Methodist Church Connexional Task Force on HIV/AIDS

Methodist Response to HIV/AIDS in Southern Africa

Strategy and Implementation Plan

The PLAN entails an integrated response to HIV/AIDS by the Methodist Church of Southern Africa.

The PLAN is comprised of EIGHT key elements:

- mobilization
- training
- education and prevention
- health care
- counselling
- welfare and support
- project development
- funding

OBJECTIVES

The Plan is guided by the pursuit of FOUR overriding objectives:

- Preventing the spread of AIDS
- Care for those infected and affected by HIV/AIDS
- Reducing the personal and social impact of HIV and AIDS; and
- Mobilizing national, international and local resources

THE HIV/AIDS CRISIS

The HIV/AIDS virus has infected 60 million people throughout the world since its onset 20 years ago. Over 95% of all cases and 95% of AIDS deaths occur in the developing world, mainly among young adults and women.

SOUTH AFRICA

South Africa is the site of one of the fastest growing HIV epidemics in the world. On average, 1500 persons are being infected with HIV each day. One in every eight adults is living with AIDS. By the year 2005 more than 6 million South Africans will be infected and 2.5 million people will have died of AIDS related illnesses. Over 60% of adults are infected before the age of 25.

METHODIST CHURCH CONFERENCE (2001)
RESPONDING TO THE HIV/AIDS EPIDEMIC IN SOUTHERN AFRICA

OUR THEOLOGY

The Gospel of Jesus Christ offers to the world life in all its fullness. The vision of the Kingdom of God, brings near the hope and reality of a society built on the foundation of an all embracing love, alternative lifestyles, compassion and decency.

Jesus does not despise those whom society rejects, he shows compassion for them and loves them: the publicans and prostitutes (Mark 2:13-17; Matthew 11:19; 21:31-32; Luke 15:1), the simple (Matthew 11:25), the little ones (Mark 9:2; Matthew 10:42; 18:10 and 14), the least (Matthew 25:40-45), those who practised despised professions (Matthew 21:31; Luke 18:11-14), women with a dubious sexual history (Luke 7:36-50; John 4:8-18).

The proclamation of "the Good News" in Jesus Christ requires that Christians openly embrace those infected by HIV/AIDS, in self-sacrificing love and care for those who are suffering.
The Church and Christians are called to be the instruments of the incarnational presence of Christ, and as such are called to express the love of Jesus for those who are infected by HIV/AIDS, and to treat them with compassion and care. They are not to engage in self-righteous judgement (Matthew 7:1-5). The Methodist Church of Southern Africa does not exclude from its membership those who are HIV positive or those who have AIDS. It calls on all Methodists to act with love and compassion towards the victims in the present HIV/AIDS crisis in our country.

"HIV/AIDS IS NOT THE JUDGEMENT OF GOD ON THE INFECTED
IT IS AN OPPORTUNITY FOR METHODISTS TO LOVE AND CARE FOR THOSE AFFECTED."

CAUSES
HIV is found in body fluids such as blood, semen, vaginal fluids and breast milk. It is passed on from one person to the other and is primarily linked to:

- transmission through sexual intercourse
- infected blood (e.g. contaminated blood transfusions or unsterilized needles and syringes)
- mother-to-baby transmission (childbirth, breast feeding)

THE CONSEQUENCE

- Increased illness and deaths
- The tragic prospect of mass orphans and child-headed households
- Reduced life expectancy
- Obstacles to overcoming poverty
- Impact on the economy (workforce)
- Stigma and discrimination
- Overstretched and inadequate resources, health care, support services
- A variety of problems throughout society, in families, local communities, schools, prisons and other institutions

WHAT CAN METHODISTS IN SOUTHERN AFRICA DO?

- Promote open frank discussion of sex and sexuality in Church and Society
- Encourage, empower and train parents to talk openly to their children about sex, the HIV/AIDS epidemic and other Sexually Transmitted Disease
- Impart to young people the vision of a lifestyle governed by informed choices, shared responsibility and healthy sexuality and the ideal of Christian marriage
- Consult the affected
- Promote healthier and safer sexual behaviour through education and social integration
- Prioritise preventive programmes for men, women and young people
- Explore models of support and care for AIDS orphans
- Embark on poverty relief programmes for affected households
- Provide information and support systems for private and public health structures.
- Advocate delivery of basic programmes and health care
- Provide resources (human/material) to care for the sick and dying
- Establish HIV/AIDS community-based homes and places of care for HIV victims and especially for AIDS orphans
- Promote anti-retrovirals to prevent mother-to-child transmissions
- Reduce stigma and discrimination, “fear of contagion” and anticipatory grief through care and counselling
- Work with ecumenical and inter-religious partners, and government and societal structures at all levels
- Explore every possibility to ensure that orphans remain in school
- Speak out at every opportunity against the commercialization of sex
- Ministers to be encouraged to find resource people to communicate this message at congregational level
- Provide moral leadership in society
PROGRAMMATIC RESPONSE TO THE HIV/AIDS PANDEMIC

OUR APPROACH
An integrated response to HIV/AIDS
A key principle will be that people with HIV and AIDS will be consulted in regard to all prevention, intervention and care strategies.

GOAL OF THE MCSA HIV/AIDS PROGRAMME

- prevent the transmission of HIV
- provide care for people infected with and affected by HIV/AIDS
- provide a forum for Methodists in Southern Africa to become involved in efforts to combat the spread of HIV/AIDS
- mobilize national, international and local resources to be deployed in the fight against HIV/AIDS
- protect the legal rights of people infected with AIDS and reject all forms of discrimination

AIDS AWARENESS - EDUCATION

One of the myths about addressing the HIV/AIDS issue in Southern Africa is the notion that people are not AIDS-aware. It is a fact that government and non-governmental agencies and civil society have created a largely AIDS aware population (MRC: SA.90%).

Publicity and educational campaigns have failed to alter behaviour by inducing fear. Even more morbid are instances where AIDS awareness is linked to a fatalistic world view: "HIV/AIDS is the judgement of God”. Negativity, fatalism, sense of doom, and erasure of hope will not guarantee proactive responses to HIV/AIDS. HIV/AIDS is not the judgement of God on the infected it is an opportunity for Methodists to love and care for the affected.

Fear and anxiety alone will not persuade behavioural change in people. Christians should alert people to the calamity of HIV/AIDS through educational programmes. Such programmes should be implemented with sensitivity and professionalism based on accurate information, love and compassion and with concern and respect for human rights.

The church needs to re-examine the human conditions that promote HIV/AIDS and advocate Christian values for “behavioural change” and address the root causes of vulnerability.

The church's teaching should give special attention to gender issues, including: the empowerment of women and girls.

Information and behavioural change programmes should be developed to sensitize and mobilize men and boys. The necessity of men to change their behaviour and take responsibility for containing the spread of HIV/AIDS should be emphasised. The church should help men reexamine male and female social, customary and cultural roles and the benefits of these in combatting the spread of HIV/AIDS.

TARGETED PREVENTION FOR ALL AT RISK

Clinical services offering care are an important access point for people at high risk for AIDS, not only for diagnosis and treatment but also for information and education. Control and prevention of AIDS is a major strategy in the prevention of HIV infection and AIDS.

One of the cornerstones of HIV/AIDS control is adequate management of patients with symptomatic HIV/AIDS. This includes diagnosis, treatment and individual health education and counselling on disease prevention and partner notification.

HIV prevention strategies depend on CARE and SUPPORT for those living with AIDS.

These efforts include:

- reaching out to vulnerable communities through educational programmes
- interpersonal communication
- provision of treatment for HIV/AIDS
- reduction of risk
- access to voluntary testing
- access to counselling
- home-based care and institutional care for persons with symptomatic HIV infection
- prevention of perinatal transmission
- condom distribution

**PRESERVATION OF CONFIDENTIALITY**

It is very important that the Methodist HIV/AIDS work is imbedded within a human rights framework. Disclosure of the HIV/AIDS condition has serious personal and social consequences for the patient. He/she could be isolated, rejected or abandoned by others which may lead to increased anxiety, depression and psychological conditions that tend to hasten the onset of full-blown AIDS. In every case the persons right to disclosure should be respected.

**RESPECT FOR CULTURE, TRADITION AND PRACTICE**

The Methodist response to people living with HIV/AIDS should be sensitive to peoples culture, traditions, customs and religious practices. Our approach must encourage those aspects of culture that promote healing and wholeness (death and dying, communal care for the dying, bereavement and mourning and the care of AIDS orphans). In line with Christian ethics we will commit to identifying and challenging harmful rituals and practices where culturally supported behaviour makes people more vulnerable to HIV.