

 **GLOBAL AIDS: FACING THE CRISIS**



Members of the Sinikithemba HIV+ Choir, from Durban, South Africa.

The global AIDS crisis staggers our imagination. The scale of human loss undermines the social and economic fabric of entire nations, especially in Africa. At current rates, 100 million people worldwide will be infected by 2010. Of the 14,000 persons infected each day, 85% live in the developing world. Tragically, only 5% of people in the developing world who need lifesaving AIDS medications have access to them because they are too expensive, and/or trade laws restrict their importation. In Africa, over eleven million children have lost at least one parent to the disease, leading to an explosion in “child-headed households.” AIDS has wiped out as much as one quarter of the labor force in some African countries, creating economic havoc and fueling hunger.

While a cure for AIDS remains elusive, effective responses to the AIDS crisis are well known: political and civic leadership speaking out against the stigma and discrimination associated with the disease, HIV testing that is voluntary and confidential, comprehensive health care including prevention education, improved nutrition and economic security, and access to life-extending antiretroviral medication. Churches and other faith-based groups with their strong community connections have proven to be key contributors by providing critically needed health services and care for families affected by the disease. Increasingly, churches in concert with people living with AIDS are also raising their voices against the stigma associated with AIDS and calling on the international community to more generously support a vigorous response.

**... And when was it that we saw you sick or in prison and visited you?  
And the king will answer them, ‘Truly I tell you, just as you did it to one  
of the least of my family, you did it to me.’ Matthew 25:39-40**



## DEADLY DIMENSIONS

**AIDS statistics are numbers with the tears washed off.**  
*Dr. Brigid Corrigan in Coming to Say Goodbye*



Paul Jeffrey/ACT

- Prevalence remains low in the Czech Republic, Hungary, Poland, and Slovenia, where well-designed national HIV/AIDS programs are in operation. *UNAIDS*

### ASIA

- Several countries in Asia and the Pacific, including India, China, Indonesia, and Papua New Guinea, may face huge growth in their epidemics. UNAIDS warns that 11 million more people will acquire HIV in Asia by 2007, unless concerted and effective action is taken to increase access to HIV prevention and care in the region, where the epidemic is still in its early phases.

*UNAIDS*

### LATIN AMERICA AND THE CARIBBEAN

- Haiti and the Dominican Republic account for over 80% of all AIDS cases in the Caribbean — the region with the 2nd highest AIDS prevalence rate after sub-Saharan Africa. *UNAIDS*

- Determination to stem the epidemic and limit its impact is most clearly seen through efforts to provide antiretroviral drugs to patients with HIV/AIDS-related disease. For example, Argentina, Costa Rica, Cuba, and Uruguay now guarantee free and universal access to these drugs through the public sector. *UNAIDS*

### NORTH AMERICA

- The availability of antiretroviral drugs since 1995/1996 has dramatically reduced HIV/AIDS-related mortality. *UNAIDS*
- There are 40,000 new infections in the U.S. annually. The epidemic is shifting into poorer and more marginalized groups. African-Americans, who constitute 13% of the U.S. population, accounted for 54% of new HIV infections in 2000. AIDS-related illnesses remained the leading cause of death for African-American men aged 25-44 and the third-leading cause of death for Hispanic men in the same age group.

*Centers for Disease Control/UNAIDS*

### AFRICA

- Although Africa accounts for 10% of the world's population, Africans comprise 70% of all HIV/AIDS cases globally. *UNAIDS*
- HIV/AIDS is the leading cause of death in sub-Saharan Africa. *UNAIDS*
- 7 million agricultural workers in 25 African countries have died of AIDS since 1985. In 2001 alone, AIDS killed nearly 500,000 people in the six predominantly agricultural countries threatened with famine, most of whom were in their productive prime. *UNAIDS*

### EASTERN EUROPE

- Has the world's fastest-growing HIV/AIDS epidemic. *UNAIDS*
- In Russia, HIV epidemics have been found in 87 of the country's 89 regions. Over 90% have contracted the virus from injecting drugs with unclean needles. *UNAIDS*

## AIDS IS A HUNGER ISSUE

The links between AIDS and hunger are chillingly simple. As farmers fall ill, their ability to plow, plant, cultivate, and harvest declines, leading to less available food. Food security is further threatened by the diversion of time, energy, and money to deal with the illness. As the family's nutrition suffers, those who are HIV-positive are more susceptible to opportunistic infections. As agricultural households revert to subsistence rather than cash crop farming, there is less family income and less food produced for the nation as a whole. Moreover, the transmission of knowledge from one generation to another about how to farm is being broken, with frightening implications for future food shortages.

*Africa Recovery*

The famine in southern Africa brings the world face-to-face with the deep and devastating impact of AIDS. What we are seeing today in a number of countries of sub-Saharan Africa is an HIV epidemic that is overwhelming the coping resources of entire communities. We must act now, on a much larger scale than anything we have done before, not only to assist those nations already hard-hit, but also to stop the explosive growth of AIDS in the parts of the world where the epidemic is newly emerging.

*Dr. Peter Piot, Executive Director of UNAIDS*

## CONTRIBUTING FACTORS... POTENTIAL SOLUTIONS

**For there to be any hope of success in the fight against AIDS, the world must join together in a great global alliance.**

*Kofi Annan, U.N. General Secretary*

**STATUS OF WOMEN:** Gender-biased social and legal inequities — in owning land, getting a job, and accessing health services, for instance — often leave women and girls economically vulnerable and dependent on men. A married woman may suspect her spouse is infected, but be powerless to protect herself. For some women and girls, selling sex is seen as a matter of survival. Among 15-24 year olds, women make up 67% of all infections in the developing world. At the same time, women and girls bear the main burden of caring for sick family members. Women's empowerment is fundamental to any successful AIDS plan. *UNAIDS*

**POVERTY/DEBT:** 95% of Africans infected with HIV/AIDS live in abject poverty with little hope of obtaining the drugs used to combat the disease. Policies of international lending agencies force indebted countries to sacrifice health and education budgets in order to repay their debt. However, when debt cancellation is achieved, amazing things can happen. Malawi received debt cancellation totaling \$28 million. These funds financed the purchase of critical drugs, the hiring of extra health staff in primary care centers, and training for new nurses. *Jubilee USA Network*

**WARS/REFUGEES:** Soldiers often visit commercial sex workers — 90% of whom are believed to have AIDS in some regions. In Africa, civil conflict, displaced populations, and increasing regional interventions by the armed forces of African nations further spread the disease, especially due to the use of rape as a weapon of war. People are six times more likely to contract HIV in a refugee camp than in the outside population. More effort must be given to educating militaries and to halting conflicts, which fuel the disease's spread. *UNAIDS*

**STIGMA/DENIAL:** The fear and stigma associated with AIDS prevents open discussion and diminishes support systems for those suffering with the disease. Thandiwe Mwandla, a South African woman with AIDS, found that when her diagnosis was known, no one would buy her sugar cane or anything else she had touched. People walked around her. She notes, "We get sick, and we get poor, and we die lying to ourselves."

**SOCIAL AND CULTURAL FACTORS:** Polygamy, unsafe sex practices, insecure blood supplies, and unclean needle use contribute to rapid HIV infection rates. Creating safe spaces for discussion of normally "taboo" issues is key, so that the barriers to providing prevention education and health services can be overcome. Churches are struggling to overcome their own biases by reaching out to sex workers, drug users, and men and women who are not able to access adequate prevention information—to build understanding, and not to cast judgment.

## THE GREAT DIVIDE — ACCESS TO TREATMENT

Just two weeks ago, I was meeting in Tanzania with a group of women living with HIV/AIDS. I asked them to tell me what they most needed and wanted, and as always the same replies came back: food, because everyone is hungry, especially the children; money for school fees; and some kind of guarantee to keep their kids in school, because when they die they want their children to be assured of an education. And drugs — antiretroviral drugs to prolong life — so as not to leave their children prematurely orphaned. To be quite honest, I never know what to say in such a situation. I'm strangled by the double standard between developed and developing countries. I'm haunted by the monies available for the war on terrorism, but somehow never available for the human imperative.

*Stephen Lewis, UN Special Envoy for HIV/AIDS in Africa*

- In developing countries between 6 and 9 million people need antiretroviral medication to combat the disease, yet less than 5% have access to them due to poverty and restrictive trade laws. *UNAIDS*
- 2.5 million HIV+ women give birth every year. Only 5% of HIV+ pregnant women have access to drugs to prevent the transmission of HIV from mother to child. For less than \$2 per child, it is possible to decrease the transmission of HIV from mother to child by 50%. *UNAIDS*

## RECOVERING HOPE

It is time to speak the truth.  
It is time to act only out of love.  
It is time to overcome fatigue  
and denial. And it is time  
to hope.

*Plan of Action: The Ecumenical  
Response to HIV/AIDS in Africa*

**WE GIVE HOPE!** Music has a healing power that the HIV+ women and men of Sinikithemba Christian Care Center in Durban, South Africa, use to bolster their spirits and inspire others. Sinikithemba, Zulu for "We Give Hope," provides HIV testing, counseling, and support services to people living with AIDS and to their families. Though many of the women contracted the disease through their husbands, in South Africa HIV/AIDS carries such a stigma that they can't talk about their "terrible secret." But at the Center they can speak the truth to one another and in the process find the courage and community they need to carry on. The Center also assists the women to support themselves by employing their traditional skills in beadwork to fashion AIDS ribbons and other items for sale. More recently, in collaboration with Church World Service and U.S. composer Tim Janis, the Sinikithemba Choir toured the U.S.A. to bring their message of hope to people in this country. Touring publicly was yet another step in challenging the stigma associated with HIV.

*Note: Sinikithemba beadwork AIDS pins and a CD with the choir's singing are available from CWS.*



Tom Hampson/CWS

**EMPOWERING ORPHANS** The Young Women's Christian Association (YWCA) of Rwanda was founded in 1995 to assist widows and orphans who survived the genocide that killed more than 800,000 people. Of particular concern — child-headed households. More recently, despite the end of the war, the number of child-headed households continues to increase because of AIDS. With support from CWS, the YWCA has developed vocational training programs for child-headed households in the



YWCA-Gitarama

Gitarama province to enable children to support themselves. For Odette Mukeshimana (above) and her siblings, the program has meant hope for a better future: "When my parents died I was 11 and my sister was 3. We asked ourselves each day what we would eat. Later, with the help of the YWCA program, I have learned how to manage a small income-generating project and make batik fabric. My friends and I hope to open a batik shop someday. In the meantime, with my brothers and sisters I sell lamp fuel, dried fish, soy flour, and peanuts out of our house. With the money from our efforts we will be able to satisfy our needs and support my younger siblings going to secondary school — and maybe university!"

**"PHYSICIAN, HEAL THYSELF"** As churches and faith-based organizations struggle to understand the challenges posed by the AIDS crisis, they have had to face difficult questions. Old assumptions and patterns are being called into question. A gathering of African church leaders and their international partners (including Church World Service) in Nairobi, Kenya, concluded that the churches themselves need to change:

Today churches are being obliged to acknowledge that they have — however unwittingly — contributed both actively and passively to the spread of the virus [HIV]. Our difficulty in addressing issues of sex and sexuality has often made it painful for us to engage in any honest and realistic way with issues of sex education and HIV prevention. Our tendency to exclude others, our interpretation of scripture, and our theology of sin have all combined to promote stigmatization, exclusion, and suffering of people with HIV/AIDS.

*Plan of Action: 2001 Ecumenical Response to HIV/AIDS in Africa*



Behind the staggering numbers are the faces and stories of ordinary people struggling against extraordinary odds. What are they saying to us?

These are the faces of children and families living in a world of AIDS. Their spirit, their determination, and their resilience inspire all of us to join the fight. We are one world, and these children are our children. Their destiny is our destiny. Each of us can make a difference.

*Archbishop Desmond Tutu*

People should welcome every person who reveals his or her HIV status. We must not be pitied, cast away, or looked down on. We are all the same in the eyes of God.

*Bongi, Sinikithemba Christian Care Center  
Durban, South Africa*

It is not the condition itself that hurts most (because many other diseases and conditions lead to serious suffering and death), but the stigma and the possibility of rejection and discrimination that HIV-positive people have to deal with.

*Rev. Canon Gideon Byamugisha  
Anglican Church of Uganda*



YWCA-Gitarama

I am the head of my household since the death of my mother. She died in my hands. Since then, I have given up on school. I must give my attention to my younger brothers. It is what I promised my mother. Life has changed completely. I must start at zero. The problem is to feed them. When they come from school to get lunch, and find nothing, they return to school crying. Often I also cry when they cry.

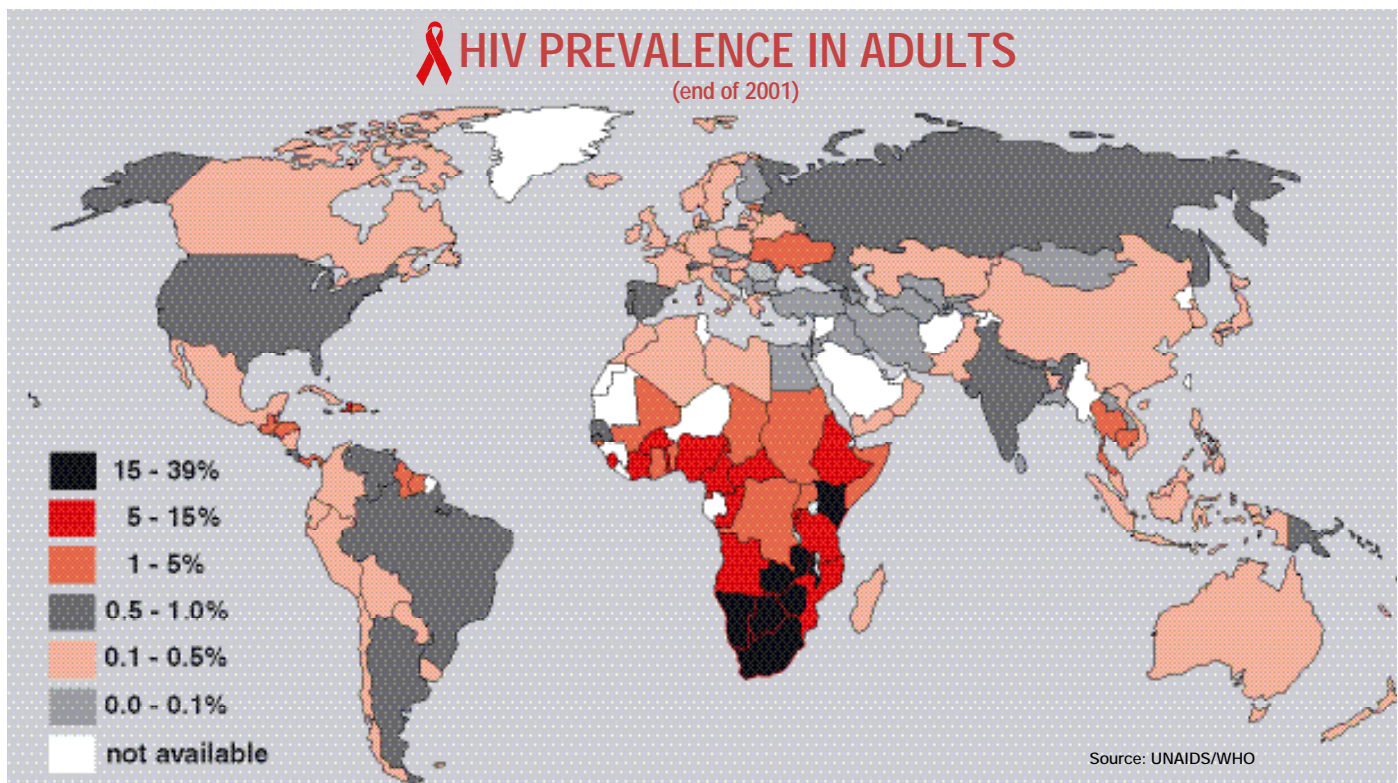
*Jacqueline Umuganwa, 19 years old, Rwanda*



UNICEF/Andrew

Today, I am back in my field, back in my church. I can feed my family.... I feel I have a future.... I myself feel I have changed. I can now talk to my children, telling them that I have AIDS.... When you are under treatment, you feel and look better, and then people do not reject you. I would like to say to all the people here that treatment is the best tool against stigma.

*Fred Minandi, an HIV+ patient, Malawi*



# YOU CAN MAKE A DIFFERENCE!

## Support the Healing Work of Church World Service

- Visit our website at [www.churchworldservice.org](http://www.churchworldservice.org) for more information about CWS and updates on the AIDS crisis.
- Call us at 800-297-1516: contribute through our Pledgeline (Ext. 222): hear an update on CWS Programs (Ext. 111).
- Call your CWS Regional Office toll-free at 888-CWS-CROP (297-2767) about CROP WALKS, the TOOLS OF HOPE & BLANKET Program, and “Gift of the Heart” Kits. Consider CWS as you do your estate planning, too.
- Purchase a CD made by the women of Sinikithemba in collaboration with musician Tim Janis (\$15). Information on ordering can be found on our website or by calling 800-297-1516.

## Learn More. Examine Your Own Attitudes Toward People Living with AIDS.

- Learn more about the AIDS crisis and other issues from the CWS Film & Video Library. For a complimentary catalogue of free-loan videos call, write or e-mail: CWS Film & Video Library, P.O. Box 968, Elkhart, IN 46515, 800-297-1516, or [video@www.churchworldservice.org](mailto:video@www.churchworldservice.org)
- Visit our website for additional educational resources — [www.churchworldservice.org](http://www.churchworldservice.org)

## Exercise Your Citizenship

- Visit our website for online advocacy tools in the struggle against AIDS. All the tools you need to communicate with your elected officials and the media are there: [www.churchworldservice.org](http://www.churchworldservice.org). Click on Global Issues. Areas of continuing concern include supporting efforts to provide universal access to HIV/AIDS treatment through increased funding and improved trade agreements regarding essential medicines, as well as addressing the root causes that fuel the spread of the disease.

When my cousin was dying of AIDS, he found it easy to tell his family and friends about the disease. In his final days we gathered the family together to say goodbye, and discussed with Mathunya the plans for his funeral. We asked him what he wanted to happen at the service, and he said, “I want you to tell them the truth, that I died of AIDS.” So we planned a service that could celebrate his life and educate those who came to the funeral, especially young people.

At the funeral, my grandmother walked to the front of the church and laid her hand on her grandson’s coffin, and said, “My grandson no longer suffers from AIDS.” Then, with her hand still on the coffin, she turned to the pulpit and said to the preacher who was about to speak, “Now... talk to them freely about this disease. To us it is not a shame.”

*Rev. Professor Maake Mazaango, WCC Global Consultation on HIV/AIDS, 2001*

## Pray for People Living with AIDS and Their Families

- Organize a prayer service, perhaps on World AIDS Day (Dec. 1). For worship resources, see the Council of Religious AIDS Networks ([www.aidsfaith.org](http://www.aidsfaith.org)) or the Ecumenical Advocacy Alliance ([www.e-alliance.ch](http://www.e-alliance.ch)), which contains both English and Spanish resources.

## Sources

- Centers for Disease Control and Prevention (CDC). A Glance at the HIV Epidemic. [www.cdc.gov/nchstp/od/news/At-a-Glance.pdf](http://www.cdc.gov/nchstp/od/news/At-a-Glance.pdf)
- Center for Strategic and International Studies. The Second Wave of the HIV/AIDS Pandemic. Dec. 2002. [www.csis.org/africa/HIVAIDS/021003\\_secondwave.pdf](http://www.csis.org/africa/HIVAIDS/021003_secondwave.pdf)
- “Coming to Say Goodbye: Stories of AIDS in Africa.” A 30-minute documentary produced by Maryknoll. [www.maryknollmall.org/description2.cfm?ISBN=136](http://www.maryknollmall.org/description2.cfm?ISBN=136)
- Jubilee USA Network: [www.jubileeusa.org](http://www.jubileeusa.org)
- National Intelligence Council. The Next Wave of HIV/AIDS: Nigeria, Ethiopia, Russia, India, and China. Sept. 2002. [www.cia.gov/nic/pubs/index.htm](http://www.cia.gov/nic/pubs/index.htm)
- Nyamu, John. “Famine and AIDS: A lethal mixture,” *Africa Recovery*, vol.17, no. 1, May 2003, United Nations Department of Public Information.
- UNAIDS. Report on the Global HIV/AIDS Pandemic 2002. [www.unaids.org](http://www.unaids.org)
- Young, Kacey. Visions and Voices: Living with HIV/AIDS in Malawi, Zimbabwe, and Ethiopia. [www.pubpol.duke.edu/centers/hlp/programs/fellows/noborders/visions/youngdesc.html](http://www.pubpol.duke.edu/centers/hlp/programs/fellows/noborders/visions/youngdesc.html)

## Sources for Further Learning

- Global AIDS Alliance: [www.globalaidsalliance.org](http://www.globalaidsalliance.org)
- The Global Fund to Fight AIDS, TB, and Malaria: [www.globalfundatm.org](http://www.globalfundatm.org)
- Health Gap: [www.globaltreatmentaccess.org](http://www.globaltreatmentaccess.org)
- Washington Office on Africa.HIV/AIDS Education Packet: [www.woafrica.org/AIDS30.htm](http://www.woafrica.org/AIDS30.htm)



CHURCH WORLD SERVICE

**Church World Service is a cooperative ministry of 36 Protestant, Orthodox, and Anglican denominations, providing sustainable self-help and development, disaster relief, and refugee assistance in more than 80 countries.**

**Church World Service P.O. Box 968 Elkhart, IN 46515 1-800-297-1516  
[www.churchworldservice.org](http://www.churchworldservice.org)**