

Aids is a disease that
kills theology religion
essay



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CHAPTER 1

INTRODUCTION

By 1982, AIDS had been detected in some African countries and when HIV first began to be recognised as a problem in Africa, the response of the Church was mixed. According to Mash, Cilliers, Griffiths, Chemorion and Katani (2009), the response initially was stigmatising, AIDS was seen as the result of promiscuity, a sexual behaviour that is outside the accepted norm for the church of heterosexual, monogamous relationships, (p. 13). In the book ' Dealing with Sensitive Issues (1997),' the author also wrote that Churches have generally been much less effective, however, in addressing problems such as HIV prevention and HIV-related stigma, shame, discrimination, and cultural and gender issues associated with high-risk sexual behaviour. Denial of the reality of HIV and AIDS within church communities is also widespread. Moreover, although sex is the main means of HIV transmission in most countries, it is rarely discussed in Church circles in an open, non-judgemental way, (p. 6). In this paper, the researcher is bringing forward his findings on the Christian response to the AIDS epidemic and it is the researcher's desire to mobilize those Churches that are silent about it to take part in the fight against AIDS epidemic in Malawi. The researcher will first of all give out historical back ground about AIDS before bringing forward its effects on our Churches. In addition to that, the researcher will report on how different denominations address such an issue in their Churches. In order to come up with the data, there are several strategies that have been put in place and some of them are as follows: face to face interviews with Church Ministers and some marriage counsellors, the

use of questionnaires, internet and data from books including the Bible.

Since this issue is affecting the Church globally, the researcher will also seek information from outside Church ministers and ask them on how they are dealing with such an issue in their Churches. Sex was given as a gift to the married couples and its intended purpose was for multiplication purposes, (Gen. 9: 7) and if that could be exercised faithfully, the World could have been a better place to live. Kirkpatrick (1998) says, " If we believe in the love of God as we have glimpsed it in Jesus, AIDS can have no final victory over us. The task of care, of fighting back and of learning new patterns of personal discipline can be full of hope for us and for our world," (p. 107).

A. Background

AIDS is a disease that kills many people more especially here in Africa.

According to NAC report (2000-2004), HIV is the virus that causes Acquired Immune deficiency syndrome (AIDS). The immune system and the body's ability to fight other diseases are destroyed by this HIV. The longer the days a person lives with HIV, slowly the immune system is lowered and destroyed causing a person vulnerable to other disease. According to Mash, R., et al (2009), " Since the beginning of the pandemic, more than 15 million Africans have died from AIDS. Two thirds of all people living with HIV are found in Sub-Saharan Africa, although less than 10% of the world's population lives in Malawi. During 2007 alone an estimated 1. 5 million people died of AIDS (p. 3). AIDS has caused immense suffering on this continent and it has impacted many areas of our lives. Mash and colleagues goes on to say that the first case of AIDS was recognized in the USA when Doctors began noticing rare cancers and infections striking otherwise healthy young gay men. Thus, AIDS

was associated in the minds of the Church with homosexuality, promiscuity and sin, (p. 12). The first case of AIDS in Malawi was diagnosed and confirmed in the mid 1980's and now the number of people infected by the disease keeps on increasing at a higher rate. In as far as some of these people living with AIDS belong to the Church; many Churches in Malawi are silent about it. Many Churches do not say or talk about AIDS to their congregation and as a matter of fact, the researcher believes that these Churches are not fulfilling God's purpose for the Church- to love one another. The researcher believes that through this research, the Church will resume its role of caring for those people suffering from AIDS. The Church ought to be a place where those people suffering from AIDS should be able to go and find the support and love.

B. Statement of the problem Purpose

i. Aim. Even though some Churches and organisations are able speak about AIDS to their congregation, there are a good number of Churches that do not speak about AIDS to their congregations. The aim of this research is to encourage Churches to address the issue of AIDS to their members hence reducing the AIDS epidemic in the country. When Churches are able to teach their members about AIDS, the epidemic would be reduced and the world could be a better place for everyone to live. When people infected by AIDS are being counselled by Churches, they will have peace of mind as they will be treated fairly by the Church. ii. Objectives. The objective of this research is to encourage Churches to address the issue of AIDS to its members. The following are some of the ways the Church needs to do to make sure that the AIDS epidemic is reduced and that the people with AIDS have peace:

Churches have to encourage its members to abstain. Even the Bible encourages us to keep the marriage bed pure (Hebrews 13: 4) and the benefit with that is that individuals come to their first sexual partner with no baggage where they could not be comparing with their previous sexual experiences which may later on develop unfaithfulness. In addition to that, the researcher believes that to those who are AIDS positive, churches ought to teach them the proper way of living. A Church is there to provide love and support to its members and as Kirkpatrick (1988) says, " All of us need to remember that it is only the mystery of Love alone that is able to embrace, without any words the suffering of anyone living with HIV infection and its consequences. The Church has called everyone to love all God's people and to accept that it has to work with and care for people with AIDS including all those who are at the sharp end, the ' burn-out' end, of the crisis, (109). The Church ought also to provide support to the people infected by AIDS. This support could be in the form of basic needs like food, shelter and clothing. Some of the Church's positions ought to be granted to those infected by the AIDS disease regardless of their status. The researcher believes that, that could help such individuals not to feel segregated or neglected. In addition to that, Churches have to encourage peace, love and harmony amongst the members.

C. Guiding questions and Hypotheses

The researcher finds it wise to have the question; how is the Church responding to the AIDS epidemic? Are Churches able to speak about AIDS to their members? Are those infected or affected able to come to open and reveal their status? What is it that the Church is doing to help those infected

or affected by the disease? How do the people in the Church treat those infected or affected by AIDS? The researcher believes that these questions will be helpful in finding out relevant information needed to fight against AIDS epidemic in Malawi. The researcher thinks that this is how the Church has responded to AIDS epidemic: Churches are silent about AIDS and the people are ignorant about it. Those people who are infected by the disease do not receive the care and support from the Churches. Some Churches abandon those people infected by the disease and that makes such individuals not to disclose their status. Churches do not express love to its members who really need love. Churches do not offer moral support to its congregation. Churches are not generous enough to giving to those with AIDS. Churches do not treat people infected with AIDS and those who are not equally. Churches do not hold seminars where members could go and learn about AIDS. Churches do not teach about AIDS to its members. Churches do not counsel those people with AIDS. Churches do not teach about abstinence to its members. Churches regard those people infected by AIDS as a punishment from God.

D. The Delimitation

Most of the data will be conducted in the city of Lilongwe and the researcher will not give anything like money to the people being interviewed. The researcher will also avoid group discussion method as some people would not be open enough to give their opinions about the topic.

E. The Limitations

The researcher will not be able to have as many information as possible because of not having enough money which could be used for transport in

going to some places to gather the necessary data. The researcher also thinks that men will be open enough to giving out information about AIDS than will do women. That could also be regarded as a limitation because the views would only come from the male side. Time will also be one of the barriers that the researcher is likely to face. The researcher will not have enough time to go to some other Libraries due to lack of time. Most of the people whom the researcher has assigned to be interviewed would not be able to give their time and to be interviewed. Some of the organisation that the researcher believes will be able to give out the data will not be able to do so as well.

F. The Definition of Terms

AIDS: Stands for Acquired Immune Deficiency Syndrome and it is a disease that is caused by HIV. It is a result of progression of HIV infection. ARV: Stands for Antiretroviral Therapy and they are drugs that those infected by AIDS takes. CCAP: This is an abbreviation of a Church denomination and it stands for Church of Central Africa Presbyterian. HIV: Stands for Human Immune Virus and it is the virus that causes AIDS. NGO's: Stands for Non Governmental Organizations and they work hand in hand with those institutions that take part in the fight against AIDS.

G. The Assumptions

The researcher believes that by writing this paper, Churches could be mobilized to take part in the fight against the AIDS epidemic. It is high time Churches stood up and talk about AIDS to its members. In so doing, those who are both infected and affected by the disease would find love and comfort that they need from their Churches. The Church is there to show

love to the people regardless their status and in this paper, the researcher believes that the Church would be encouraged to take a leading role in the fight against AIDS.

H. The Importance of the Study

AIDS Epidemic is killing a lot of people in Malawi. If practical measures will not be put in place, the effects could keep on increasing. In this paper, the researcher will look into how the Church is responding to such an epidemic. The researcher will also put into consideration what he believes could be helpful in fighting against the epidemic that is killing a lot of people in Malawi. We cannot deny the fact that AIDS is real and almost everyone is either infected or affected by the disease. If the Church is silent about it, then there is a problem; in this paper, the researcher will mobilise Churches to take an active role in reducing the disease.

Chapter 2

Literature Review

Life expectancy is the average length of life in a Country. According to Garland and Blyth (2005), the life expectancy in many African countries is decreasing because of the AIDS epidemic. Garland and Blyth goes on to say that in the four worst affected countries in southern Africa (Botswana, Malawi, Mozambique and Swaziland), the average life expectancy has greatly dropped from 62 years (where it should have been now) to 47 years. That is to show that the average person is expected to live only 47 years, because of the impact of HIV. According to Atupele Community Hospital Mobile Clinic HIV/AIDS and Outreach Services Program (28th February-31st Jan 2013), It is estimated that 17 Million Africans have died since the AIDS <https://assignbuster.com/aids-is-a-disease-that-kills-theology-religion-essay/>

epidemic began back in the later half of the 1970s. In excess of 3.7 million of them were children. The researcher loves what Garland and Blyth said, "When we discuss statistics about how many people have HIV/AIDS, it is easy to forget that behind each of these figures there is a person and family who are experiencing great suffering" (p 111). This is because many are the times when we hear about the statistics we just take them for granted but it takes for a person who has suffered the pain of losing someone due to AIDS. According to Garland and Blyth (2003), "In the last twenty years, AIDS has killed ten times more people than all of the wars in Africa in the last one hundred years" (p 113). Garland and Blyth goes on to say that in six countries of southern Africa, AIDS is expected to claim the lives of eight to twenty-five percent of today's practising doctors within few years (p 113). All this is to show how seriously the epidemic is killing a lot of people in Africa as a whole. In more recent times, and especially in Africa, Churches have responded to the challenge of AIDS. According to Network for African Congregational Theology (NetAct) HIV/AIDS project team, this is seen in the increased care of HIV positive people and orphans that is supported by Churches. The Catholic Church is estimated to be providing 25% of the care worldwide through home based care, clinics and hospitals. In a study of South African NGO's, of the 1582 entries in the National AIDS database, 162 identified themselves as faith based organizations, (Mash R, p14). These figures just show that there are a good number of Churches that are not positively responding to AIDS epidemic and Malawian Churches are no exception. The researcher loves what Bil (1988) wrote in his book when he said that "the Church is expected to be a 'people's ministry' to all the peoples of God, and especially to the marginalised, the sick, the suffering

and those who suffer with them (p. 97). It is the high time the Church united and fight the AIDS epidemic that is killing a lot of people. The AIDS epidemic has negatively affected Malawi in so many ways and the researcher concur with what Byamugisha and Williams (2007) say, We urgently need to ' break the silence', not only about HIV/AIDS, but also about sex, sexual behaviour, and the unequal relationships between men and women. In fact, churches- especially in Sub-Saharan Africa-have enormous potential for empowering individuals and communities with the knowledge, attitudes, skills and strategies they need to deal with issues related to sex, gender and HIV/AIDS. (p 6)

The Impact of AIDS epidemic in Malawi

The Health sector

The health costs are already great and are constantly rising. The Government of Malawi, some NGO's and various international organisations spend a lot of money in trying to care for those people suffering from AIDS. Not only do these organisations spend a lot of money in caring for those people infected by AIDS but the families where those people belong to also spends a lot of money in caring for their beloved one. For instance, Garland and Blyth (2003) said, " A study in Rwanda showed that families with HIV-infected members spent on average \$63 for health care, compared to only \$3 per household without HIV (p116). The researcher is encouraging the Church to put into practice what Torach said, As an individual, however, I have realised that one way to deal with the challenges of HIV and AIDS is to embrace these challenges and to join others in creating more awareness on the issues surrounding the epidemic, and in fighting the stigma, shame,

denial, prejudice, ignorance and myths associated with HIV and AIDS, (Byamugisha, G & Williams, 2007, p 27). Since the AIDS epidemic does not only affect the infected but also the affected, the Church ought to rise up and take part in the fight against the epidemic

The Economic Sector

Not only does the AIDS epidemic affect the health sector but the economic sector in Malawi has also been negatively affected. Many times the death or the illness of a family member more especially the bread winner of the family leads to a large reduction in family income. In Malawi, children rely on their parents for everything that they need and if a father or a mother dies in a family, there is disaster in the home. The parents are the ones who work hard so that by the end of the day they bring home money which could be used in various ways: School fees for the Children, food at home and part of the money could be used to buy fertiliser for those who farm. So we see that families are greatly affected and as Garland and Blyth (2003) says, " In this way, HIV is causing lasting damage even to children who are not infected. The children become malnourished and more open to sicknesses, including HIV infection, (p 116).

The Education Sector

The education system is also negatively affected by the AIDS epidemic in Malawi. According to Garland and Blyth (2003), " Many Children do not attend school because of the sickness or death of wage earners in the family, (p 116). In addition to that, Dealing with sensitive issues (1997) says, " Students whose lives have been affected by the disease may be uncomfortable when HIV/AIDS is discussed, or they may want to enlighten

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the class (p. 8). This is to show that the emotions of the children are also negatively affected and it is hard for such children to concentrate in their classes. Some of them take responsibilities of their parents after the parents die. Many of these children do not continue with their studies and instead work at home, farming and caring for their siblings. The economic standards of the country could not be improved because the society could be full of uneducated children. " One study in Central African Republic shows that only 39 percent of orphans children attend school, compared with 60 percent of other children, (Garland & Blyth, 2003, p 116). Those figures just indicate clearly how the AIDS epidemic is negatively affecting the educational sector. The loss of teachers with AIDS also affects the educational sector negatively. " In Botswana, four percent of all children have lost a teacher to AIDS. Estimates in 2000 were that 12 percent of all educators in South Africa were infected with HIV," (Garland & Blyth, 2003, p 119). So the death of these teachers not only affects the students but the country as a whole because those children could have been leaders of tomorrow.

An Increase in Poverty.

The AIDS epidemic is also playing a big role in an increase of poverty in Malawi. As Garland and Blyth (2003) put it, " the store of knowledge that societies have collected is also being lost as many well-educated leaders, thinkers, writers, and experienced, wise people are also dying," (p 117). So instead of utilising their abilities in developing their societies, these productive people die living behind unproductive people like children, orphans, and the widows who relied on them for their daily living. In so doing, the poverty keeps increasing instead of being eradicated by the

citizens of the society. Garland and Blyth (2003) goes to say that " Governments, civil service, the courts, and the armed forces are all feeling the effects of leaders dying from AIDS," (p 117). That is how the death of a person with AIDS affects the country as a whole.

A Decrease in Productivity in Industry

" Companies are being crippled by high absenteeism, having to train new workers, paying pensions and sickness allowances, and helping with the cost of burials," (Garland & Blyth, 2003, p 117). From that the researcher believes that it would be tough for Industries to increase its productivity and instead a decrease in productivity is what follows. Garland and Blyth (2003) goes on to say that some employers are paying for antiretroviral drugs for their HIV positive workers, believing that it is economically better for them to keep their existing workers alive and healthy than to have to train new skilled workers," (p 117). All that play a part in the decrease in productivity in industry and that would even contribute negatively on the economy of the country as well. When the HIV first began to be recognised as a problem in Africa, The response of the Church was mixed. Generally the response initially was stigmatising, AIDS was seen as a result of promiscuity, a sexual behaviour that is outside the accepted norm of the Church of heterosexual, monogamous relationships. The taboo on sex and death removed any discussion on HIV/AIDS from the general discourse of the Church and created a barrier between those living with the disease and the rest of the community, (Mash & friends, 2009, p13).

The Positive Responses by the Church

Though there is a great need for Churches to be active in the fight against AIDS, some churches have responded to the challenge. This is evidenced by the care given to the HIV positive people by Churches. According to Mash and friends (2009), " the Catholic church is estimated to be providing 25% of the care worldwide through home based care, clinics and hospitals," (p 14). This is what the church is called to do-to love the people who were created in God's image. Mash and friends (2009) goes on to say that in a study of South African NGO's, of the 1582 entries in the National AIDS database, 162 identified themselves as faith based organizations (p 14). Though the number may look small but these faith based organizations are doing a good job in reducing the AIDS epidemic. And how should the Church react to the reality of HIV and AIDS? Mash and friends (2008) answer to say that the Church and preachers must talk about the things that cause us pain, "(p81). Mash and his friends (2008) goes on to say that a language which talks about suffering gives dignity to the suffering. The Church should not just sit idle whilst she know that AIDS is real and that it is killing a lot of Malawians. Mash and his friends (2008) says, HIV and AIDS reminds us of the possible pastoral impact of sermons on those who are suffering. When preaching, the reality of suffering should be named and the reality of hope within hope should also be named. After knowing and understanding about the reality of HIV/AIDS, the people should also know about the hope within suffering. The researcher loves and appreciates the ' Chongoni declaration of the Nkhoma synod (CCAP) in Malawi: We do hereby declare that we as a Church confess and repent before Almighty God that we have not obeyed His word. We have not been fully involved in addressing the HIV/AIDS crisis. We ask for

God's forgiveness, and from now onwards we will take a stand of prevention, care and support, (Mash & friends, 2009, p 14). The Lutheran Church also met in Nairobi in 2002 and declared: Our Churches have not always been safe or welcoming places. In some cases Holy communion has been refused to people living with HIV/AIDS. Funerals of people having died from AIDS have been denied and comfort to the bereaved has not been given. We repent of these sins, (Mash & friends, 2009, p14). From those decrees, we see that the Church has not been playing a good role in fighting against AIDS epidemic but it is good to hear that some Churches are now actively involved in the fight against AIDS epidemic. For instance, the CCAP Church (Livingstonia Synod) through its arm, the Livingstonia Synod AIDS Programme (LISAP) is playing a good role in the fight against AIDS in the Northern region. Taking the example of the Livingstonia Synod through its branch LISAP, the Church could positively respond to AIDS epidemic through:

Breaking the AIDS silence in the Churches

The Church ought to speak about AIDS to their members so that no one is ignorant about it because it is until someone knows what AIDS is when he or she starts taking measures in the fight against it. As Mash and friends (2008) write, " HIV issues are not dealt with sufficiently often or insufficient depth in sermons or at religious gatherings," (p 15). The truth is that when Churches do not speak about AIDS to their members, these people could be hearing it from outside the Church and the outcome would be even worse. So the Church should not allow their members to be told about AIDS from a secular perspective but let the Church speak to their members in peace and love.

Promoting abstinence

We cannot run away from the fact that many young people engage in premarital sex and the Church has a responsibility of discouraging such a practice. A good example is in Uganda whereby when the Church started promoting abstinence, significant changes were noted in the age of sexual debut in that the percentage of young people engaging in premarital sex dropped from 60% to 23%, (Mash & friends, 2008, p 17). The researcher believes that the Church should really play a good role in promoting abstinence and as Mash and friends (2008) says, " these messages changes are consistent with the dominant AIDS prevention messages of the early response-love faithfully and zero grazing," (p 17). Messages about AIDS prevention should not only be passed through the networks or the Government but friends could also be playing a vital role in dissemination these message. Behaviour change, in particular partner reduction, seems to lead a significant drop in HIV; Mash and friends(2009) says that for that to be accomplished, different role players must work together and that the key thing should be that there is a need for collaboration and not undermining each other, (p 18).

Living positively

For many years people have believed that a person dies if he or she is infected with HIV but this is not true anymore. As Mash and friends (2008) says, " People with HIV are entitled to live normal lives, free from discrimination, fear or misunderstanding. HIV need no longer be considered a death sentence, but rather a chronic disease, (p 103). God gave us the pure gift of being a sexual being. It is our responsibility to keep ourself pure

until marriage. After marriage it is our responsibility to keep ourselves faithful to the wives till death parts us. God blesses those who keep themselves pure. Our challenge and what we ought to pursue is II Corinthians 7: 1, " Since we have these promises, dear friends, let us purify ourselves from everything that contaminates body and spirit, perfecting holiness out of reverence for God," (McArthur Study Bible).

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