

# **HIV & AIDS in Africa: Implications and challenges for African Churches**

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## **RESUMO**

Este artigo apresenta a ideia geral sobre HIV & AIDS, explora como o estigma e discriminação degradam as condições de vida do PLWHA. O artigo apresenta também as implicações e desafios desta situação para as Igrejas Africanas. HIV & AIDS são frequentemente considerados como a punição de Deus de transgressões sexuais, ou até mesmo a forma que Deus usa para eliminar os elementos pecaminosos da sociedade. A sociedade considera os portadores de HIV & AIDS como pecadores por causa da doença, ou a doença os faz pecadores. Como fica, então, a situação de crianças e pessoas que não estão envolvidas em atividades imorais. As atitudes das pessoas que se consideram justas levam-nas a pensar e crer que os portadores de HIV & AIDS não são justos. Devido a este tipo de julgamento da parte da igreja e da sociedade os portadores de HIV & AIDS são estigmatizados e discriminados pela igreja e pela sociedade.

## **PALAVRAS-CHAVE**

HIV & AIDS; preconceito; sociedade africana; igrejas africanas.

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**ABSTRACT**

This article deals with the general idea about HIV & AIDS and further explores how stigma and discrimination worsen the life PLWHA and finally implications and challenges for African Churches. HIV & AIDS is often considered to be God's punishment for sexual transgressions, or even God's way of eradicating sinful elements from society. The society considers HIV & AIDS patients as sinners, because of their disease, or their disease made them sinners. This brings us to question about Children and those not involved in immoral activities. The self righteous attitudes of people have led them to think and believe that HIV & AIDS patients are unrighteous. Due to this judgmental attitude of the church and society, HIV & AIDS affected and infected patients are stigmatized and discriminated by the church and society.

**KEYWORDS**

HIV & AIDS; Prejudices; African Society; African Churches.

**HIV/AIDS**

HIV stands for "Human Immunodeficiency Virus", "human" because it effects only human beings and not animals; "immunodeficiency" because the immune system, which normally protects a person from disease, becomes weak; "virus" because like all viruses, HIV is a small organism that infects living things and uses them to make copies of itself. A virus is the smallest microorganism known till date and can only be seen through a special microscope called the Electron microscope. Viruses are much smaller than bacteria. Both bacteria and virus multiply very fast. We are all familiar with illness due to various viruses, e.g. common cold, measles, herpes, mumps, chicken pox and hepatitis B. Viruses are grouped according to their shape, size, and the type of genetic material protein chains of DNA or RNA<sup>2</sup>. But even though HIV is a virus can spread only, by sexual contact with infected persons, injections and sharp

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<sup>2</sup> SAHU, Binod K. *AIDS and Population Education*. New Delhi: Sterling Publishers Pvt. Ltd, 2004, p. 4.

equipments, which touch blood, used without proper sterilization, and from a mother to her unborn baby or breast-feeding.

HIV causes AIDS (Acquired Immune Deficiency Syndrome). AIDS is a group of diseases that occurs when HIV on dangers a person's immune system. Most people with HIV feel healthy for the first few years after getting the virus, but later they become sick with AIDS. If the virus gets into the bloodstream of a person, it begins to attack the white blood cells (T4 cells). These cells form a part of immune system and help to prevent the body from getting diseases but when HIV enters to T4 cells and makes them produce more of the virus which eventually kills the T4 cells. Eventually there are not enough T4 cells protect the body from infection<sup>3</sup>.

### **People Living with HIV/AIDS**

At present day context the word patient is not acceptable for the people who are affected and infected by the HIV/AIDS. Instead of saying patient the term "people living with HIV/AIDS" was accepted by the society. Let us see how this term came to existence. The expression, "people living with HIV/AIDS" was developed as an act of defiance against current AIDS messages that contribute to the stigmatization of people. The term is also an assertion of a new understanding of the challenges of HIV/AIDS in people's lives. A Uruguayan woman and theologian living with HIV challenged the equation HIV=AIDS=DEATH because people with HIV are able to live meaningful lives inspite of it<sup>4</sup>.

### **HIV & AIDS in Africa**

According to the researchers the HIV/AIDS had exist in Africa before 1980s but the most of the African Government acknowledged it only

<sup>3</sup> Women's Link, "Women and Aids what we need to know" the Terrence Higgins Trust Streevani Documentation Pune, vol.2, N° 4, 1996, p. 47.

<sup>4</sup> SENTURIAS, Erlind. N. "God's Mission and HIV/AIDS: Shaping the Churches Response". In: *International Review of Mission*, Vol. LXXXIII, N° 329, 1994, p. 277-78.

in 1980<sup>5</sup>. African nationalist rhetoric could not be reconciled easily with the Stereotype of a diseased and dying continent. Governments feared the admission would prejudice tourism. Publications defend African integrity by means of Conspiracy theories claiming HIV and AIDS were the result of a plot “outsiders” to eliminate blacks<sup>6</sup>.

In this early stage, careless and unconcerned approach towards HIV and AIDS prevail in most parts of Africa<sup>7</sup>. In a short time of period, HIV had become Africa’s most horrible disease, in the mid-1990s; most part of African society had suffered from its terrible effects: the regions affected by HIV and AIDS hardly earned their improvement in health in last 50 years overwhelmed by death and disability by AIDS. The epidemic created a impede progress in every area of the African society, personal, family, community and national levels. It severely threatened the political stability and economic growth of the African nations<sup>8</sup>.

African political and religious leaders, community failed to realize the epidemic will completely transform the African landscape. Having a little bit relaxation after a long struggle against colonialism, HIV and AIDS forced Africans to face another problem with suffering and death. The political and religious leaders realized they have to mobilize resources for developments and were now needed to provide an effective response to HIV and AIDS. The churches in Africa strongly involved in this struggle but the churches presented the epidemic as a of Gods punishment to the sinners. Preachers preach that the epidemic represented the signs of end times<sup>9</sup>. This kind of problematic Theological Assumptions continues and made these epidemic worse.

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<sup>5</sup> JACKSON, Helen. *AIDS Africa: A Continent in crisis*, Harare, SAFAIDS, 2002.

<sup>6</sup> Richard C. Chirumuuta and Rosalind J. Chirumuuta. *Aids, Africa and Racism*. London: Richard Chirumuuta, 1987.

<sup>7</sup> EZRA, Chitando. *Living with Hope: African Churches and HIV/AIDS*. Geneva: WCC Publications, 2007, p. 1.

<sup>8</sup> LAMPTEY, Peter R., JOHNSON, Jami L. and KHAN, Marya. “The Global Challenge of HIV And AIDS”, *Population Bulletin* 61, 2006, p. 3

<sup>9</sup> EZRA, Chitando. *Living with Hope: African Churches and HIV/AIDS*1, p. 2.

### Problematic Theological Assumptions

Theological rigidity has not allowed the church in Africa from taking structural sin seriously in HIV and AIDS discussion. Traditional Theology stress on individual sin it dwells moral failure of individuals. AIDS is often deemed to be God's punishment for sexual transgression/moral failure, or even God's way of abolishing sinful elements from society. We overlook the fact that, although promiscuity is indeed an important factor contributing to the spread of the virus, hundreds of thousands of children and adults are infected and affected without being guilty of such offences.

In our ethical perceptiveness, we tend to understand HIV/AIDS contracted through the irresponsible behavior of the infected persons. So it is a common belief that HIV infection could have been avoided if the person had led a high moral life. Such an approach reduces responsibility to the personal behavior of individuals, and identifies him/her as a sinful person who is responsible for the tragic situation. As a result of dominate discourses of our times, HIV and AIDS has been theologically and ethically problematized as an issue of immorality and sexual promiscuity<sup>10</sup>.

According to Jerry Falwell, AIDS is a lethal judgment of God on the sin of homosexuality and it is also the judgment of God on America for endorsing this vulgar, perverted, and reprobate lifestyle... God destroyed Sodom and Gomorrah primarily because of the sin of homosexuality. Today he is again bringing judgment against this wicked practice through AIDS<sup>11</sup>. This opinion of HIV and AIDS as "wages of sin" and divine judgment is immorality. Pope John Paul II also deplored the role played by irresponsible sexual behavior in the Spread of HIV and AIDS.

This can be very misleading and can lead to Judgmental viewing of the disease, which lies at the root of the difficulty of religions to deal with the issue. The concept of sin has been present in many cultures

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<sup>10</sup> ZACHARIAH, George. "Ethics in the Time of HIV and AIDS: Celebrating Infectious Memories for Positive Living". In: *Asian Christian Review*, Vol.4, N°.1. Japan: Kiyoshi Seko, 2010, p. 68.

<sup>11</sup> Quoted in GILL, Peter. *The Politics of AIDS: How they turned a Disease into Disaster*. New Delhi: Viva Books, 2007, p. 11.

throughout history, where it was usually equated with an individual's failure to live up to standards of conduct or with his violation of taboos, laws, or moral codes. Christianity sees sin as a deliberate violation of the will of God and as being attributable to human pride self-centeredness and disobedience. Disease or infirmity has been-attributed to individual sin in Bible – but also shown to have its effect on innocent people<sup>12</sup>. This kind of judgmental attitude of church in Africa and society leads to stigma and discrimination.

### **Stigma and discrimination**

HIV/AIDS persons are socially out caste, rejected by the society, discriminated in the society. They face stigma and discrimination in churches, hospitals, clinics, and schools. Faith communities contribute to the moralistic stigmatization and discrimination of HIV positive persons and their loved ones face in the schools, the work place, local communities and in families. The innocent children are being dismissed from their schools because of the illness. It was hot news in all the leading newspapers when two children were dismissed from their school, two months ago, because they were diagnosed as HIV Positive<sup>13</sup>.

In African, cultural constructions of HIV and AIDS based on beliefs around the epidemic, sexuality and religion have played a vital part in the development of HIV-related discrimination in African church and society. According to WHO (World Health Organization) HIV- related stigma and discrimination continue widespread in Africa. Despite having the maximum number of HIV and AIDS-related deaths, people recognized as living with HIV/AIDS still face serious discrimination from and jointly with their families. AIDS-related discrimination can manifest in many ways – from inappropriate comments to breach's of patients'

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<sup>12</sup> KURUVILLA, Philip (ed.). *HIV/AIDS: A Handbook for the Church in India*. Delhi: ISPCK, 2004, p. 71.

<sup>13</sup> THOMAS, V.V. "Over Coming Stigma and Discrimination: The Case of HIV/AIDS Victims," *U.B.S. Journal* 4/2, Sep 2006, p. 17.

confidentiality, delay and refusal of treatment and social isolation. Stigma and discrimination hinder the uptake of HIV/AIDS interventions. A study done in Botswana and Zambia found that stigma against HIV-positive persons and fear of discrimination were the key reasons for the low uptake of voluntary counseling and testing to prevent mother-to-child transmission of the virus<sup>14</sup>.

### **Factors contributing the HIV/AIDS related Stigma**

The disease is considered to be life threatening and therefore people are very afraid of the disease. The transmission of infection is associated with behaviors such as drug abuse, prostitution and homosexuality which are already stigmatized in many communities. Religious or moral beliefs lead some people to believe that being infected with HIV is the result of moral fault which deserves punishment.

### **Poverty**

According to AVERT in 2010, 48.5 % of people living in sub-Saharan Africa were living under the poverty line (\$1.25 a day)<sup>15</sup>. Poverty and HIV infection go side by side because the pandemic cuts down the economically weak who do not have access to basic health services and who cannot afford the expensive anti-retroviral drugs that can prolong the life for an HIV positive individual and communities that constitute the bottom rung of the socio-economic ladder, have the least power, within limited access to information, and fewest resources with which to fight the epidemic. There are several social realities which cause the development of this harmful situation, poor nutritional status, little access to health care, and are least able to afford medical services because of poverty, malnutrition, unemployment, illiteracy, and inadequate health care, due

<sup>14</sup> <http://www.who.int/bulletin/volumes/85/8/06-037671/en/>. Accessed on 25/Nov/2014.

<sup>15</sup> <http://www.avert.org/impact-hiv-and-aids-sub-saharan-africa.htm#sthash.SS4Fx-8WR.dpuf> . Accessed 18/Dec/2014.

to rural-urban migration, income inequality, gender inequality, and other exacerbating factors<sup>16</sup>.

### **Discrimination in Community**

Community level disgrace and discrimination towards people living with HIV is found all over the world. A community's reaction to somebody living with HIV can have a massive result on that person's life. If the response is violent, a person may be discriminated against and may be forced to leave their home, or change their daily activities such as shopping, socializing or schooling. Community-level stigma and discrimination can manifest as exclusion, refusal and verbal and physical abuse. It has even extended to murder. AIDS related murders have been reported in countries as diverse as Brazil, Colombia, Ethiopia, India, South Africa and Thailand.

In December 1998, Gugu Dhlamini was stoned and beaten to death by neighbors in her township near Durban, South Africa, after speaking openly on World AIDS Day about her HIV status. It is therefore not surprising that 79% percent of people living with HIV who participated in a global study, feared social discrimination following their status disclosure<sup>17</sup>.

### **Stigma in the Church**

When the HIV epidemic first broke out in Africa in the 1980s the church filled with stigma and discrimination. The Bible was read in ways that condemned people living with HIV. The issue was simplistically reduced to one of individual or personal morality. Vulnerability to infection was understood solely in terms of whether or not one was sexually promiscuous. People living with HIV were regarded as individuals who

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<sup>16</sup> SHARMA, Meenu. *AIDs Awareness through Community Participation*. New Delhi: Kalpaz Publication, 2006, p. 33.

<sup>17</sup> <http://www.iapac.org/ATLIS/>. Accessed on 10 Nov 2014.



did not live up to the high moral standards set by the church. Such stigma continues to be a major problem, especially as the most common route of HIV and AIDS transmission in Sub Sahran Africa has been through sex between men and women<sup>18</sup>. As Gillian Paterson observes, HIV and AIDS are linked in people's mind with sex, sexuality and sexual orientation: all of which are associated in Christian tradition with sin<sup>19</sup>. The amount of stigma within the church communities has been high, and it is evident from the rising instances of discrimination against the PLWHA and their families in different parts of the country.

The church continues to follow its distorted attitude such as HIV and AIDS is the result of sin of immoral behavior of the person and it is a punishment of God to eradicate the sin from the world. Churches tend to support such stigmatizing attitude, behaviors, continue to increase the pain of the PLWHA. Church is one of the agents which God nominated in healing process but Church still maintain the judgmental attitude towards the PLWHA. The problem of stigmatization in the church could probably best be described by way of a story:

At the World AIDS Day celebration in the Roman Catholic Cathedral in Bujumbura in 1995, the priest said, in the course of his sermon, "We must have Compassion for people with AIDS because they have sinned and because they are suffering for it now". At that point something propelled Jeanne Gapiya to rise from her pew and walk up to the front of the church. "I have HIV", she declared, "and I am a faithful wife. Who are you to say that I have sinned, or that you have not? We are all sinners, which is just as well, because it is for us that Jesus came<sup>20</sup>.

It is high time that the church realizes the true meaning of holiness. Holiness of the Church does not depend on the moral worthiness of any of its members, whether heterosexual or homosexual, HIV positive or

<sup>18</sup> EZRA, Chitando. *Living With Hope: African churches and HIV/AIDS 1*, p. 17.

<sup>19</sup> Gillian Paterson. *AIDS-Related Stigma: Thinking Outside the Box: The Theological Challenge*. Geneva: Ecumenical Advocacy Alliance, 2005, p. 9.

<sup>20</sup> [http://www.crcna.org/site/uploads/uploads/crwr/ea/crwr\\_TowardsATheology](http://www.crcna.org/site/uploads/uploads/crwr/ea/crwr_TowardsATheology). Accessed on 3 Dec 2014.

HIV negative. The Church should repent on about its attitude towards PLWHA and should leave the judgmental attitude and show unconditional love and acceptance.

### **Impact of HIV/ AIDS on Woman**

Rape and other forms of sexual harassment are now frequently used as strategy of war in order to humiliate and demoralize individuals, families and communities. In Africa they are lot of civil wars and displacement of people, most of who live in campus. The loss of family structures in campus increase women's vulnerability to rape and unprotected sex that may lead to HIV Infection<sup>21</sup>.

According to AVERT<sup>22</sup>, in sub-Saharan Africa, like many parts of the world, the HIV epidemic inexplicably affect women. Women's vulnerability to HIV infection has been identified as a key issue. In 2012, 59 percent of all people living with HIV in the region were female. The highest HIV prevalence rates among women occur in southern Africa, particularly in South Africa, Botswana, Lesotho and Swaziland. Women and girls often face discrimination in terms of access to education, employment and healthcare. In this region, men often dominate sexual relationships. As a result, women cannot always practice safer sex even when they know the risks that are involved. Indeed, gender-based violence has been identified as a key driver of HIV transmission in the region<sup>23</sup>.

### **Impacts of HIV/AIDS on Children**

The figures by WHO given below show the number of children directly affected by HIV and AIDS: There were 3.2 million children living

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<sup>21</sup> PHIRI, Isabel Apawo, HADDAD, Beverley and MASENYA, Madipoane. *African Women HIV/AIDS and Faith Communities*. Pietermaritzburg: Cluster publications, 2003, p. 14-15.

<sup>22</sup> AVERT is an international HIV and AIDS charity, based in the UK, working to avert HIV and AIDS worldwide, through education, treatment and care.

<sup>23</sup> <http://www.avert.org/hiv-aids-sub-saharan-africa.htm>. Accessed on 23/Nov/14.

with HIV globally in 2013<sup>24</sup>, more than 240,000 children became newly infected with HIV in 2013 – 700 new infections every day. In addition, millions more children every year are indirectly affected by the impact of the HIV epidemic on their families and communities<sup>25</sup>. There are more than 16 million children under the age of 18 who have lost one or both parents to AIDS. Most children living with HIV/AIDS – almost 9-10- live in sub-Saharan Africa. In countries with HIV prevalence of above 5%, child mortality rates have not fallen in line with global trends. This is most probably due to the high risk of mortality associated with untreated HIV infection in young children. Children are also at risk of becoming infected with HIV through sexual abuse and rape. In some parts of Africa, there is a myth that HIV can be cured through sex with a virgin and this has led to rapes, sometimes of very young children by infected men. In some cases, young children are trafficked into sex work, which can put them at a very high risk of becoming infected with HIV<sup>26</sup>. Stigma worsens problems faced by children orphaned by AIDS. AIDS orphans may encounter hostility from their extended families and community, and may be rejected, denied access to schooling and health care, and left to fend for themselves.

### Orphans

United Nations (UN) estimated that 17.8 million children under 18 have been orphaned by AIDS and that this will rise to 25 million by 2015. Around 15.1 million or 85 percent of these children live in sub-Saharan Africa. In some countries which are badly affected by the epidemic, a large percentage of all orphaned children – for example 74 percent in Zimbabwe and 63 percent in South Africa – are orphaned due to AIDS<sup>27</sup>.

<sup>24</sup> <http://www.who.int/hiv/pub/toolkits/flyer-paediatric-hiv-dec2014.pdf?ua=1>. Accessed on 19/Dec/2014.

<sup>25</sup> [http://www.unaids.org/sites/default/files/en\\_media/un aids/content\\_assets/documents/document/2014/2014gapreports/slides/01\\_Epi\\_slides\\_2014July.pdf](http://www.unaids.org/sites/default/files/en_media/un aids/content_assets/documents/document/2014/2014gapreports/slides/01_Epi_slides_2014July.pdf). Accessed on 19 Dec 2014.

<sup>26</sup> [www.avert.org/children.html](http://www.avert.org/children.html). Accessed on 15 Dec 2014.

<sup>27</sup> [www.avert.org/children-orphaned-hiv-and-aids.htm#sthash](http://www.avert.org/children-orphaned-hiv-and-aids.htm#sthash). Accessed on 25 Nov 2014.

Millions of children have already lost at least one parent due to the AIDS epidemic, and millions more are possible to die over the next few years. There is also an urgent need to help, care and protect these vulnerable children. There is also a need to prevent people becoming infected with HIV so that the number of children orphaned in the future is minimized. Carol Bellamy, the former Executive Director of UNICEF, stated that:

The silence that surrounds children affected by HIV/AIDS and the inaction that results is morally reprehensible and unacceptable. If this situation is not addressed, now with increased urgency, millions of children will continue to die, and tens of millions more will be further marginalized, stigmatized, malnourished, uneducated, and psychologically damaged<sup>28</sup>.

This clearly shows HIV/AIDS will not come only through the immoral attitudes. The above mentioned life situation of both women and children are innocent people who are affected and infected by HIV/AIDS. So the judgmental attitude of both church and society should be changed. For that here I suggest some ideas to the churches in Africa.

### **Eradicating Stigma and Discrimination**

The church theologically and sociologically is hostile to stigma and discrimination in any form and to any individual or community. The life and teachings of Jesus strongly reject any attempt to classify and marginalize people on the basis of social, political or economic status, or on the basis of their personal merit. In fact Jesus was called a friend of Publicans and sinners, because he worked towards harmonizing the marginalized and outcastes into the main stream of the community. The early Church, worked strongly on an inclusive community where the gentiles and Jews, women and men, have been rightful members of an inclusive community. This is distinct from other communities because it did not

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<sup>28</sup> [http://www.unicef.org/media/media\\_9403.html](http://www.unicef.org/media/media_9403.html). Accessed on 19 Dec 2014.

recognize barriers. Therefore, it was a Koinonia; a fellowship where they shared all that belonged to them and supported one another.

On this basis the character of the church, the Churches in Africa has to reject the Stigma and Discrimination Associated with PLWHA. Stigma brings shame. Our attitudes, reactions, verbal and non-verbal communication including body language can be discriminatory and insulting. It is noticed that the infected are sent out of their families, separated from their own children and made to feel guilty as offenders. They are branded and made to feel worthless and are considered dangerous to the rest of the society. The well being of the church and the future of the infected and affected depend a lot on eradication of stigma and discrimination.

The Church, at all levels in its Christian Education and pastoral work, must work towards removal of stigma and discrimination and the myth that surround HIV and AIDS. It is noted that the main reason for stigma associated with HIV and AIDS in the church, is its association with sexual sin. At present day the Pastors are found difficult to address the issue. There is deafening silence around HIV and AIDS because of the guilt imposed on the infected and affected and the fear of getting labeled, discriminated and alienated. Therefore the churches in Africa must take a conscious step to include admit and support people PLWHA in its Institutions and fellowships. A policy of inclusive community, inclusive care, support and growth must be followed in hostels, hospitals, worship services, work places, and so on.

### **Sexuality is the Gift of God**

The church in African struggles to address the subject of human sexuality in an open and liberating way, due to three main Reasons. I. The nature of the faith that the missionaries gave to the African church is anti-sexuality. As products of their own time, the missionaries who carried the gospel to African Shores had a negative attitude towards human sexuality. II. The gospel inherited by African Christianity has problematic assumption. According to some missionaries, controlling the passion of bodily desires was one of their major tasks. Even in their preaching the missionaries criticize the Africans (supposed) servitude to the

pleasures of the flesh. They went to the extreme to preach Africa could only be saved if it adopted the higher sexual morality contained in the gospel. III. According to Ezra Chitando, Christianity, colonialism and modernity has had created a negative impact on the indigenous African culture in relation to sexuality. Whereas previously schools provided a sex education to young adults, but these schools are no longer active in most places. As a result, there is growing uneasiness about talking publicly about sexuality in traditional culture. Before the negative impact of Christianity, sexuality was tackled effectively, with consideration for age, marital status and other variable<sup>29</sup>.

The above mentioned factors about the sexuality in Africa have left the church in Africa without the vocabulary to address the theme of sexuality. This is a more limitation given that heterosexual transmission lies behind the rapid spread of HIV in Africa. The church has struggle to address the issue of human sexuality in an open and liberating way, and instead of seeing sexuality in a negative way the church in Africa have to overcome a poor gospel that demonizes sexuality, the cultural conservatism surrounding it, and have to see the sexuality is the Gift of God<sup>30</sup>.

Our human body and sexuality are significant to God. Sexuality is a gift from God and is for good purpose. God created human being a sexual being with all our differences. This sexuality is for celebration and enjoyment and for responsible relationships. Our body is the temple of God, so the abuse of sexuality is therefore an offence both against God and against creation. Men and women are created equally. In honoring one another as sexual beings, we are honoring life itself. HIV transmission is often linked with the vulnerability and abuse of women, young boys, and girls. Neither women nor children can protect themselves from HIV, if their sexuality is controlled by others. Our responsibility is to reclaim the Biblical images of God in them. Ethics clarifies questions about right and wrong but also demonstrates their complexity<sup>31</sup>.

Today most of us maintain a different ethical discernment about HIV/AIDS because we consider that this disease is contracted through

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<sup>29</sup> EZRA, Chitando. *Living With Hope: African churches and HIV/AIDS* 1, p. 33.

<sup>30</sup> EZRA, Chitando. *Living With Hope: African churches and HIV/AIDS* 1, p. 33.

<sup>31</sup> *Facing Aids: The Challenge, the Churches' Response*. Geneva: WCC, 1997, p. 50.

irresponsible sexual behavior. In some societies people refuse to talk about sex, AIDS and aspects of sexual health because they fear that more open talk about sex and sex education will result in corresponding increase of casual sexual relationship. As a result of this dominant negative attitude of our time, HIV/AIDS has been misinterpreted as an issue of immorality and sexual promiscuity. Pope John Paul II also deplored the role played by the “Irresponsible sexual behavior” in the spread of HIV/AIDS<sup>32</sup>. Clearly church has a moral responsibility to minimize communal and personal vulnerability to conditions in which sexually transmitted disease might spread.

For that African culture it offers so many opportunities for addressing sexuality in effective ways. One way is to utilize rites of passages to impart knowledge about HIV. It is also possible to engage traditional leaders like chiefs, traditional healers and others to provide information on HIV and AIDS<sup>33</sup>. The sexual drive is one of the most powerful desires of the human body. The church in Africa needs to acknowledge this reality and engage it in a sensitive way. It needs to interrogate its negative attitude towards human sexuality. It must embrace sexuality as a gift of God.

### **Prayer and spirituality**

The church in Africa has an energetic and spiritual life. This is also a precious resource in the response to HIV and AIDS. For many African Christians, prayer is the church’s exclusive gift to the overall response to HIV and AIDS, the church is privileged to have prayer and spirituality as important resources in its life. Through prayer PLWH have regained their strength and capacity to face their situations with courage and hope<sup>34</sup>.

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<sup>32</sup> ZACHARIAH, George. “Ethics in the Time of HIV and AIDS”. In: *Asian Christian Review* 4, 2010, p. 68.

<sup>33</sup> EZRA, Chitando. *Living With Hope: African churches and HIV/AIDS 1*, p. 33.

<sup>34</sup> EZRA, Chitando. *Living With Hope: African churches and HIV/AIDS 1*, p. 17.

### **Inclusiveness**

Churches in Africa are challenged to be more inclusive, changing the mindset that demarcates “us from them” and opening the way for mutuality in a spiritual journey we all travel together. Churches in Africa need to overcome being judgmental, recognizing that we ourselves stand in need of forgiveness for our attitudes, apathy, and inaction in the face of HIV/AIDS in our program planning and implementation. Churches are challenged to confront stigma and discrimination. Churches in Africa are also challenged to include HIV/AIDS in theological training and to undertake practical measures such as women in the church and communities, advocating for access to treatment and drugs for PLWHA, and strategies to decrease people’s vulnerability to HIV/AIDS<sup>35</sup>.

### **Healing Ministry in African churches**

Healing ministry in African churches plays a vital role in African Christianity. The mainline churches have adopted the western dichotomy of the physical and the spiritual and have thus left physical healing to biomedicine but the AIC (African Independent Churches) and Pentecostal churches continue to attract many people by their healing ministries<sup>36</sup>. Healing in African cultures is inseparable from African people. Due to this the healing ministry is very popular in Africa, and the key concepts in African Traditional Religion are Prosperity and Healing<sup>37</sup>.

African people believe the traditional healer /diviner/ medicine woman are possessed by a spiritual powers, so they are capable to defeat illness and problems. The main line churches are overlooked and dismissed the African interpretations of sickness, health and spiritual

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<sup>35</sup> SARKAR, Atanur. “AIDS/HIV Infection and victimization of Women”. In: *Women’s Link*, Vol. 2, n°4, 1996, p. 115.

<sup>36</sup> TERHARR, Gerrie. *The Spirit of Africa: The Healing Ministry of Archbishop Milingo of Zambia*. London: Hurst, 1992.

<sup>37</sup> KWENDA, Chirevo V. “Affliction and Healing: Salvation in African Religion”. In: *Journal of Theology for Southern Africa*, 1999, p. 1-12



factors. But the AIC gave importance to healing; prosperity and African spiritual factors, and this approach made AIC to grow very fast. The Pentecostal churches in Africa emerged in 1990s. Their main teaching is healing and deliverance and health and wealth. They believe the true Christians are supposed to be in good health both physically and financially. Both Pentecostal and AIC prophets are united in their conviction that the Holy Spirit defeats all illness, including HIV and AIDS<sup>38</sup>.

This kind of churches claim their ministry is faith based so they emphasize the congregation also should not take any medicine. They believe through faith every sickness can be healed. According to me, this can create a big problem for the people living with HIV & AIDS because now the doctors discover a tablet called ART (Antiretroviral therapy). ART doesn't cure HIV. But it stops it from reproducing itself and spreading, so people infected by HIV and AIDS will live longer<sup>39</sup>. So the AIC and Pentecostal churches have to rethink seriously the pain of those PLWHA and renounce from quick fix solutions the PLWHA need.

### Attitudinal Change

Human suffering is not occasion for the church to make external judgments debate as to whom or what the causes of suffering is. Instead, the church in Africa should offer unconditional care and compassion. By this, individuals, families and communities become responsive to exhibit and affirm mutual love with the suffering community. It is such an empowered community that will live in fellowship with rejected and stigmatized PLWHA, without prejudice and judgment<sup>40</sup>. The Church in Africa should work as a redeeming community to redeem PLWHA into a state of acceptance (being Inclusive) and not rejection. W. E. Amos rightly says "inclusiveness is a way of being, living, working and worshipping together"<sup>41</sup>.

<sup>38</sup> EZRA, Chitando. *Living with Hope: African Churches and HIV/AIDS 1*, p. 67-68.

<sup>39</sup> <http://www.webmd.com/hiv-aids/features/hiv-aids-treatment-advances-art>. Accessed on 1.Dec.14.

<sup>40</sup> *Policy of HIV and AIDS- A Guide to Churches in India*. Nagpur: NCCI/ISPCCK, 2009, p. 5.

<sup>41</sup> AMOS, William E. *When AIDS Come to Church*. Philadelphia: Westminster Press, 1940, p. 17.

Churches in Africa should not try to find out how a person received HIV and AIDS<sup>42</sup>.

### **Preaching on HIV and AIDS**

South African black theologian Maluleke identifies the African churches faces deep crisis preaching on HIV and AIDS. Sermons preached by some pastor's pierce and break the heart of PLWHA, their preaching is disgusting and paralyzing for the PLWHA<sup>43</sup>. A pandemic like HIV and AIDS raises theological issues in the areas of creation, human nature, nature of sin and death, etc. This issue could be expounded through preaching by interpreting it in the context of HIV and AIDS. Since the Bible has the potential to become a resource of encouragement and hope in the lives of PLWHA, special time should be allotted to discuss about the different possibilities of interpreting the text for the empowerment of PLWHA. Love-Listen-Lead is the three words which could be proclaimed through Biblical interpretation in relation to PLWHA.

Some African churches are showing courage and commitment in manifesting Christ's love to PLWHA. Other churches have contributed to stigmatizing and discriminating such people, thus added to their suffering. It is the duty of the church leader to give counseling to the PLWHA and it is the function of the church leader to impart values and morality through preaching and interpreting the text. Preaching and teaching ministry executed in churches should educate the congregation that PLWHA deserve love, compassion, along with social and emotional support. They need to be embraced without any barriers, exclusion and rejection; it also includes sharing of sorrow, wiping the tears, etc. Church leader in Africa should lead the community to fight against stigmatization and discrimination.

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<sup>42</sup> WASKER, Pramod H. "The Church's Response to AIDS," *National Council of Churches Review*, Vol.CXV, No.6 1995, p. 524-525.

<sup>43</sup> EZRA, Chitando. *Living with Hope: African Churches and HIV/AIDS 1*, p. 25.

### Advocacy

Advocacy is one of the ways through which an individual can exhibit love and care to the PLWHA<sup>44</sup>. Church has the positive impact in changing the psychology of the people living with HIV and AIDS; they experience love, compassion and support<sup>45</sup>. The outcome of *Koinonia* could occur in the lives of PLWHA<sup>46</sup>. In the church scenario, *Koinonia* could be practiced by sitting and eating with the PLWHA<sup>47</sup>.

### Acknowledging the Image of God in PLWHA

God created the world out of His love. But human beings rejected the love of God and rebelled against God's purpose. This broken relationship with God and human beings in the Bible is called as sin. But through the coming of Jesus Christ this broken relationship has been re-established. The purpose behind our creation is to love one another. The spirit of God always urges to fight for justice in a broken world. When the church hesitates in accepting the image of God in people affected with HIV/AIDS, it stands as fragmented body of Christ and not unity. We, as the church, cannot make external judgments against the PLWHA; instead we should offer unconditional love. The theology of creation invites everyone to call PLWHA as people of God. They are not sinners, but created by God in same image. Therefore, they are actually in need of dignity and acceptance rather than charity and sympathy<sup>48</sup>.

<sup>44</sup> *Grace, Care and justice – A Handbook for HIV and AIDS Work*. Geneva: Lutheran World Federation, 2007, p. 88.

<sup>45</sup> JAYAKUMAR, Arvind. "The Church's Response to HIV/AIDS". In: NCCI Review, Vol. CXXX, No. 10, November 2010, p. 608.

<sup>46</sup> SENTURIAS, Erlind N. "God's Mission and HIV/AIDS: Shaping the churches". In: Response, p. 283-284.

<sup>47</sup> AUGUSTINE, David. "HIV/AIDS" in *Gurukul Daily Devotion* Nov. 6, 2007. Ed. Suneel Bhanu. Kilpauk: Gurukul Lutheran Theological College, 2007, p. 355.

<sup>48</sup> SENTURIAS, Erlind N. "God's Mission and HIV/AIDS: Shaping the Churches Response" in *International Review of Mission*, Vol. LXXXIII, No. 329, 1994, p. 277-278.

## Hope for the Future

HIV and AIDS produced the hopelessness and despair circumstance among African society<sup>49</sup>. But the Resurrection faith is the foundation of Christianity. Faith in the resurrection of Christ is the basis of human hope in the midst of despair and suffering. One who suffers as a HIV/AIDS very soon loses his/her hope for the future. This affects their very struggle for survival. They need help to see HIV/AIDS is not the end of life. Despite the limitations that are imposed by the effect of the sickness, a hope beyond the experience of the reality of present suffering is essential to face an otherwise bleak future. The church should be able to serve as a lighthouse of hope in the midst of hopelessness<sup>50</sup>.

## Conclusion

UNAIDS Survey clearly gives a picture about PLWHA in sub-Saharan Africa. 70% of all people living with HIV live in sub-Saharan Africa, despite accounting for just 13 percent of the world's population. The HIV epidemic has had a number of impacts on this region with the most obvious effects being ill health and the number of lives lost. In 2012, there were 1.6 million new HIV infections and 1.2 million AIDS-related deaths<sup>51</sup>. The fear and taboo surrounding the emerging HIV epidemic in the 1980s continue today. Infidelity and immoral is what most people think about when they hear HIV in Somalia, to the extent that people travel to neighboring countries to receive treatment, in an effort to hide their condition. Despite government backed TV and radio campaigns to break the silence, stigma continues and accessing treatment remains difficult for people living with HIV<sup>52</sup>.

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<sup>49</sup> EZRA, Chitando. *Living With Hope: African Churches and HIV/AIDS 1*, p. 73.

<sup>50</sup> JOHN, V. J. "Biblical Approach to Understanding HIV/AIDS: Some Insights From The Life Of Jesus In The Gospels". In: *Health, Healing and Wholeness*, edited by A. WatiLongchar. Assam: Barkataki, 2005, p. 92.

<sup>51</sup> <http://www.avert.org/impact-hiv-and-aids-sub-saharan-africa.htm#sthash.SS4Fx-8WR.dpuf>. Accessed 18/Dec/2014.

<sup>52</sup> <http://www.avert.org/hiv-aids-stigma-and-discrimination.htm#sthash.GFTogI21.dpuf>. Accessed 18/Dec/2014.

Such stigma continues inside the church and still some believe the epidemic is God's punishment due to the immoral behavior, but we clearly saw the HIV & AIDS is not only the result of immoral behavior. Instead of judging the people who are infected by HIV and AIDS the churches in Africa have to initiate the healing process. The HIV infected people and they might not have a medicine to heal their disease but they were wounded by the church and society through Stigma and Discriminations. The Christians and churches in Africa have to initiate healing process through accepting the PLWHA without any stigma and discrimination.

“Getting to zero” is the theme was given by UNAIDS origination for this year 2015 on HIV and AIDS<sup>53</sup>. Let the church in Africa should work to “Getting to zero” the stigma and discriminations.

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<sup>53</sup> <http://www.aidsmap.com/resources/worldaidsday/Getting-to-zero/page/2550747>. Accessed on 13.11.2015.

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