce the range of choices available to them. Effective IFDC is hindered by tensions

within and between different faith traditions and differences in approaches to HIV.

These problems highlight the considerable potential for developing IFDC on HIV further. Interfaith leadership is critical. This can come either from progressive spiritual leaders or from community-based organisations working with PLHA in religiously plural societies.

The African Network of Religious Leaders Living with or Personally Affected by HIV & AIDS

ANERELA+ was formed by a group of HIV positive religious leaders operating across all faiths. Under the leadership of their coordinator, Fr. Japé Heath, they are focussed on forming networks of support and advocacy with other HIV + religious leaders throughout Africa. They conduct retreats in which they build the capacity of participants to become advocates of hope and change in their own congregations, communities and countries. This rapidly-growing network uses its members' massive potential, as religious leaders living with HIV, to challenge and overcome the stigma, discrimination, denial and inaction frequently associated with HIV and AIDS.

The CA definition of IFDC includes informal IFDC occurring at the grassroots or community level, going beyond established religions to include marginal, less established or minority faiths. CA's IFDC categories are more continuous than discrete, and can best be described as a continuum between the formal and the informal. At the formal end, IFDC is deliberate, led by spiritual leaders, occurs through official religious structures and is considered important in its own right. At the informal end, it is context-specific, exists naturally because of religious plurality, often occurs without reference to formal religious structures or doctrine, and can be undertaken by both secular- and faith-based organisations.

The gender dimension

Responding to obstacles of social inequality, CA incorporates a gender dimension into its understanding of how IFDC works in practice. Often, women have less decision-making power and authority than men at the level of religious leadership - and, conversely, more responsibilities and tasks at the grassroots level. Religion has a different impact on men and women, both at the level of individual belief and through so-Research suggests that some cial institutions. women's social and economic disempowerment is exacerbated by their low status in some religions and by their own belief systems. Religious influence can increase women's vulnerability to HIV rather than strengthen them. Where religious tradition and personal beliefs compromise a woman's influence over sexual decision-making, her vulnerability to HIV is increased.

There are positive examples, however, of religious beliefs liberating women from oppression, or strengthening their position in communities. Studies suggest that different religions have a different understanding of sexuality and health, influencing how women perceive risk. Women have important roles in community and family life and are often just as involved in daily religious activity as men - if not more so. Constructive IFDC that targets or reaches such women has tremendous potential in the struggle against HIV. These women are often directly responsible for the health and religious education of their children, both of which are important in HIV education. The involvement, participation and decisionmaking of women and children in IFDC HIV work should be prioritised by religions, governments and

IFDC is mentioned explicitly as a priority in only a few of Christian Aid's Country Programme Strategies, although in some countries this may be deliberate owing to sensitive religious contexts. In other countries, however, insufficient attention to the potential offered by IFDC to overcome obstacles to development and improved public health represent a significant loss of opportunity. Christian Aid's ecumenical identity and its grounding in religiously plural countries seems to beg a full assessment of such opportunities. Greater focus must rest in the future on interfaith dialogue.

New books/resource material available from WCC Publications, P.O. Box 2100,

1211 Geneva 2, Switzerland, e-mal: publications@wcc-coe.org

AfricaPraying: A Handbook on HIV/AIDS Sensitive Sermon Guidelines and Liturgy. Edited by Musa W. Dube, 2003, price USD 17.50. This resource book is designed for all who have to handle situations created by this relatively new epidemic church leaders/workers, Sunday school teachers, youth leaders, the laity. It seeks to "equip the church leader/worker with strategies to break the silence and stigma surrounding HIV/AIDS, creating a compassionate and healing church". And it seeks to "help them by underlining how the Christian faith calls us to serve and to heal God's world and people". The five sections give sermon guidelines and worship outlines for services ranging from weddings to funerals; such key moments of the church's year as Christmas and Easter; attitudes of compassion or discrimination; congregations peopled by youth or grandparents; and social realities like poverty and gender inequality. (If you live in Africa please order this book from your regional coordinator free of charge)

AIDS, Meeting the Challenge, Data, Facts, Background: by Sonja Weinreich and Christoph Benn,

2004, price USD 14.90. This book provides essential information for coalitions working locally, regionally and globally to prevent the spread of infection and to offer humane treatment and community resources to people living with HIV/AIDS. It is based in the authors' personal experiences and research as they have engaged in the campaign to eradicate AIDS. They address matters of medical fact, and also take into consideration sociological, psychological and theological questions that inevitably arise. This book is a compendium of current information on the crises of HIV/AIDS, with indications of how readers may continue to update their knowledge amid the constant changes in basic data, scientific developments and a flood of specialized literature. Among the many topics covered, readers will find sections of the book on HIV transmission, vulnerability to infection, socio-economic contexts, stigma and discrimination, prevention, care, antiretroviral therapy, advocacy and lobbying, as well as reflections on the churches, theology and HIV/AIDS. (If you live in Africa you may order this book from your regional coordinator free of charge)

CD ROM: Resource material for Churches and Communities (compiled in June 2004): This CD-ROM has all the WCC HIV/AIDS related material from 1986 to 2003: WCC statements and studies, statements from African Church Leaders' Consultations, Mapping of Resources, Teaching and Training Material, Liturgical Material and Other Documents. A number of the documents/publications are also in French and Spanish. (if you live in Africa, you may obtain this CD from your regional coordinator free of charge). If you are from another continent, please address your request to Tania Zarraga at:

ttz@wcc-coe.org

We are very pleased to inform our readers that as of 1 September 2004 **Charles Klagba**, originally from Togo, will be our **new Theology Consultant**. Charles studied theology and philosophy in Porto-Novo, Benin, and has a postgraduate Diploma in Pastoral Studies from the University in Birmingham. He is fluent both in French and in English. We wish him a very warm welcome with EHAIA.

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