



EHAIA NEWS



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Equipping the whole Church to become an HIV/AIDS-competent Church

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The challenge for us in this era of HIV/AIDS is to equip the whole Church in Africa efficiently to fight this pandemic in a way that the Body of Christ becomes “*a transformed and life-giving church, embodying and thus proclaiming the abundant life to which we are called, and capable of meeting the many challenges presented by the epidemic of HIV/AIDS.*”

The Church needs to engage in a serious re-reading of the Bible and to re-shape its discourses that aim at dealing with the daily concerns of the people. The work of the theology consultant is to assist the Churches through the training of trainers at the different levels in this process.

Theology must be a dynamic and contextual process by which Christians (as individuals and as communities) reflect on events and experiences of daily life, try to comprehend them in the light of the Gospel, and commit themselves to actions of transformation. This implies that doing theology should go beyond intellectual exercise. It has to suggest and provide practical tools for Christians at all levels.

This is a major shift in our work: the training of the trainers (TOT) is not only directed towards the academic world but also towards individuals or groups involved in any form of training in churches or in church institutions.

For example, workshops focus on: re-reading the Bible in the HIV/AIDS era; ethics and the HIV/AIDS struggle; mission and HIV/AIDS; African religions and HIV/AIDS; doing theology in the HIV/AIDS era; preaching in HIV/AIDS context.

Equipping the whole Church to become an HIV/AIDS-competent Church also involves providing trainers with relevant literature that can be a practical tool for training at all levels, and especially at the grassroots.

This need was forcefully expressed by many heads of Christian Education Departments in Francophone Africa during the workshop held in Porto-Novo (Benin) from 14th to 18th March 2005. The observation was made that a great number of publications on HIV/AIDS come from NGOs and international bodies. Very little literature with a biblical and a Christian perspective is produced by churches. This is a serious lacuna in the churches' commitment to the battle against the HIV and AIDS pandemic.

Many Christian education departments do not have the means to conceive and produce appropriate and adequate Christian training tools to be used at grassroots level.

One of the challenges to be met in equipping the Church for carrying out its mission is to provide these departments as quickly as possible with relevant pedagogical tools on themes such as:

- accurate factual information on HIV/AIDS in a simple language avoiding a discriminative vocabulary
- Christian approach(es) to illness and to HIV/AIDS
- discrimination and stigmatisation
- Counselling and pastoral care for those infected and/or affected by the HIV/AIDS pandemic.

All these themes must take into account some crucial issues:

- change of behaviour
- social and cultural realities
- gender relations and violence towards women.

In the context of HIV/AIDS the Word of God must be used to liberate, to care, to heal; not to exclude, to discriminate and ultimately to kill. The key to success in this missionary enterprise is to use any available opportunity to equip, and empower women and men, adults and the youth at all levels in the life of the Church.

HIV and AIDS calls for Advocacy as well as Care

*Sara Speicher, Communication Consultant,
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When the Ecumenical Advocacy Alliance was created in December 2000, potential participating organizations were asked at the founding meeting: What two issues are most in need of our common advocacy – and where can we as churches and Christian organizations most hope to make a difference? The participants named the injustice of global trade – and the global crisis of HIV and AIDS.

The Alliance identified the HIV and AIDS pandemic as one of the gravest challenges to health and also to the prospects of social and economic development, global security, and human rights. It is one in which the churches should be particularly concerned – requiring prophets who are willing to see, hear and act outside the comfort of the known.

In its first four-year campaign against HIV and AIDS, the Ecumenical Advocacy Alliance made important gains in lifting the silence about the disease within the global church community, of addressing stigma and discrimination against people living with HIV and AIDS, of making faith-based organizations leaders in advocating for adequate resources and access to care and treatment especially for the poor and most vulnerable.

Yet the dimensions of the HIV and AIDS pandemic are still measured in alarming statistics. According to UNAIDS, an estimated 39.4 million people are living with HIV. In 2004, about 4.9 million people around the world became infected, 640,000 of them children. From 1981 through 2004, AIDS killed over 23 million people. In 2004 alone, AIDS claimed 3.1 million lives. Sub-Saharan Africa remains the most affected region and is home to about 65% of the total number of people living with HIV worldwide. Twelve million children living in Sub-Saharan Africa were orphaned by AIDS by the

end of 2003. Women and young people account for a growing percentage of people living with HIV.

Behind these tragic statistics are the lives and stories of individual women, men and children, their families and their communities. Most of these stories tell of illness and death, the breakdown of family, community and society. But many also witness to inspiring acts of courage and commitment, revealing that the loss of life does not mean the loss of self, or the loss of love and care and what binds us together in a community of human persons.

This reality calls for the accompaniment and pastoral response of churches. Because all churches are either living with or affected by HIV and AIDS, and because HIV and 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.

Many churches and communities around the world have responded in deeply caring ways through health services, spiritual care, awareness raising and education.

Many, though, have not. And the growing scale of the crisis still means that all churches and all Christians must get involved – and build on their growing knowledge and skills to become better advocates at local, national and international levels. Here are just a few ideas:

Fight HIV and AIDS-related stigma and discrimination.

Stigma and discrimination prevent people from learning the facts about HIV and AIDS and seeking help, and denies necessary support and care.

- Take the *Next Steps* in working in your community against stigma and discrimination. A practical resource in English, French and Spanish is available at http://www.e-alliance.ch/ns_cdrom.jsp or in print (see contact details below).
- Hold a Poster Competition to encourage discussion and raise awareness about HIV and AIDS (http://www.e-alliance.ch/ns_2003c.jsp).

- Include people living with HIV and AIDS in your organization's planning and decision-making discussions and committees.
- More resources to help you are found at: http://www.e-alliance.ch/ns_index.jsp.

Promote prevention approaches that deal with root causes of vulnerabilities.

- Learn about the special vulnerability of women and girls to HIV.
- Challenge harmful practices and traditions that enable the spread of HIV and reaffirm positive practices directed at preventing HIV transmission.
- Already start planning activities for World AIDS Day, 1 December 2005.
- Consider how your church or community can address issues of sex and sexuality in an open and honest way that helps young people make informed choices.

Advocate increased access to treatment and care.

- Write to your national government to urge them to dedicate increased and sufficient funds to fulfill their responsibility to respond to the HIV and AIDS crisis in the country.
- Write to your national government to provide adequate funds to the World Health Organization's 3 x 5 campaign (<http://www.who.int/3by5/en/>).

Mobilize resources for global action.

- Write to your national government to fulfill and/or increase its funding to the Global Fund to Fight HIV/AIDS, Tuberculosis, and Malaria (*tie to Action alert*).

Read. Share with friends. Act.

- Subscribe –for free – to the EAA's regular HIV and AIDS bulletins and action alerts, which are distributed by email. Subscribe at: <http://www.e-alliance.ch/signup1.jsp>

We can be overwhelmed by the scale of the HIV and AIDS pandemic. But the scale of the crisis determines the scale of the response needed. By responding - by increasing our own commitment, our partnerships, our skills - we can together successfully fight AIDS.

The **Ecumenical Advocacy Alliance** is a broad international network of churches and Christian organizations cooperating in advocacy on global trade and HIV and AIDS. The Alliance is based in Geneva, Switzerland. For more information, see <http://www.e-alliance.ch/> or email info@e-alliance.ch or write to the Alliance at P.O. Box 2100, 1211 Geneva 2, Switzerland.

EHAIA Sub-regional Staff Visit to Geneva

Geneva-based staff report

Following a recommendation by the last International Reference Group Meeting (IRG), EHAIA coordinators, the Theology Consultant, and the AACC HIV/AIDS coordinator visited Geneva from 25 to 31 May 2005. The purpose of the visit was to exchange information and to become personally acquainted with colleagues in the Ecumenical Centre and meet staff from other international agencies based in Geneva. The visit was of mutual benefit, and Geneva staff inside and outside the WCC gained a better understanding of the AIDS epidemic in Africa and EHAIA's contribution to make churches 'AIDS-competent.'

The visit was arranged to coincide with the WCC 'Week of Meetings', an event when all WCC staff gather in Geneva to discuss a particular theme. Although this WOM was to discuss preparations for the next WCC Assembly (to be held in Brazil in February 2006), EHAIA staff were given a full day to inform WCC staff about their work in Africa and to promote the mainstreaming of HIV into the WCC agenda. For example it was asked how EHAIA as an Ecumenical Initiative can suggest African churches develop HIV strategies and workplace policies if WCC itself has none. After the morning plenaries interactive learning sessions were organised for smaller groups in the afternoon. The whole event was very well attended and many WCC participants expressed their appreciation.

A half-day programme was organised for EHAIA staff to meet with UNAIDS. Topics discussed were the "Three Ones" principles, "AIDS-competency", the relationship between EHAIA and some UNAIDS national offices and opportunities for cooperation between them. As an immediate result of this meeting, some EHAIA coordinators who had previously not been able to get appointments with UNAIDS country offices promptly received invitations to meet and discuss collaboration.

Representatives from WHO, the Global Fund (GF) and the International Aids Society met with EHAIA staff for a whole afternoon. The problem of churches and faith-based organisations to access GF financial resources was raised. The Global Fund representative confirmed that the only way to apply for funds is through the Country Coordinating Mechanisms (CCM). Although churches sometimes lack capacity or are unwilling to enter alliances with other civil-society members, EHAIA coordina-

tors gave first-hand reports about CCMs where grants are only awarded to NGOs that "paid" for them. There was also discussion regarding the rolling-out of anti-retroviral treatment through the WHO 3 x 5 campaign and the capacity and willingness of FBOs to handle this. The WHO representative requested the help of EHAIA coordinators to identify church health programmes that would have the capacity to engage in this campaign.

EHAIA staff had individual meetings, including luncheon meetings, with WCC Communications, Publications, Finance Office, Human Resources, as well staff from ACT International and a representative from the GIPA network (Greater Involvement of People living with HIV/AIDS).

The only break away from work was a Saturday outing into the Swiss mountains, with a visit to a cheese factory and a typical Swiss meal which all thoroughly enjoyed.