

THEOLOGY IN THE HIV&AIDS ERA SERIES



MODULE 6

A THEOLOGY OF LIFE
IN THE HIV & AIDS CONTEXT

BY
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THE HIV&AIDS CURRICULUM FOR TEE
PROGRAMMES AND INSTITUTIONS IN AFRICA

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A NOTE TO LEARNERS, USERS AND READERS

The overall goal of this module is to contribute towards building HIV&AIDS competent churches and theological institutions. This module is part of a series of ten modules entitled, *Theology in the HIV&AIDS Era* which were developed for distance learners. The modules accompany the HIV&AIDS Curriculum for TEE Programmes and Institutions in Africa.

The process of production began with an all Africa training of trainers' workshop on mainstreaming HIV&AIDS in Theological Education by Extension (TEE), held in Limuru Kenya, July 1-7, 2004. The workshop called for the production of a distance learning curriculum and accompanying ten modules to enable the mainstreaming of HIV&AIDS in TEE programs.

Writers were thus identified, trained in writing for distance learners and given their writing assignments. In July 2-13, 2005, twelve writers gathered at the Centre for Continuing Education at the University of Botswana with their first drafts for a peer review and a quality control workshop. The result of the process is this series on *Theology in the HIV&AIDS Era* and the accompanying curriculum for TEE. The whole process was kindly sponsored by the Ecumenical Initiative for HIV&AIDS in Africa (EHAIA).

Although the target audience for these modules is the distance learning community, it is hoped that the series will also stimulate new programmes, such as diplomas, degrees, masters and doctoral studies in HIV&AIDS theological research and thinking in residential theological institutions. It is also hoped that the series will contribute towards breaking the silence and the stigma by stimulating HIV&AIDS theological reflections and discussions in various circumstances, such as in Sunday schools, women's meetings, youth and men's fellowships, workshops, conferences and among teachers and preachers of religious faith.

Musa W. Dube
Gaborone, Botswana
July 28, 2006

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MODULE 6

A THEOLOGY OF LIFE IN THE HIV&AIDS CONTEXT

MODULE OVERVIEW

Welcome to this module on theology of life in the HIV&AIDS context. In Sub-Saharan Africa, as in many other parts of the world, many epidemics are undermining life and causing people to be poor and to live in squalid conditions. HIV&AIDS is the most voracious of these epidemics, critically undermining African life over the past few years. For example, between 1966 and 1990 Botswana enjoyed one of the most rapid economic developments in the 'two-thirds world'. During that period of time the literacy rate improved; the poverty datum line was tolerable by developing world standards; infant mortality rate diminished; and life expectancy increased to about 72 years. However, since the early 1990s HIV&AIDS has claimed so many lives, particularly persons between the ages of 24 and 45 who are also the most productive, that the economic growth the country has been altered. Because many people have been dying of HIV&AIDS, life expectancy has decreased to around 42 years.. This is such a national disaster that theologies and mechanisms are required to fight the factors that so threaten life itself. We are offering you this module to help construct a theology of life.

First, this module considers social factors that undermine and deplete life. As HIV&AIDS is an epidemic within other epidemics, Unit 1 spells out some of these epidemics. This module also seeks to encourage appreciation of the sanctity of life particularly in the era of HIV&AIDS. It is expected that you will also, at the end of this course, be able to commit yourself, if you are not already committed, to work for quality of life for all, especially those who are infected or affected by HIV&AIDS.

This module draws on several sources of theology. It also draws on personal experience as all of us have some experience with HIV&AIDS, and we will reflect on the experience of others as well. The module draws on Biblical narrative to explore issues that HIV&AIDS raise. You will agree that the theological issues that the

epidemic raises are vast and therefore this module attempts to stimulate critical discussion about these issues. Our cultural resources also contribute to the development of a theology of life in Africa. Culture is a very important reference point for Africans; it is a source of identity and of theology.

It is important to explain that throughout the module we talk of HIV&AIDS rather than HIV/AIDS. This difference is significant because HIV and AIDS are not synonymous. One may have HIV but still be healthy. It is important to avoid terms that seem to equate having the HIV virus with actually suffering from AIDS. Suffering from AIDS occurs when the viral load is such that the body can no longer cope on its own. Antiretroviral treatment is needed to slow down the effects of the virus on the body.

By the end of this module, the learners should be able to:

- ✂ Understand that life is a gift from God
- ✂ Discuss socio-political factors that compromise and diminish African life
- ✂ Expound scriptural basis for a theology of life
- ✂ Explore resources in African culture for the development of a theology that recognizes, promotes and celebrates the sanctity of life.
- ✂ Discuss factors that makes some groups more vulnerable to HIV&AIDS
- ✂ Be motivated to participate in the fight against HIV&AIDS

INSTRUCTIONS

For your study throughout this module, please be sure that you have:

1. A complete copy of the Bible in the language of your choice
2. A hard cover notebook for your notes, activities, tests and examinations
3. That you attempt all the activities and self-assessment tests in all the units.

UNIT 1

SOCIAL EPIDEMICS AND THE HIV&AIDS EPIDEMIC

OVERVIEW

Welcome to unit 1. In this unit we will begin exploring a theology of life by examining the social factors that fuel the spread of HIV&AIDS. We want to highlight that HIV&AIDS is an epidemic that is groomed and assisted by social injustice poverty, gender inequalities, sex work, and racism. Understanding the context of HIV&AIDS will assist us to become co-workers with our communities, churches and God in the preservation of life by counteracting death-dealing factors in the society.

OBJECTIVES

By the end of this module the learner should be able to:

- ✂ Describe the social context of HIV&AIDS
- ✂ Discuss the link between poverty and the spread of HIV&AIDS
- ✂ Explain how gender inequalities contribute to the spread HIV&AIDS
- ✂ Examine role of sex work and racism in the HIV&AIDS epidemic

TOPICS

- ✂ The Context
- ✂ Poverty
- ✂ Gender Inequalities
- ✂ Sex Work
- ✂ Racism

Summary, Self Assessment, Further Reading

ACTIVITY 1

- 1. Why is culture an important source for a theology of life?*
- 2. What is the difference between HIV and AIDS?*

THE CONTEXT

The HIV&AIDS epidemic is a global phenomenon. There is no continent that does not share the problem. However, the spread of the epidemic is disproportionate in its effect on sub-Saharan Africa. Of the 40 million people infected with HIV&AIDS in the world, 30 million are in Africa. Of the six million people who die each year, the majority are in Africa. HIV&AIDS, without doubt, makes us walk in the shadow of death.

As we explore a theology of life, it is important that we look at the many death-dealing factors that ravage Africa. HIV&AIDS is an opportunistic disease that does not just take advantage of a compromised immune system, but also thrives on other social demons prevalent in Africa. It is important that these demons are named and addressed because attempts at dealing with HIV&AIDS alone will be futile unless a comprehensive approach is taken.

Imagine Africa to be like a human body whose immune system is compromised. Her red blood cells are weak. Her body is poisoned with the viral load, and her CD4 count is very low and going down. Her body is diseased and riddled with all sorts of wounds that incapacitate her from functioning properly. Unfortunately she does not have access to proper medical care, nor does not have enough resources to buy drugs to help herself out of her misery. Africa, the continent, suffers in this way because of political turmoil, economic exploitation and international injustice.

Africa bleeds like the woman in the gospel who suffered from disease for twelve years (Matthew 9: 20 – 22). During this time, everybody stigmatized her, shoved her around, blamed her for her ailment and tried to silence her when she tried to seek help for her condition. Africa bleeds because of the demons of death that have left her 'broken down,' like the broken body of Jesus of Nazareth at Golgotha. Some of her children, children with the finest minds and qualifications, leave school to mend the

wounds of others in their homelands. Her raw materials are taken away from her by giant commercial companies, unjust international economic policies and her money is not worth the paper it is printed on because of her economic bleeding. We will now identify a few of the death- dealing factors that continue to keep Africa under bondage:

ACTIVITY 2

- 1. What is the significance of Matthew 9: 20 – 22 for a theology of life?*
- 2. Describe the other epidemics ravaging Sub-Saharan Africa.*
- 3. Describe how HIV&AIDS have affected the economies of African countries.*
- 4. Explain the statement, 'HIV&AIDS is an opportunistic disease.'*

POVERTY

A few years ago a controversy developed by the utterances of the South African President, Thabo Mbeki, when he, among other things, said that HIV&AIDS is mainly a result of poverty. We will not discuss here the entirety of what Thabo Mbeki said, but it is important to note that what he said about the link between poverty and HIV&AIDS is very true for Sub-Saharan Africa. Many people in Africa die needlessly because HIV&AIDS spreads easily where there is poverty and many people do not have the basics of life. Poverty means that people cannot access antiretroviral treatment when needed because these drugs are generally quite costly,

Africa is the poorest continent in the world. There are many factors that lead to the high levels of poverty in Africa. Some of these include corruption and bad governance, unjust international trade rules, multinational corporations and international debt. Corruption is generally rampant in Africa, resulting in an elite group that enjoy the economic benefits of the continent while the majority of people live in poverty. Such corruption is often linked to unstable political climates related to poor governance. Africa in general suffers from unjust trade rules often determined by financiers and multinational corporations in the West contributing further to the poverty in Africa. For example, many of the raw materials used in the developed world, such as gold, diamonds, tea, cocoa, steel and timber, come from African countries. In most cases they are bought at prices less than adequate to support the

economies of the countries where they come from. It is important to note that not only is there a flight of raw materials from Africa, for each dollar that comes from the West in the form of trade or aid, four dollars leave the continent to service international debt.

ACTIVITY 3

1. *From your context, state examples of national corruption and how the church is responding to them.*
2. *Discuss how international economic policies affect your country.*

Many African people, even those with money, still find antiretroviral drugs inaccessible because of the patent laws of the countries where the pharmaceutical companies are based. Whereas companies exist in the developing world which can produce the antiretroviral drugs at a fraction of the cost, they are disallowed by intellectual property rights from doing so. This was illustrated a few years ago by a high profile court case in South Africa in which South African HIV&AIDS activists challenged patent laws with regard to HIV&AIDS. Their basic argument was that as HIV&AIDS is a life threatening emergency situation, patent laws are not applicable in such situations. The question of access of drugs and medication is therefore a justice issue that must be addressed.

While an average person in Western Europe survives on about £60 a day, in Africa many persons survive on less than £1 a day. Having so little money means that the majority of people in Africa do not have nutritional foods thus making them vulnerable to diseases such as HIV&AIDS. Those most affected are children and elderly people who often suffer from malnutrition.

Poverty is increased by alcohol and substance abuse. African cities and townships include many low- income earners who may frequent *shebeens* where alcoholic concoctions of all kinds are sold. Many of the unemployed people waist away their lives through alcohol and drug use at these places. Poverty therefore breeds many other ills that undermine the value of life.

In Botswana 36 % of the population live below the poverty line. As it is mostly the able-bodied and those are able to contribute to the economy who die from HIV&AIDS related illnesses, poverty is on the increase in most households. When the bread-winners die, they leave behind young children who are in no position to fend for themselves. Consequently, many homes are headed by children, and many of these children suffer from abuse at the hands of their relatives and neighbors, including being deprived of their inheritance.

Read and reflect on the case study below:

Ponalo is 16 years old. She has four younger siblings. Their mother, who was a single parent, died a couple of years ago due to HIV&AIDS. The only thing she left her children is a two -roomed house. Now the family is headed by Ponalo. Although she had passed her Junior Certificate with second class, she has had to leave school and find a job in order to support her family. She works as a domesti but she cannot afford to buy clothes or to give transport money to her brother whose school is far away. She tried to register her younger siblings with the council social worker so that they can get government support as orphans. But her relatives say that this will disgrace the family name, so she has not gone back to complete the process.

ACTIVITY 4

- 1. Discuss President Thabo Mbeki's assertion that poverty is the main cause of AIDS related deaths in Africa.*
- 2. Discuss those aspects that, in your opinion, exacerbate poverty in Africa.*
- 3. Explain what patent laws are.*
- 4. Discuss some of the dangers child-headed families are likely to face.*

GENDER INEQUALITIES

Another demon of death in Africa through which HIV&AIDS spreads is gender inequality. Gender inequality arises from a system of patriarchy prevalent in most societies in which a man is often seen to be superior to a woman. In most African

societies a man is recognized as the head of the family, thus making a woman in marriage a minor. This often means that the man is in charge of the sexual life of the couple. It is he who decides how many children they should have, when to have them and how to raise them. It is also the man who often decides when to have sex and how to have it. For instance many men choose not to use a condom as a protective measure against venereal diseases or HIV&AIDS. Women do not have much say in these matters, contributing to why these issues become life and death concerns. Many examples exist of women who were faithful to their spouses, but have died of HIV&AIDS because their husbands were unfaithful and would not use protection.

According to Setswana culture, when young people get married, the men of the community often take the husband aside for counselling and older married women take the bride aside for the same task. Although this is a noble practice that is meant to prepare and strengthen the new couple for marriage, it can also buttress old traditions that oppress women. For example, advice older women have traditionally given include such sayings as: *nyalo e a itshokelwa ngwanaka* (marriage is something you must endure); *monna ga a ke a botswa gore o tswa kae* (never ask where your husband comes from.); and, *monna phafana o a fapaanelwa* (a man is like a calabash that is shared). These sayings have over the years bolstered gender inequalities.

In some countries, such as Botswana, antiretroviral treatment is provided free in the public health system. However, it is increasingly becoming clear that some women are unable to benefit from this service because men are reluctant to test for HIV&AIDS to determine whether or not they have the infection. In turn they sometimes disallow their spouses or partners to test.

In Botswana about 20 per cent of the couples that go for HIV&AIDS testing are discordant, meaning that one person is HIV negative whilst his or her partner is positive. This means that if the relationship is a loving one, then the negative partner can take care of the other when he or she eventually gets sick. Unfortunately though, only women often show the eagerness to want to test and know their HIV&AIDS status. However, if they husbands or boyfriends do not allow them to test, this opportunity is diminished and in this way HIV&AIDS continues to obliterate African life.

ACTIVITY 5

1. *Define patriarchy.*
2. *Discuss the concept of a man as head of the family and whether, in your opinion, this idea still serves a purpose.*
3. *Describe how in your culture people are aided to prepare for marriage.*
4. *Consider why in most societies men are slow to avail themselves of HIV&AIDS testing.*

COMMERCIAL SEX

Poverty, as we have described it above, often leads to other social problems. In sub-Saharan Africa commercial sex, commonly known as prostitution, arises out of the crisis of poverty and in turn leads to an even larger HIV&AIDS crisis. Many young women, increasingly young men too, who are out of jobs, involve themselves in sex work for survival purposes. In southern Africa, truckers who travel to countries in the north, and are often away from homes for weeks and even months, are often likely participants in the sex market. At truck stops one often finds young girls who flock there to earn quick money. With the increase of migration between countries it is also becoming apparent that people from struggling countries often move to their neighbouring countries for hopeful opportunities, including sex work. This then makes commercial sex a big industry that does not help in the fight against HIV&AIDS. It is said that the price for commercial sex is determined by several factors, including use of a condom; if a condom is not worn the price is reportedly higher than when you have one on. Thus, many young women would put their lives at risk just to make a little more money.

Commercial sex work is not just a social issue; it is also a moral issue. In the consumerist world where price attached to everything, commercial sex is on the increase. Sex is just another commodity in the market and the highest bidder will get what they want. Consumerism is also about getting rich as quickly as possible; for many people commercial sex is the fastest way to get rich. Some sex workers are

professionals; they may be employed somewhere else but nevertheless want more money. They too contribute to the spread of HIV&AIDS.

ACTIVITY 6

- 1. In some countries people are calling for the introduction of brothels, in order to regulate commercial sex. Discuss your opinion of this matter.*
- 2. Describe how commercial sex is practiced in your society.*
- 3. Discuss what, in your opinion, the reasons for the increase in commercial sex in your society.*
- 4. What is your church doing or what can it do about commercial sex in your community? Explain your answer.*

RACISM

Although apartheid is officially dismantled, there is a sense in which its ghosts remain with us in sub-Saharan Africa. The structural legacies and social stratifications of past racial policies of South Africa, which in turn affected neighbouring countries, remain in place. Consequently, HIV&AIDS predominately remains a 'black' problem. It is the black masses who are mostly impoverished and who therefore are the people who have no access to antiretroviral drugs. Most of the pharmaceutical companies that are responsible for the manufacturing and sale of antiretroviral drugs are owned by white entrepreneurs in the North. So whereas we cannot talk of a deliberate policy of racism in the address of HIV&AIDS, we can define it as a racial issue as the majority of the people infected and affected by the disease are black. Even in countries in the north, where black people are the minority, black people are the majority in terms of those most affected by HIV&AIDS.

SUMMARY

We have in this unit looked at some of the major socio-political and economic factors that often lead to the increase of the spread of HIV&AIDS. We have referred to these factors with the pejorative term 'demons.' This is so, in order to remind us of the struggle of Jesus with those same forces that were anti-life in his own society. The

demons in the time of Jesus altered the quality of life of God's people. In our time too, demons leave many Africans paralysed with poverty, racial and gender oppression, and physically broken.

Self-Assessment Activity

1. Discuss the 'demons' that undermine life in your country.
2. In what way do HIV&AIDS destroy life as we have always known it?
3. In the light of the case study cited above, what are the various social and moral issues that HIV&AIDS raise for society today?
4. Tell a story, without using real names, illustrating how HIV&AIDS is affecting people's lives in your community.



FURTHER READING

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UNIT 2

LIFE AS A GIFT OF GOD

OVERVIEW

We are now at unit 2. In this unit we will be looking at life as a sacred gift of God. The unit will use the creation narratives to assert that life was created to be qualitative. It also reminds the reader that both women and men were created in the image of God; they were both blessed and given leadership roles. The unit also draws out implications for living from the creation story.

The unit proposes that the leadership that women and men ought to play in creation is that of being stewards. Such leadership is very critical in the era of HIV&AIDS as it is about preserving the integrity of creation.

OBJECTIVES

At the end of this unit the learner should be able to:

- ✂ Appreciate creation theology and its high regard for human life
- ✂ Understand that God created life as good, and that its blemishes came with human beings
- ✂ Be able to understand the implications of the creation story for Christians
- ✂ Understand Christian stewardship with regard to adolescent sexual reproductive health

TOPICS

- ✂ Life as a Gift from God
- ✂ Theology of Human Life
- ✂ Stewardship of Life

Summary, Self Assessment Activity, Further Reading

LIFE AS A GIFT OF GOD

Let us start by reading Genesis 1:26-31 below

Then God said: And now we will make human beings; they will be like us and resemble us. They will have power over the fish, the birds and all animals, domestic and wild, large and small. So God created human beings, making them to be like himself. He created them male and female, blessed them, and said, "Have many children, so that your descendants will live all over the earth and bring it under their control. I am putting you in charge of the fish, the birds, and all the wild animals. I have provided all kinds of grain and all kinds of fruit for you to eat; but for all the wild animals and for all the birds I have provided grass and leafy plants for food- and it was done. God looked at everything he had made, and he was very pleased. Evening passed and morning came- that was the sixth day.

The first creation story, from which we have cited the above texts, is punctuated by a refrain that says that God saw that God's creation was good and God was pleased. It has a very optimistic view of creation, which is that the whole of creation has passed the Bureau standard of God! It is as though it was responding to those whose view of creation is that it is corrupt and without any hope. It is worth remembering that the historical contexts within which this creation story was written was that of exile. The Jews were going through, other than the holocaust, the most traumatic event throughout their history. The exile resulted in them uprooted from their homeland, it ended the Davidic dynasty, the temple was destroyed, and their religious leaders were imprisoned, killed or deported. The exile event led to the dismantling of reality as the Jews knew it, and destroyed all their meaning systems and institutions of identity. Without these institutions, they had lost their selfhood.

ACTIVITY 1

2. Explain why HIV&AIDS is an African exile, a catastrophe of an unprecedented proportion?

Africans may not have been physically removed from their homelands, but their world, as they know it, has been taken away from them. Their meaning systems and institutions have been dismantled by the HIV&AIDS epidemic. African economies have been ravaged by the epidemic as her most able-bodied and educated children die on a daily basis. In Africa many people have always survived on the extended family system, but now this too is or has been destroyed by the epidemic. We can no longer talk of an extended family system because the uncles, aunts, cousins, mothers and fathers are dying or dead. For this reason many would no doubt have a pessimistic view of creation, seeing it as depressing, corrupt, and without any hope.

HIV&AIDS knows no social, economic or political boundaries. All types of people, irrespective of their background, are infected and affected by HIV&AIDS. Politicians, traditional leaders, religious leaders and the rich have all been affected by the epidemic. In some communities it is mostly the very elderly who remain least infected, and in turn they have to take care of the very young. So not only is the basic family structure affected, the political and social structures are also affected as African political, religious and traditional leaders die.

However, I wish to invite you to return to the scriptural text, read it again, hear how optimistic it is. In spite of the fact that the writer was surrounded by desolation, despair and death, the writer nevertheless attests that creation was essentially good. No disaster can take away the essential goodness and sanctity of creation that is intrinsically in all of the created order.

We can extrapolate from this theology that even though Africa is in a desolate state, it nevertheless remains with the divine imprint of God. It has passed the test, and nothing, not HIV&AIDS or even death, can take away the sanctity that is in African life.

ACTIVITY 2

Seeing hope: list aspects that still attest to hope in your country.

We should emphasise that the writer in the scripture wants it be known that God created His beautiful creation out of chaos. In other words chaos and desolation is a

good platform for God's creativity to take effect. The chaos that sub-Saharan Africa finds herself in is a wonderful opportunity for there to be new life, for there to be light over darkness, and for God to announce God's creative intentions.

ACTIVITY 3

What similarities and dissimilarities exist between the Jewish exile and HIV&AIDS in Africa?

THEOLOGY OF HUMAN LIFE

We continue by referring to the same scriptural text cited above. It is important to note that the scribe wants us to realise that the creation of a human being was not by accident. God took a conscious and a deliberate decision to create human life. It was not by some accidental bang or evolution that human beings came into being, it was because God so willed that there be a creature called a human being, and said, "Let us create a human being in our image..."

Perhaps what is even more important, which the scribe wants to put across, is that human beings are created in the image of God. All other creatures are just created by word, and are clearly subordinate to the human creature. But the writer wants to distinguish the creation of a person from what God had done with other creatures. By implication, human beings derive their sacredness, or the sanctity of life from the fact that they resemble God. They are created in the *imago Dei* or the image of God. Perhaps at this point it might be necessary to examine the significance of the *imago Dei*. To appreciate this we need to imagine who God is, since God is not a physical being, we only know God through God's attributes, it means when we talk about God's image we should not be too limited to a physical image. The Bible describes God in two different ways; what is called essential attributes and moral attributes. Essential attributes are those that are essentially part of the nature of God, such as when we say God is everlasting, omnipresent, omnipotent, and holy. However, when we talk about the moral attributes of God we refer to God as loving, caring, compassionate, protecting and sanctifying. It is these moral attributes that humans inherit from God by virtue of the fact that they are created in the image of God.

Humans are essentially loving, caring, compassionate, and protecting. The Psalmist extends this concept of the image of God in the following words;

When I look at the sky, which you have made,
At the moon and the stars, which you set in their places-
What is a human being (sic) that you think of them;
Mere humans (sic) that you care for them?
Yet you made them inferior only to yourself;
You crowned a human being with glory and honour.
You appointed him ruler over everything you made;
You placed him over all creation;
Sheep and cattle, and the wild animals too;
The birds and the fish and the creatures in the seas.
O Lord, our Lord, your greatness is seen in all the world!

(Psalms 8:3-9)

This Psalm of praise introduces a new theological concept, which is that human beings are created to be only inferior to God. In other words there is a hierarchy in the created order, with God at the apex and humans below God, but above other creatures and inanimate creation. This Jewish theology therefore presents a high anthropology that attests to the sanctity of human life. It is important to note that both in the Genesis text and the Psalm the reference is to humans in an inclusive fashion. There is no distinction between humans based on race, religion or gender. In fact in the first text the reference is both male and female, whereas the psalmist talks of humans. We are making this point because in many places white life is valued more than black life and male life is more valuable than female life.

ACTIVITY 4

State the difference between the creation of human beings and other creatures.

STEWARDSHIP OF LIFE

The creation narrative also mentions something quite critical, which is that humans have a responsibility to care for creation. Although it specifically instructs that humans will be in charge of ‘the birds, fish and the wild animals’ I want to argue that the stewardship responsibility is much greater than that. To begin with, I believe that human beings are to take care of and be accountable for the whole of creation. We can safely deduce that it is the responsibility of human beings to preserve the goodness of creation. That responsibility, I believe, should begin with the care of human life. This means that a human being ought to begin by caring and safeguarding the integrity and sanctity of their bodies. One cannot care and protect other life unless they begin by being stewards of their own lives. This stewardship therefore ought to preclude us from abusing our bodies through excessive drinking, drug abuse and illicit sex. Let us listen to the story of Bonang;

“Pastor, I led a high life. I used to smoke about forty cigarettes a day. We had a fridge in our office, and we would buy a case of 24 beers at a go, and we would drink the whole day as we were working. When others went for lunch, myself and the boys would hang around the office, and we would drink some more. We also had many girls. Although I was married I had many other girls, and I don’t think I always used a condom when having intercourse. Pastor, I can’t believe I was so stupid! I have lost so much because of my recklessness. I am now struggling with HIV&AIDS....”

We cite here the story of Bonang because it is an antithesis of the stewardship that we are advocating. Human beings cannot exercise their stewardship on creation unless they exercise such responsibility for their bodies. Paul writes: *“Do you not know that your body is the temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own, you were bought with a price. Therefore honour God with your body (1Corinthians 6:19-20)”*.

This is very important because our theologies often focus on the spiritual aspect of human life, and do not put prominence on matter or the body. In fact Pauline theology itself, which was influenced by Greek philosophies, often undermines matter or what is perceived to be earthly over and against the spiritual. But our bodies are the artwork of God and must therefore be safeguarded against any form of abuse. HIV&AIDS particularly reminds us of the fragility of human life, particularly when we do not live responsibly. Unfortunately the story of Bonang, cited above, is not an isolated one. Many people live for the moment and define joy by the very things that destroy their bodies, and therefore their lives.

When human beings take care of themselves, then and only then, are they able to be stewards of others. In Botswana and South Africa, and perhaps other countries too, there is a horrific practice that is on the increase whereby some men rape children with the belief that they are cleansing themselves of the HIV. The myth here is that if you sleep with a virgin, her blood will be able to cleanse you. In some instances this practice has led to the rape of babies as young as six months. This happens when humans have lost the sense that life is sacred and it must be safeguarded at all times. This begins in a small way when people find excuses for being involved in multiple sexual practices, it then moves on to coerced sexual intercourse and then to rape. HIV&AIDS can be halted when our theologies, as expounded from our pulpits, Sunday schools and Bible studies, put emphasis on the sanctity of life and the need to be stewards of our bodies and by extension the bodies of others too.

Many women, like their children, suffer from sexual abuse. Men use their physical strength to subdue women into having sex without consent. In this way humans become agents of chaos instead engaging in the missiological task of *creating* a world where all will be safe and would resemble the goodness that God saw after the completion of the first creation.

Stewardship of creation also includes the safeguarding of inanimate creation. Some of the effects of globalisation include the degradation of the environment. However, our stewardship of creation is important because by so doing we will be able to preserve the earth as God created it good. Currently, there are ongoing researches and trials all over the world on helpful remedies from the natural environment, including in

countries in Sub-Saharan Africa such as Botswana, Malawi and Uganda. These can only have effects when the healing properties that so much define the goodness of creation are not spoiled by the recklessness of humans.

ACTIVITY 5

1. *Define the term stewardship.*
2. *Discuss, with examples from your country, the myth of cleansing the blood by having sex with a virgin.*
3. *Discuss stewardship for life in light of 1 Corinthians 6: 19-20.*

Adolescent Sexual Reproductive Health (ASRH)

Stewardship in the era of HIV&AIDS also includes empowering the vulnerable groups that are mostly affected by the epidemic. Young teenagers are among those often lured into early sex by the adults. It is generally reported that in sub-Saharan Africa young people are engaged in sexual activity at around ten years of age. A theology that is life-enhancing will be that which enables African youths to be assertive, self-respectful and to engage their energies in life-enhancing activities. They would be able to read the signs of sex predators and would know how to protect themselves from risky situations. Many African youths are trusting and untutored when it comes to matters of sex. Consequently, many suffer sexual abuse from their peers and from older people.

In the past initiation schools existed in most African countries, which featured rites of passage through which youths were tutored on matters of sex, challenges in life, and what adulthood is all about. During colonialism most of these institutions were stopped, thus leaving a vacuum. However, in some places programmes have been put in place which are meant to fulfil some of the functions provided by the initiation schools. Through these programmes young people are taught to delay sexual onset until they are mature enough to know what they are doing. They are also taught how to make informed choices, such as to be able to refuse unnecessary pressure to engage in sex when they do not feel they are ready. Such programmes also equip youths with the knowledge on safe sex so that even when they are involved in sexual activity they

are protected. Think of such initiatives in your country and comment on what programmes they run for youths.

As we talk about reproductive health for young people, we ought to be certain that we have a sound theology of sex. Although the Bible makes room for sex for purposes of self control, it must take place within marriages (1 Corinthians 7:1). Mostly the Bible prescribes that sex is for procreation, so that humans become co-participants with God in creation. When the Bible talks about marriage, it uses a metaphor of a man and a woman becoming one. Sexual intimacy is one way through which a couple cement their oneness in marriage (Genesis 2:24). In both of these situations sex is performed within the context of marriage. The institution of marriage has been created as the right and safe place within which marriage should take place. Unfortunately, some use sex for entertainment purposes, and in most cases such sexual activity is often unsafe and with multiple partners. In fact, many children, some barely teenagers, engage in sex and this surely has no basis in any believe system. A clear theology of sex that is life-enhancing needs to be the basis for our parenting skills, our Sunday school syllabi, youth programmes and general teaching. Such a socialization \process, based on a theology of life, is proactive and not reactive. It is important to prepare young persons for the eventuality of sexual activity by providing them with survival skills as early as possible.

ACTIVITY 6

Describe the kind of ASRH initiatives existing in your country.

SUMMARY

In this unit we looked at several components of a theology of life. These included looking at the creation narrative and its implications for Christian living. We looked at the high anthropology represented by the ‘image of God’ theology and the theology of Psalm 8. The unit also discusses the stewardship of life. The basic assertions are that human beings have a vocation to be stewards of God’s creation, and that this includes stewardship of our bodies, plus respecting and caring for the bodies of others.

SELF-ASSESSMENT ACTIVITY

1. Discuss the following phrase: 'No disaster can take away the essential goodness and sanctity that is intrinsically in all of the created order'.
2. What does the concept of being created in 'the image of God' mean to you?
3. Discuss Paul's concept of 'the body as the temple of God'.
4. Should initiation rites be re-introduced as a way of addressing the HIV&AIDS pandemic? If your answer is in the affirmative, explain why and what form such rites should take. If your answer is negative, explain why.
5. Are there cases when sexual intercourse should be allowed outside marriage?
6. State why is it important to safeguard the integrity of creation?



FURTHER READING

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UNIT 3

AFRICAN CONCEPTS OF LIFE: THE CASE OF BOTSWANA

OVERVIEW

In this unit we will be looking at the concept of life from some African concepts, particularly from a Botswana culture. Life is under attack from HIV&AIDS and for us to protect us from this attack we need to draw on all resources available to us. Every culture has a richness which must be exploited to bring hope in the mist of despair. Setswana culture has many customs, practices, and rituals that in effect can provide a cushion for people to cope with the effects of HIV&AIDS.

This unit begins with an exploration of the sacredness of life in Setswana culture. We must begin from where we are and with what we have. It is life as we understand that is under attack, and therefore retrieving what we can, both negative and positive, can help us to see things in a better perspective.

OBJECTIVES

By the end of this module, the learner should be able to:

- ✂ Describe Setswana understanding of life
- ✂ Describe community understanding of life and the concept of *Botho*
- ✂ Discuss the understanding of death and rituals of death

TOPICS

- ✂ The Concepts of Life in Setswana Culture
- ✂ African Approaches to Disease and Suffering
- ✂ Approaches to Death
- ✂ Death Rituals

Summary, Self-Assessment Activity, Further Reading

THE CONCEPT OF LIFE IN SETSWANA CULTURE

Central to the Setswana understanding of the purpose and meaning of life is that life is God's gift to all His people. All people were equally predisposed to this gift. In other words, this gift is equally given to all the people by the creator. This is often indicated well in the naming of children. For example, many children in Setswana are given names such as *Monei or Moabi* (One who gives) or *Gofaone* (God is the one who gives). These names indicate the fact that Batswana believe that God is the source of human life. People are not born into the world because of an accident or because of some unexplained mechanical events.

In the Setswana worldview, life is not just a gift from God but in more holistic terms means that all life, irrespective of whether it is human or otherwise, is a gift from God. All life is a gift from God. For this reason life cannot be divided into the sacred and the secular, the moral and the profane, the political and the religious. Life is considered a common inheritance of humanity. The Setswana concept of life is inclusive. This concept is important because it suggests that we cannot separate HIV&AIDS as a moral issue from its ethical, political and economic implications for our lives.

The concept of life in Setswana is dependent on what is called 'the kindred system', meaning that your family are all those that you are connected to by blood and marriage. Whereas some cultures define family in terms of those who are your children, siblings and immediate cousins, uncles and aunts, in the kindred system family involves a vast set of intricate relationships..

Long before the birth of the 17th and 18th century missionary movement in this part of the world, sources show that Africans believed in life beyond death. Several cultural practices and rituals show that Africans had a view of life beyond one's physical death. A man who had been a cattle farmer would, for example, be buried in his kraal as a sign of his continuous custody of his cattle. A woman would often also be buried with household utensils, tools and seeds to indicate that through death the deceased transition into another form of existence.

In African understanding of life the concept of procreation is essential. Procreation is understood not only as the process through which humans and other members of the animal kingdom perpetuate themselves but as African life continued in the lives of the descendants of the deceased--the siblings, offspring, and kindred. This concept is often expressed in the naming of the children. For example, a new born child may be named after a respectable departed relative, such as a paternal or maternal grand parent. Consequently, the new born child will henceforth be treated by all members of that family grouping, even the clan, as though they were a reincarnation of that ancestor. This is taken to mean that a person who has moved on due to death has returned to the family in the form of this new-born child. African view of life is therefore cyclical, meaning that life is a perpetual cycle that links people through ages.

Another very important concept of life in Setswana is that which is called *botho*. This African concept is popularly known by the Nguni synonym *ubuntu*. A Setswana proverb says, *motho ke motho ka batho ba bangwe* (a person is a person through other people), meaning that a person finds his or her true humanity by being in community with others. We are incomplete, inadequate and far from finding our full self if we try to accentuate our individuality over our personhood in community. This view of life seeks to 'include' at all times rather than to 'exclude'. Within this concept, all people; old and young, able and disabled, rich and poor, are able to find acceptance and validation.

Roughly translated, Botho translates to mean 'humanness', in which people are able to find and define themselves in relation to others. Increasingly, we live in a world that is becoming more individualistic and emphasizes individual rights, individual freedom and individual security. However, the concept of *Botho* is based on a different value system. *Botho* means that a person finds his or her freedom in community, not by withdrawing to oneself; a person finds his or her rights through communal rights; and one is secure by belonging than by being in isolation. As part of this concept, in difficult times one is surrounded by a host of people who make your pain and suffering their business. Let us illustrate this:

In Botswana we have many funerals each day due to HIV&AIDS. When a person dies, his or her neighbours are in mourning even if they were not related to that person. Prayers are held at the deceased's home each morning and evening, and after

each prayer a collection is taken to assist the bereaved. There are also other contributions as well, such as bringing firewood, tents, chairs and food parcels. Through such acts of sharing an individual finds assistance and support from community, an expression of *botho*.

When a person deviates from what is the norm, it is often said that such a person, *ga a na botho* (he/she has no humanness). When somebody has no *botho* he or she is likened to a beast or a non-human. For instance, if one speaks with disrespect to an elderly person, such a person is described as having no *botho*.

The concept of *botho* in Setswana also implies that community life is shared. This cuts across all in society regardless of their social status. The bottom line of this concept is that no human being can be human alone. One human being survives on the extent to which one is connected to others at family, community, tribe and national level. Put differently, no one can be truly human in isolation from others regardless of their social status, achievement and possessions. This understanding of life as a shared process carries implications for the way people live out their lives in communities. While most of the social mechanisms that reflected this understanding have corroded with the passage of time and modernization, and increasing individualism, some are still well remembered.

ACTIVITY 1

1. Discuss the importance of 'naming' in African culture.
2. Explain how Africans express their idea of the after-life.
3. Discuss the concept of 'botho' and its importance for today.
4. Discuss the idea of life as the 'common inheritance' of humanity.

Letsema

Letsema refers to a practice in which community members work together to support each others' projects and to build community social safety nets. *Letsema* may involve a building or ploughing project in which, for example, people plough communal fields as well as their own fields. The harvest from the communal fields will normally be

used to provide for the needs of the poor, destitute, people with disabilities, the elderly, stranger and pilgrims. *Letsema* therefore represents one of the best social safety nets known in Setswana culture. It importantly communicates that we all have a responsibility to each other. People also communicate through this practice that the rich of today are tomorrow's poor, the able bodied of today are the disabled of tomorrow and the young of today are the old and needy of tomorrow. African and Tswana communities did not have 'life covers', or lofty insurance policies. Instead people invested in community welfare and in serving others legitimately expected the community to reciprocate this same assistance when they at some future time were in a situation of need.

Letsholo

Letsholo is similar very much like *letsema*. The difference is that *letsholo* is based on hunting expeditions. During the hunting season those with the means and skills not only hunt for their own consumer needs but hunt so that food, usually meat, is available for rationing among the poor and needy. *Letsholo* can also include activities other than hunting. For example, men may go out in groups to hunt or scare away dangerous wild animals like lions and wild dogs attacking domestic animals. One did not participate in expeditions simply because his own interests were threatened but much more because the interests of the wider community were at risk.

Motshelo

Motshelo refers to a practice particularly among women who organize themselves into work teams to undertake projects such as thatching a family home or preparing food for large community wide activities and festivals. Instead of employing specialists to undertake certain important functions for a fee, community members and neighbours come together to contribute their labour to help those in need to achieve certain ends such as provision of shelter or food. This practice is not exclusive to women for men also came together in small work teams to undertake certain projects on behalf of the communities. Such projects include activities such as digging graves, building community warehouses for the storage of communal harvests, care and up-keep of the village *kgotla* and, particularly, the daily lighting of its holy fire which like the sun was lit every morning to symbolise the perpetual nature of human life.

ACTIVITY 2

1. Give examples from your culture that illustrate community spirit.
2. State how the following practices are still relevant today:

**Letsema*

**Letsholo*

**Motshelo*

AFRICAN APPROACHES TO DISEASE AND SUFFERING

Within the African worldview, disease and illnesses are taken very seriously. The concept of disease in the African culture means much more than it might in other cultures. Gabriel Setiloane suggests that for an African, disease means disharmony in community. When people say that they are not well, they may mean that they are sick, or have a cold or a headache. But they may also mean that they have had a quarrel with their spouse or that their cattle have gone astray. From an African perspective, disease is not understood merely as physical ailment; it generally suggests a dis-harmony in community, when the balance of life is shaken.

This concept is important because it suggests that in our society today, those who are sick are not only those who suffer from HIV&AIDS and other diseases. As neighbors, friends, relatives and spouses are affected, it can therefore be said that they too are sick. The implication of this line of thinking is that when one is sick the whole society is sick. During the apartheid period one of the liberation slogans captured this thought well--*an injury to one is an injury to all!*

Another attitude to disease in the African concept is that there is always a cause to disease. A person does not just fall sick; there must be a cause for his or her disease. People's diseases are often attributable to disharmony in relationships, natural causes and witchcraft. Concerning witchcraft, this often means that when someone is sick a member of the extended family may be accused of having bewitched the one who is sick. This particular view has not been helpful in the fight against HIV&AIDS. In many cases when people begin to show signs of HIV&AIDS they often claim that they have been bewitched. They often explain their sickness as *sejeso* (deliberate food

poisoning), *boswagadi* (widowhood), and *kgaba* (curse). This can lead people to seeking traditional doctors and other specialists and addressing the wrong problems, even as the viral load is increasing in the body resulting in increasing weakening.

The traditional belief that a person is always sick as a result of some cause can also increase denial of facts in the era of HIV&AIDS. When people die, their relatives often say at their funerals that they died of bewitchment, some short or long unnamed illness, or some other such cause. People often do not faced up to the problem of HIV&AIDS. In fact these traditional beliefs have also given rise to stigma for instead of people developing skills to speak about the reality of HIV&AIDS early on, they have hidden behind this language of bewitchment.

ACTIVITY 3

- 1. Outline the causes of illness in your culture.*
- 2. In your opinion, why is HIV&AIDS sometimes associated with witchcraft?*

APPROACHES TO DEATH

Death is a reality in all communities. In many sub-Saharan communities, death has become a daily occurrence due to the attack on life by HIV&AIDS. In Botswana most funerals take place on Saturday, although increasingly, all other days as well. Most people are attending a funeral at least one Saturday a month if not more. A stark reality in Botswana, and other sub-Saharan African countries, is the increase in graveyards as more people die due to AIDS. Each time I have participated in a ceremony for the internment of the corpse, when the grave is being covered, I wonder through the graveyard and read the head stone on other graves. The sad fact is that most people who die are between 25 and 45 years of age. Only an odd tomb stone will indicate a person who is outside this age bracket.

Think about what happens in your culture when a person dies. Below, I would like to share with you what happens in Setswana, and what coping mechanisms exist within the culture and practices of Batswana.

In Setswana when a person dies the immediate relatives are informed, and in turn neighbours. Funerals, despite their frequency, are nevertheless still crowd pullers. People gather each morning and evening, and prayers are said at the deceased's home at these times. After each prayer meeting, tea with bread is often served, and this is quite an expensive undertaking. Depending on when the death has occurred, a person may be buried within 7 to 10 days. On the evening before the funeral the corpse is taken from the mortuary to the home to await the funeral early the next day. That evening an all night vigil is held. The minister normally starts the evening with a scripture reading and a short homily, which then becomes the basis for exhortations, prayers, and singing throughout the night. This is an open event and most people in attendance will want to say a word of comfort and encouragement to the bereaved. The funeral programme itself begins at 5am the next morning, usually including a homily, and speeches by family, friends, and colleagues. All these take place at home, and thereafter the funeral cortege proceeds to the cemetery when the burial takes place. Notably, Batswana bury their dead only when the religious ceremony, only then will all visitors begin to cover the grave. It is believed that as many people as possible must have a chance to take part in the burial. Through these processes--prayers through the week, the vigil, the funeral programme, and the actual burial--the bereaved are empowered to cope with their loss. Through these activities the community is able to stand in solidarity with the bereaved persons.

ACTIVITY 4

Describe what happens in your culture when someone dies.

What makes the process difficult is the expectation placed upon the bereaved family to feed the mourners through the week. Due to HIV&AIDS some people must have two or three funerals within a year. The financial implications of the process therefore make funerals in Botswana daunting activities for most people. This financial challenge is further accentuated by with the reality that most people, even those who cannot clearly afford it, wish to buy an expensive casket because that is the social norm.

DEATH RITUALS

As you read through this next section, think about the rituals practiced in your culture when there is a death. In Setswana, when a person dies a set of rituals are performed. For instance, a woman whose husband dies will put on a black or blue dress for a period of between six and twelve months as a sign of mourning. She is not supposed to engage in sexual activity. If she does, it is believed that she will suffer from a disease called *boswagadi* (widowhood). Men who lost their wives are expected to wear a hat as a sign of mourning. The too are expected to abstain; otherwise they would have the same fate as a widow who breaks the abstinence rule. After the prescribed time has elapsed a ritual is undertaken to officially end the mourning period and to remove the black or blue clothes, or the hat.

People whose immediate relatives die are expected to do what is called *go roula*. This typically involves the shaving of hair and either putting a black cloth on the sleeve of the arm or putting a black string around the neck. These two symbols indicate that the person is in a state of mourning, and others are able to support and show compassion.

ACTIVITY 5

Discuss two rituals performed by families after a death in the family.

Another rite, practiced when people return from the burial, is that they go straight to the home of the deceased where they file to wash their hands in a tub of water. The water is mixed with a herb called *mosimama*. It is believed that through such washing, mourners are washing death from their mist. Death is often believed to carry with it bad luck or deathliness, called *sefifi*. Through this act of washing, mourners are able to let go of the loved one who died. The community is also able to make a mental exorcism of death from within them.

These rituals are important as religious meaning systems which help people cope with death. In the era of HIV&AIDS a theology of life on its own cannot suffice. We need to develop or take advantage of meaning systems through which we can externalise that

theology. To use words alone; whether written or spoken, cannot be adequate, hence the need for music, rituals, and symbols to enable a people with HIV&AIDS to cope.

ACTIVITY 6

Describe death and dying rites in your culture.

SUMMARY

In this unit we have looked at life from an African perspective, including concepts that are core to African identity. Foremost in all of them, we looked at the concepts of *botho* or *ubuntu* which are key to the way Africans understand what it is to be human. Thereafter we looked at some of the aspects that emanate from the broader concepts of *botho*, including *letsema*, *letsholo* and *motshelo*. Obviously these are looked at from one particular culture, Setswana, without any pretence. However, the aspects of life we have looked at serve to characterize African anthropology.

The unit also discusses approaches to suffering and illness. Africans experience a lot of suffering and disease, hence the need for ways through which they can cope and survive. The unit concludes by looking at death and dying rituals.

SELF ASSESSMENT ACTIVITY

1. Some people believe that HIV&AIDS have destroyed the extended family set-up in Africa; is this true in your experience?
2. Discuss the concept of *botho*, or a similar kind of concept in your culture, and describe its importance for a theology of life.
3. How do people cope with suffering in your community?
4. In your experience, do people speak openly about causes of death at funerals?
5. You have been selected to be one of the speakers at a funeral of a 27 year old young man. Everybody knows that he died of AIDS, even though nobody is prepared to say so. Write a one page speech of how you would use this opportunity to relay the message of life against HIV&AIDS, while remaining sensitive about it.
6. Discuss, with illustrations, how rituals can be important for a theology of life.



FURTHER READING

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UNIT 4

SOCIAL UNITS AND THE QUALITY OF LIFE

OVERVIEW

We are now at the fourth unit of this module. Do not lose sight of the overall objective of this module which is to construct a theology of life in the era of HIV&AIDS. Each unit identifies issues that provide elements in the construction of such a theology. Keep this over-arching objective in focus.

This unit looks at the building blocks of what constitutes society, and how these help provide and preserve quality of life in the face of adversity. Human society is composed of elements which include the family, the community, the nation and the international community. This is of course a simplified way of looking at society, as there are other units between the ones mentioned. However, this unit focuses on the various social units which we as human beings belong to. Every person belongs somewhere. We are siblings, in a particular family, or are members of a tribe, an estate or a township, and all of us are citizens of a country. This is why the process of constructing a theology of life in the era of HIV&AIDS must include consideration of these social units.

OBJECTIVES

By the end of this unit the learner should be able to:

- ⌘ Describe the role of family and community in preservation of quality life
- ⌘ Explain the role of nations and the international bodies in promoting life
- ⌘ Discuss the contribution of national and international church bodies in promoting quality life through compassion and advocacy

TOPICS

- ⌘ The Family
- ⌘ The Community
- ⌘ The Nation
- ⌘ International Community
- ⌘ Local Church and Compassion
- ⌘ National Church, Compassion and Advocacy
- ⌘ International Church and Advocacy

Summary, Self-Assessment Activity, Further Reading

THE FAMILY

A family in a primary sense is a mother, father, children and immediate relatives. However, we know that in the era of HIV&AIDS this concept of family is insufficient. In fact it is now no longer possible to give one definition for what a family is or ought to be. Many families are headed by single parents, mostly women, either because the husband/partner is dead or because people simply are too afraid to commit to marriage due to HIV&AIDS. Many other families are child-headed due to the fact that both parents are dead. Often when a parent dies of HIV&AIDS, it is likely that the other will die soon after. Unfortunately, children are often left without adults to head the family, which results in many families being headed by teenagers. In some cases families are headed by grandparents. In a town called Kasane, in the North West of Botswana, an elderly couple who are in their eighties is taking care of eleven of their grandchildren because their parents died. This elderly couple had seven children, all of whom died due to HIV&AIDS, leaving behind their children.

ACTIVITY 1

Outline different types of families found in your culture and country.

In unit 3 we discussed the fact that the African concept of family goes beyond the nuclear family to include siblings, blood relatives and relatives by marriage. We also discussed the fact that this concept of family is being dismantled by HIV&AIDS. Traditionally, when a woman dies, you would expect one of her sisters to take her

children and raise them. However, in Botswana, because everybody is affected by HIV&AIDS, there is a growing tendency to focus on the interests of one's family and ignore the needs of others. In fact, there are stories of aunts or uncles who visit orphans to take their inheritance rather than to take care of them. HIV&AIDS is not only dismantling the African family, it is also taking away people's humaneness (*botho*); people are becoming increasingly selfish and greedy, to the point of plundering belongings of the very orphans that society expects them to take care of.

Despite the fact that HIV&AIDS has attacked the family, we have to re-assert that the family, as a social unit, is the primary defence against the epidemic. Theologically, the family is important because it is part of the creation activity of God. The creation story in Genesis attests to the fact that God saw man as incomplete. He thus created a woman to complement him (Genesis 2). Thereafter, they bore children. By so doing, they participated in God's creation activity and completed the family, as God designed.

ACTIVITY 2

Write down a story from your culture that describes the origin of the family.

God's purpose for the family is that it should provide love and care for its members. This is particularly important in the era of HIV&AIDS. In many cases, when a person finds out that they are HIV positive, they get angry at their partners for infecting them with the virus. Though it is perfectly normal to be angry at your partner for infidelity and 'carelessness', it is nevertheless important to note that if such anger turns to hate it defeats the purpose of the family. Within the family, we are to learn to intimately love, forgive, and to show compassion. If we cannot learn to forgive our spouses, children and other family members, how are we going to be able to forgive other people?

ACTIVITY 3

Describe the importance of family to your life.

The family is a place where children are to be born and raised. However, in the era of HIV&AIDS sometimes it is not possible or necessary to have children. For example, if two people who are both HIV positive choose to marry, is it really necessary for them to have children? Should they risk the possibility of having offspring infected by HIV? Think about this matter and discuss it below in the exercise section. While it is possible for people who are HIV positive to have a child who is negative and perfectly normal, is it worth the risk? I ask this question particularly in light of the fact that many children are without parents, having been orphaned by HIV&AIDS. Should our understanding of family begin to include adopting and giving a home to children who are without their parents?

The family is also a place where we learn to uphold our virtues and value systems. In the family we are to learn to be faithful to each other, to protect and safeguard each other's interests. For example, in the family a husband is to care for his wife's body and visa versa. They should know that if they are careless in contracting the HIV virus they are by so doing causing harm to their partner's body.

Our theology of life must therefore begin with the realisation that the family is the social unit on the frontline of attack by the HIV&AIDS epidemic. We must begin with an affirmation of the family as being the centre of creation theology. Our theology should also find ways of broadening definitions of what it means to be part of a family; definitions should be more inclusive than exclusive.

ACTIVITY 4

What are the challenges that the family unit faces in your society?

THE COMMUNITY

I wish to remind you of the Setswana adage mentioned in unit three above, which is *motho ke motho ka batho ba bangwe* (a person is a person through other people). This is important because, as we have said, a person on their own cannot be adequate or self-sufficient. This applies to the family as well. A family that lives in isolation from others is unlikely to survive the challenges that are today tearing family units apart.

Traditionally, when a family was without sugar or salt, they would simply go to their neighbour to ask for it. There would be no embarrassment about this because that's how families supported each other.

ACTIVITY 5

Write down a saying from your language or culture that emphasises interdependence or community.

A radical questions posed in the New Testament is, “who is my neighbour” (Luke 10:29)? I characterise this question as radical because through it Jesus is pushing his listeners to go beyond their horizons in their concept of life. His listeners, like us, would rather define a concept of community based on people who are about ‘sameness,’ or ‘like-minded’. However, Jesus, in answer to his own question tells them an incredible story. The story is about a Samaritan person who comes to the rescue of a Jew who had been attacked by thugs. In terms of the Jewish understanding of community only some people could belong whilst others were excluded on the basis of factors such as race, religion and status. The Jews and the Samaritans hated each other; even though they lived side by side they nevertheless had nothing to do with each other. Other people who were excluded included those who suffered from all sorts of ailments, including leprosy, thought to render them impure.

In Botswana we have a proverb *fifing go tshwaranwa ka dikobo* (when people walk through darkness they must hold to each other's blanket). What this proverb means is that when people go through a difficult time they are to hold onto each other, support one another, so as to go through the dark period together. When one family is destroyed due to HIV&AIDS or any other disease, others in that community must find ways of reaching out to help.

ACTIVITY 6

Describe a concept of community that you think is necessary in the era of HIV&AIDS.

THE NATION

We are beginning to make a breakthrough in the fight against HIV&AIDS throughout sub-Saharan Africa. Would you agree with this statement, or do you think this is an overstatement? I say this because I believe that national governments are doing what they can to reduce the impact of the disease from our societies. One of the many positive stories is that of Uganda where through government support the spread of the epidemic has been reduced and people are more empowered to live positively with HIV&AIDS.

The Botswana government is an example of a country in southern Africa that has resolutely given much of the state resources to fight against HIV&AIDS. President Festus Mogae and Mrs Barbra Mogae have played a significant role in the national fight against the pandemic. They, for example, undertook testing for HIV in order to encourage the nation to know their status, and have been outspoken about positive living, knowing your HIV&AIDS status, being faithful to your partner, and practising safe sex.

I mention President Mogae and the first Lady because HIV&AIDS requires that there be people who confront this horrible disease, and give hope through their actions. There are others in civic society who have made the fight against HIV&AIDS their priority too, and by so doing encouraging others.

ACTIVITY 7

- 1. Give examples of national figures from your country who fight HIV&AIDS.*
- 2. State some of their major contributions.*

A Biblical figure we may wish to think of who provides a model similar to our current icons against HIV&AIDS is Nehemiah. He took it upon himself to confront a situation of a society which had lost all its institutions, its hope and its dignity, and he rose and challenged his compatriots,

“You see the trouble we are in: Jerusalem lies in ruins, and its gates have been burnt with fire. Come let us rebuild the walls of Jerusalem, and we will no longer be in disgrace” (Nehemiah 2:17).

Our theology has to be able to identify and articulate the work that national heroes are doing. Through such heroes and heroines nations are able to come out of their despair and from the grip of the epidemic.

Our theology must also be prophetic. Many sub-Saharan governments still spend considerable money on the military and on other unnecessary expenditures while the majority of people continue to be humiliated by HIV&AIDS. For example, in Swaziland King Mswati III continues to live a lavish life with many wives, very expensive birthday parties, and the purchase of luxurious aeroplanes, while his people are among the worst affected by HIV&AIDS in the whole world. A theology of life should have capacity to name such irresponsible leadership, and call for a better use of resources. Such a theology should be able to pressure governments to provide free anti-retroviral drugs. This would mean having the courage and the capacity to engage with government structures at a high level.

ACTIVITY 8

Discuss activities and programmes that your government is engaged in the fight against the epidemic.

INTERNATIONAL COMMUNITY

As we said in Unit 1, HIV&AIDS is a global problem. It therefore is important for there to be a global approach to fighting it. Unfortunately some see it as a ‘third-world problem,’ an ‘African problem’ or a ‘black problem.’ But efforts at the international level are going on to fight the disease. Some of these efforts include aid money given to southern governments by philanthropists and Euro-American governments. Such money goes a long way in providing education and in enabling governments to provide antiretroviral treatment.

Another aspect of the fight against HIV&AIDS from the international front is the effort to develop both a vaccine and a therapeutic drug against HIV&AIDS. In Botswana a partnership exists between the government and Harvard University which is currently engaged in trials to find a vaccine for HIV&AIDS. This is a commendable process that is noteworthy and appreciated. Our theology of life must note and document these efforts as glimpses of hope. HIV&AIDS can be so debilitating and it can cause despair. This is why we need a theology which can point to some signs of hope.

ACTIVITY 9

- 1. Name some international projects in your country that are fighting the HIV&AIDS epidemic.*
- 2. State what these projects aim to achieve.*

Africans have been abused by researchers and scientists in the past. They have been used as guinea pigs for all sorts of research and trials. However, once a vaccine has been discovered they would often have no special benefit to it, even though they put their lives on the line for its development. It is therefore important that a theology of life should look into issues of access to the drugs, in the event that they are discovered, by the countries that participate in the research and trials. Is it just for a pharmaceutical company to have exclusive intellectual property rights, even though they worked with others in the process of the trials? What role would have been played by volunteers? Is the contribution of the country recognized for putting its resources and its people to participate in the trials?

The involvement of the international community in the fight against HIV&AIDS is not without problems. The revenue from donor countries for the fight against HIV&AIDS often comes with strings attached. Whereas there is no problem in regulating how money should be used, it is important to ask whether such aid money is meant to assist in the fight against the epidemic or is it about furthering the interests of donors. The issue of patenting drugs to make them the exclusive ownership of pharmaceutical companies remains a very important justice issue. Shouldn't HIV&AIDS be seen as an emergency situation in which any kind of patent on HIV

drugs is seen as unacceptable? A theology of life should be able to interrogate these issues and to be able to advocate for justice.

ACTIVITY 10

Describe what you see in the international community as signs of hope in the fight against HIV&AIDS.

LOCAL CHURCH AND COMPASSION

Constructing a theology of life is a task that must take place within the context of the church. Theology does not take place within a vacuum; it takes place within the context of a worshipping community. The local church must therefore be the primary catalyst and mover of the theology that is being developed here. This is important because otherwise theology would become the preserve of the professionals only. It is also important because it is the local church that is at the frontline of the struggle against HIV&AIDS. It is the clergy and the lay pastors who, daily and weekly, lead the funerals of people who have died of HIV&AIDS. A theology of life should provide a language through which to articulate the pain of living with and dying of HIV&AIDS. The language of lamentation given in the Bible can be utilised to express grief and the hope of those who live in the shadow of HIV&AIDS.

Funerals are an important platform for education, challenging and advocating behaviour change. Those who lead funerals can be equipped to know how to talk about HIV&AIDS with sensitivity. They can be assisted to preach sermons that are HIV&AIDS sensitive, and to have the skills in reading the text in a way that does not threaten the listeners. Some published resources are already in place, such as the works by Musa Dube (cf. *AfricaPraying: A Handbook of HIV&AIDS Sensitive Sermons and Liturgy*).

The local church is also very important in the formation of a theology of life in the era of HIV&AIDS because there are so many worshippers who are themselves either infected or affected. Some of these people are already activists in non-governmental organizations (NGOs), or involved in Home Based Care ministry, or are volunteers

for the vaccine initiative trials. There are many human resources in the church, people who can speak from experience and expertise in the construction of a theology of life.

ACTIVITY 11

Describe some projects carried out by your church to show compassion.

The local church is also important because it provides a context for the testing of theology. Through Bible studies, sermons, and discussions, a theology of life can come alive and in this way become common for everyone.

Theology of life should be about compassion and de-stigmatisation for those persons who are affected by HIV&AIDS. Unfortunately the church has been known to be judgemental of people who are known to be HIV positive. Many sermons and utterances from the church have not been very helpful in the fight against the pandemic. The church therefore needs to repent and ensure that it is not reinforcing stigma against infected and affected people.

ACTIVITY 12

Write a prayer for your Church; such a prayer should be thankful, sorrowful and hopeful.

NATIONAL CHURCH, COMPASSION AND ADVOCACY

We have so far been talking about the Church in its local setting. However, the church in its ecumenical sense is a national institution. When we talk about constructing a theology of life, it has to be broad and inclusive exercise. It should transcend denominational boundaries, gender differences and the divide between rural and urban. A national effort at developing a language, discourse and practice related to a theology of life will go a long way in providing a cohesive voice of the church in the struggle against the pandemic.

The advantage of a collective effort in the struggle against HIV&AIDS is that the church is able to use its influence when it comes to speaking on national issues such as morality, funding, policies and advocacy.

ACTIVITY 13

Discuss how your national church is or can be involved in advocacy in the era of HIV&AIDS.

INTERNATIONAL CHURCH AND ADVOCACY

Can you think of an institution that has as strong a networks as the Church? If you go anywhere in the world you will find a church, even in places where Christianity may not be allowed. It is therefore important to take advantage of these networks and use them to promote life, to fight against the demons of death, and to raise hope in the midst of HIV&AIDS, and its related social problems.

Various international church bodies exist currently, such as the World Council of Churches, Council for World Mission, All Africa Conference of Churches and the Lutheran World Federation. All these institutions are already involved in initiatives to fight the HIV&AIDS pandemic. Local efforts should therefore be linked; we should be seeking to join common efforts, and receive their solidarity in our own struggle.

ACTIVITY 14

Write to your pastor and suggest HIV&AIDS projects that can be carried out by different churches together.

The need for a global approach in our theology is particularly important when it comes to issues of advocacy. As we said above, multi-national pharmaceutical corporations need to be engaged to provide drugs through just means. This task is not an easy one that can be addressed by national churches on their own. At any rate, it is also important to note that the fight is not against HIV&AIDS in isolation, it is also

about addressing poverty, racism, gender disparity and global injustice. These require a global front of institutions and organizations that are able to speak..

SUMMARY

In this Unit we emphasised that all people are born and located in social units..We explored the role of various social units in the preservation and promotion of quality life. We examined the role of the family, the community, nation, international community. We also focused on the contribution of local and international bodies and how they can contribute to qualitative life through promoting compassion and advocacy.

SELF-ASSESSMENT ACTIVITY

1. Discuss the notion of family in the era of HIV&AIDS.
2. Let us assume that you are married, and you find out that your partner is HIV positive. How would you respond?
3. Do you think it is okay for two people who are HIV positive and married to have children?
4. Identify someone in your community who you regard as a leader when it comes to the fight against HIV&AIDS. Why do you think this particular person is an icon?



FURTHER READING

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Messer, Donald. 2004. *Breaking the Conspiracy of Silence: Christian Churches and the Global AIDS Crisis*. Minneapolis: Fortress Press.

Isaak, Paul. 2005. "The Compassionate God—John 11," pp. 135-137. *God Breaks the Silence: In Preaching in Times of AIDS*. Wuppertal: UEM.

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Hendje Toya, J.S. 2005. "Touching the Untouchable," pp. 119-121 and "Being Touched in Time of AIDS—Luke 8:43-48 & 18: 15-17," pp. 122-124. In UEM. *God Breaks the Silence: Preaching in Times of AIDS*. Wuppertal: UEM.

UNIT 5

HIV&AIDS STIGMA AND THE QUALITY OF LIFE

OVERVIEW

One of the major issues affecting PLWHAs is stigma. Stigma happens when people choose to discriminate against you because you are suspected of having HIV or AIDS; or indeed are infected or affected by HIV&AIDS. This problem is widespread in Botswana, and as a result many people choose to hide their status, in order to avoid being discriminated against. Although there are many initiatives to encourage people to test and know their HIV&AIDS status, these initiatives are undermined by the fact that people fear the associated stigma. Those who do test positive, often just keep it as their secret.

Many people suffer from stigma because their own families see them as an embarrassment. They are perceived to have brought shame on the family by being HIV positive. This is often more tormenting than the actual problem of HIV&AIDS. The other form of stigma is the attitude of the church. Some people in the church, particularly preachers, preach retribution. In other words, preachers suggest that people who have HIV&AIDS are in that situation through their own doing. Besides insensitivity in preaching and teaching in the church, some people just choose not to associate with people who are known to be HIV positive. This attitude and its actions are called HIV&AIDS stigma and discrimination of PLWHA and their families.

OBJECTIVES

At the end of this unit, it is expected that the learner will be able to:

- ⌘ Have a clear understanding of stigma
- ⌘ See how stigma undermines quality of life and efforts to curb the epidemic
- ⌘ Discuss stigma from an African perspective
- ⌘ Explain the link between stigma and gender
- ⌘ Analyse examples of how stigma is expressed and addressed in the Bible.

TOPICS

- ⌘ Stigma: A Case Study
- ⌘ HIV&AIDS Stigma and Quality of Life
- ⌘ Stigma in Setswana Traditions
- ⌘ Stigma and Gender
- ⌘ Stigma in the Old Testament
- ⌘ Stigma in the New Testament
 - Mark 1:40-45
 - John 9:1-6

Summary, Self-Assessment Activity, Further Reading

STIGMA: A CASE STUDY

Imagine the kind of trauma that people who suffer from stigma must live under. Do you know people who live like this? Let us read the story below to get a rough picture:

Boitshepo was a very bright young woman. She grew up in an underprivileged home, and was the first child in her family to finish secondary school education. Her mother was very proud of her and encouraged her to study even harder and make something out of herself. She went on to get a Bachelor's degree at the University of Botswana and taught at a secondary school. That is when she fell in love with David. They soon had a baby and decided to move in together; they were planning to get married.

However, David began to change in character. He started drinking and coming home late. He became abusive and quit his job. When Boitshepo tried to reason with him, he would become enraged and at times hit her. It became very unpleasant and one time he left home and never came back.

Soon after David left, Boitshepo became unwell. She had a cold that did not go away. The cough became worse by the day. She started noticing that some of her friends were not visiting her as they used to. She wondered if they blamed her for the break-up with David. Her cough did not improve, but she thought she was just under stress. Then one day she went to teach her class as usual, and she noticed that all the children had moved back their chairs and there was a big space between her desk and

her students. She was surprised but didn't bother too much about it. The following day half the class had absconded, and she found it written on the board, 'we want another teacher'.

Boitshepo was confused and devastated. She wondered what she had done and that day her cough became worse. She went to the clinic where she was advised to take an HIV&AIDS test. She tested positive and then everything began to fall into place. She had always been faithful, and therefore HIV&AIDS was the furthest thing from her mind. She had not even realised that she had lost so much weight. She grieved for herself, her so-called friends, and her so-called students. She grieved for her country.

ACTIVITY 1

The church is often accused of reinforcing stigma. Do you agree with this and why?

HIV&AIDS STIGMA AND QUALITY OF LIFE

When HIV was first discovered in Southern Africa in the mid-eighties, it was known that the person who had the virus would soon die. In other words, someone who tested HIV positive was like a person who has been sentenced to death—it was just a matter of time. However, we have now moved on from those days when HIV&AIDS was so deadly. Although HIV&AIDS is still incurable, in the present we have a better understanding of the disease and we know that with the right attitude, good nutrition and behavioural change people are now able to live longer. In many countries, people are able to access antiretroviral drugs, either being provided freely by the National Health Service of the particular country or through private means. So HIV&AIDS is not as dreadful anymore because of these circumstances. As such, the quality of life for PLWHA has improved tremendously. In fact, in some countries such as Uganda, even the high mortality rate has decreased.

However, what is still a major problem in Botswana, and in many African countries, is that people still believe that HIV&AIDS is visited upon those people who are sexually indiscreet. HIV&AIDS is associated with people whose moral conduct is wanting. In other words, it is believed that such people deserve the situation that they

find themselves in. The result of this is that many people who would otherwise live a positive and healthy life, find themselves fending off condemnations from society. The impact of that is often traumatic, and it leads to loneliness, low self-esteem and depression. These psycho-social problems can have a devastating effect on the life of the individual. It means that for such a person to survive he or she must hide their status. It is now the case that many people would rather die than let people know their status.

ACTIVITY 2

Write down some perspectives associated with HIV&AIDS in your country.

Read the case study above and put yourself in the shoes of Boitshepo. Imagine yourself being mocked and rejected by the very people that you trust and that matter the most to you. What is most tragic is that Boitshepo's situation is not unique. Think of Boitshepo's boyfriend, her friends and colleagues, and her students. Potentially, she had all the necessary support system a person could need. Such discrimination is rampant and many people die prematurely because the social systems that ought to be supportive are themselves another epidemic of hate.

Stigma alters people's quality of life in many ways. One of the things that health workers have come to realise, is that when a person is depressed, his or response to the antiretroviral drugs is poor. Depression leads to the deterioration of the immune system, which may lead to the body reacting negatively to treatment. This is why in some cases a person whose blood count is at the level of 20 when beginning treatment, may recover enough to have a normal blood count after treatment. On the other hand, there may be another person whose blood count is at 100 when they start treatment. Yet, such a person's health may not improve at all. Instead, the person's health may continue to decline and often requires a treatment called lumbar puncture. Unless the person improves may become mentally deranged, may loose sight and sometimes even loose mobility.

Stigma is therefore a social bomb which society uses against its own people. It is a cruel way through which society condemns people and make them feel less than what

God intended them to be (Genesis 1: 26). In fact, stigma can be more brutal than the very fact of being infected with HIV&AIDS.

ACTIVITY 3

What are the ways through which stigma can affect the health of people who are HIV positive?

STIGMA IN SETSWANA TRADITIONS

Stigma is not exclusive to the situation of HIV&AIDS. In fact it is widespread in all societies, and causes people to shun and discriminate others for perceived moral and religious impropriety (Musopule 2004:125). In Setswana, as in other cultures, people who had different diseases were often discriminated against. Although in most cases stigma was practised against people who were different or had disabilities. For example, children who born with blindness were often left in the cattle posts and the lands under the care of their peers or older children. When other children were sent to school, such children were hidden away. The same treatment was applied to children and people with physical disabilities. In fact, to some extent these practices still persist to this day. A few years ago a school for children with blindness and partial sight in the north of Botswana had to appeal to the Member of Parliament in the area to address this situation. Parents would secretly take their children from the school and send them to the cattle posts without the consent of the teachers. Such children were left under hazardous circumstances and would often suffer from domestic.

Stigma against people with disabilities is most pronounced in the language used in their regard. For instance, the word for people with disabilities is *digole* and for those who are blind it is *difofu*. The word for those who are dumb is *dimumu*. In Setswana, when you talk about people, you use the prefix *mo-* for the singular and *ba-* for the plural. For example you would say *mokweetsi* (driver) and *bakgweetsi* (drivers) or *mosadi* (woman) and *basadi* (women). It is therefore very odd that for people with disabilities, the prefix that is used in every case is *di-* which is often used for animals and non-human creatures. You would say *ditshwene* (baboons), *dikgong* (wood) or

dikatse (cats). Such language is very unusual in reference to human beings and it is therefore de-humanising.

ACTIVITY 4

Describe how your culture treats people with disabilities.

Another example of stigma that used to be widespread in the past was towards children who were born with albinism. Legend has it that such children were simply left in the bush by their parents. Such children would obviously perish due to thirst and hunger or even wild animals.

Other forms of stigmatisation often included people who had mental illnesses. People from the so-called minority tribes are also often objects of stigma from the bigger tribes. For example in Setswana, we have a saying that says: *mosadi ga a tswe borwa e se phefo* (wind may come from the south, but not a wife). Through this saying, men were encouraged to marry from among their own tribes, but not from tribes in the south. In the event that a woman was to be married from a southern tribe, her mistakes would be accentuated unnecessarily because of this belief. She would have to try harder to be accepted like everybody else.

It appears in the examples given above, that stigma was induced by people's belief that a family with a child with disability, blindness or albinos were somehow being punished for some deed they had committed. The ancestors were not pleased with them, hence the birth of a child with a deformity. Stigma is therefore often a result of religious beliefs or myths in particular cultures. At the surface it may appear to be just a form of social discrimination against some people, but in fact it is fuelled by a particular religious mindset. Even HIV&AIDS stigma will not be fully understood if its religious undertones are not explored and understood.

STIGMA AND GENDER

Women tend to be subject various forms of stigma in most cultures. For instance traditionally it is young women who are often shunned and despised if they are pregnant out of wedlock. The question is rarely, if ever, posed about the male

responsible for the pregnancy. Such a young woman is seen to be a disgrace to her family and her ethnic group. Women are also stigmatised when they go through their monthly periods. During that time they are considered to be unclean and are therefore prohibited from doing certain things. For instance, they are not allowed to go into the kraal because it is believed that they would have a detrimental effect on the fertility of the cows. Fulata Moyo has this description to make about this issue:

Menstruation, which begins at puberty and ends with menopause, is a woman's monthly discharge of blood and tissue that has built up during the previous month in the womb. This tissue lines the womb in preparation for the growth of a baby in case of conception, but is discharged when conception has not taken place. This discharge gives opportunity for the development of a new lining and possibility of pregnancy in the coming month. This is a very powerful experience that only women go through, yet Malawian traditions socially exclude women going through such an experience from routine, until she is considered 'normal' again afterwards. The same exclusion happens with post-child birth discharges. She is basically excluded at two levels of her community life: daily routine and worship (2004:130).

In Setswana cultures, women are also stigmatised through associating them with sexually transmitted infections (STI), traditionally referred to as '*malwetsi a basadi*' (women's diseases). Obviously this stereotype did not help in the HIV&AIDS era since the latter is also an STI. Women came to be blamed for bringing HIV&AIDS home, for infecting their husbands, and for bewitching them with AIDS. Such accusations have been used to expel and dispossess widows at the death of their husbands. Since most of the national HIV&AIDS surveillance centres are also dependent on testing pregnant women as they attend their routine check up in health clinics, it goes without saying that one who is likely to get tested first and to bring the news of HIV&AIDS home, is indeed a woman.

So stigma is something that women live with all their life. It is believed that when they go through menstruation they are somehow impure. It means the very people who feed us, clothe us, and to whom we make love, are suddenly incapacitated simply because they have a natural occurrence called menstruation. Such a belief system

casts doubts on the dignity of women, and often leads to self-doubt and a low self-esteem in the majority of women.

ACTIVITY 5

What are some of the reasons that lead to stigma?

Outline ways in which your society stigmatises women.

Explain how cultural stigma against women has reinforced HIV&AIDS stigma against women.

STIGMA IN THE OLD TESTAMENT

The Old Testament is full of examples of the kind of occurrences of stigma that we have been talking about so far. Again we will realise that such stigmatisation was often directed towards women and people with disabilities.

In the Priestly traditions, particularly as represented by the book of Leviticus, there is a lot that could be said about stigma. There are many rules for people who suffered from skin diseases, which in the end rendered such people outcasts in society (13:1-14:57). Such people were regarded as unclean and therefore needing sacrificial cleansing. During the time of Jesus, there were many such people to whom he ministered and befriended. Such people were not allowed to enter the temple, as it was believed that they would contaminate the sanctuary (Acts 3:2).

Another group of people who were often stigmatised for health related conditions were those who had genital discharges. These included men with pathological discharges, especially with gonorrhoea (Leviticus 15:2-15), and abnormal emissions of semen (Leviticus 15: 16-18). In the case of women, those who were going through menstruation were considered to be unclean. The same applied to those who had discharges as a result of sexually transmitted diseases (15:25-30).

A woman who had just given birth to a boy would be regarded as unclean for forty days, women were considered unclean for eighty days after giving birth to a daughter (12:1-8). During that time she was excluded from the sanctuary, and at the end of the

period she would have to offer an offering for the remission of her sins. She was not to have any conjugal rights during the first week (15:19-24). The whole period of exclusion from routine life also meant that the woman could not touch any hallowed thing (7:19-21). The physical state of the woman, like the condition of a leper, caused a barrier between her and God. The gulf between God and the sinner could only be removed by a renewal of the covenant between her and God. The renewal was affected mainly by sprinkling the person with blood.

ACTIVITY 6

*What are some of the religious beliefs in your contexts that stigmatise people?
Discuss how some of the above biblical perspectives are applied in your
church or churches in your country.*

STIGMA IN THE NEW TESTAMENT

As we said above, lepers and people with other skin diseases suffered much at the hands of religious purists in Israel. There were many people who suffered from such stigma in the time of Jesus, and it is clear from the various accounts of the evangelists that they shared in Jesus' ministry.

Mark 1:40-45

It is significant that the evangelist Mark introduces Jesus as one who confronts stigmatisation of people and looks beyond their physical ailment. A leper is someone who would not normally be able to come so close to a religious person, but somehow this man is able to approach Rabbi Jesus. He must have been chased from the temple and synagogues before he found acceptance in Jesus. It appears that this is the intention of the evangelist in presenting this narrative right at the beginning of his gospel. It is to present Jesus as one who crosses frontiers to reach to people, irrespective of their social circumstances. The image of Jesus here is one who is so bold that he is willing to transgress the holy laws of Moses in order to reach out to the marginalised. It is significant that the narrative says Jesus stretched his hand and 'touched the man'. This would have been unbelievable to the onlookers; it was unthinkable for a holy man like Jesus to touch someone who was so unclean.

The text says Jesus was ‘filled with compassion’ and because of that he acted the way he did. Compassion is a prerequisite for seeing the other person as you see yourself and then reaching out to them. People who are struggling with HIV&AIDS do not need charity or pity—they need compassion. They need people who will treat them as God’s children and who will struggle alongside them.

ACTIVITY 7

Explain how this story of Mark 1:40-45 can assist the church to condemn a theology that stigmatises PLWHA.

After the act of healing, Jesus send the man away to perform the required ritual and to present himself before the priests. Jesus is aware that his act was subversive and is bound to get him in trouble with the religious authorities. It is for this reason that he instructs the leper not to tell anyone that he was healed by Jesus (v.44). Because stigma is so internalised and institutionalised, it is never easy to fight against it. It requires bold prophetic action on the part of Christians to challenge, cajole and resist those who marginalise others simply because they have HIV&AIDS.

John 9:1-6

This is another example of Jesus’ attitude to the problem of stigma. In Jewish society, as it was in African society, it was believed that when a person with some sort of disability is born into a particular family, it means that the family has sinned. In other words, either the ancestors or God have been displeased and therefore need to be appeased, usually through sacrifice.

The disciples assume that the man is blind as a result of a sin committed by the man’s parents. Because of the stigma associated with this blindness, the man has probably had to endure maltreatment from community members.

Jesus’ theology is different in that for him neither the man nor his parents had sinned. This must have puzzled the religiously conservative, whilst it must have been most

liberating to those who had to live with stigma of one kind or the other. It is easy for mainstream theology to use retribution (the belief that people are punished for their sins), to try and deal with suffering. But a theology of life must begin by advocating for those who are experiencing stigmatisation. This is what Jesus is teaching in this text. Instead of spending too much time in a theological debate he spits on the sand and administers healing. The theology of life is therefore not primarily wonderful words but pastoral and loving action. It is caring for those who have AIDS without being too preoccupied with the manner in which they were infected.

ACTIVITY 8

'The theology of life is not primarily wonderful words but pastoral and loving action'

Discuss further the following passages with your Bible study group at church. Mark 1:40-45 John 9:1-6

SUMMARY

This unit discussed the issue of stigma in relation to the quality of life. The basic assumption is that stigma, which is prevalent in many African cultures, diminishes the quality of life of the stigmatised person. The unit further illustrates that stigma is based on our cultures, our religious beliefs and our scriptures. Although our focus has been on Setswana culture, we can say without a doubt that all human cultures have embedded within them, stigma of all sorts. The learner would have also realised that certain people in our communities are more likely to suffer from stigma than most others. We have demonstrated that these are women and people with disabilities.

SELF ASSESSMENT ACTIVITY

1. Discuss the parable about Boitshepo, what issues does it raise about stigma?
2. What forms of stigma are you aware that are taking place in your community?
3. Write a case study showing how stigma can increase the spread of HIV&AIDS



FURTHER READING

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1ST ASSIGNMENT: UNIT 1-5

Before you proceed, please take the assignment below. Write all your answers in your notebook. If you cannot answer some of the questions, please feel free to return to the relevant units and re-read.

Time: 1 hour

Instructions: Attempt all Questions

1. In two paragraphs, describe the social contexts that fuel HIV&AIDS by discussing the role of poverty, gender inequality and racism.
2. Using Genesis 1:26-31, discuss why life was created good and how we can become actively involved in maintaining its goodness.
3. Human beings were made in God's image. Discuss this concept and show how it can assist us to promote qualitative life and promote the human rights of all.
4. Using the concepts of *Botho*, Letsema, Letsholo, Motshelo, discuss the Setswana understanding of life in community.
5. Describe the understanding of death in your culture and some of the rituals of coping with death.
6. In two paragraphs, describe the role of social units such as family, community, nation and churches in promoting quality life.
7. Describe the role of churches in promoting compassion and advocacy in process of preserving and promoting quality life.
8. Define the word stigma; describe HIV&AIDS stigma and how it affects quality of life of PLWHA and their families.
9. Discuss how HIV&AIDS stigma is linked to culture and gender.
10. Using two biblical passages of your choice, discuss how the church can fight HIV&AIDS stigma by promoting compassion in society.

UNIT 6

HIV&AIDS PREVENTION AND A THEOLOGY OF LIFE

OVERVIEW

We are now at unit 6 in our exploration of the theology of life. Theology is a powerful tool at the disposal of the church with which to critique, refresh, and imagine alternative realities. In this unit we will look at the need for prevention in the fight against HIV&AIDS. We could attempt many methods to combat the epidemic, but the strongest method we have is prevention.

As we go through this unit, I invite you to think about your own home situation and ways through which you could encourage the message of prevention. It is important to begin with what is already happening, so that whatever we propose is not in isolation. This unit will pay some attention to the role men can play in prevention. Men play a very important role in the family, the church, and society in general. But in my experience the role of men in the fight against HIV&AIDS has not been visible. Where it has been visible, it has been a role that has been negative rather than life enhancing. It would be good therefore if you could share stories from your situation of how men are involved, or how they can be involved, in the fight against HIV&AIDS.

OBJECTIVES

At the end of this unit it is expected that the learner must be able to:

- ✂ Understand and define what HIV&AIDS prevention is
- ✂ See the need for knowledge as a strategy to fight HIV&AIDS
- ✂ Promote teaching of adolescent sexual reproductive health in schools and churches
- ✂ Know prevention strategies in your countries
- ✂ Understand the role men can play in the prevention of HIV&AIDS
- ✂ Look at prevention from the perspective of the Bible and the church

TOPICS

- ⌘ What are HIV&AIDS Prevention Methods?
 - Empowerment Through Knowledge
 - Adolescent Sexual Reproduction Health
- ⌘ ABC Strategy
 - Abstinence
 - Be Faithful
 - Condomise
- ⌘ The Role of Men in Prevention
- ⌘ Prevention in the Bible
- ⌘ The Church, HIV&AIDS and Prevention
 - Adorations
 - Confession
 - Thanksgiving
 - Supplication

Summary, Self-Assessment Activity, Further Reading

WHAT IS HIV&AIDS PREVENTION?

What everybody ought to be able to understand at the moment is that HIV&AIDS is incurable. Once you are HIV positive you will have to live with the virus to the end of one's life, unless a therapeutic drug is found soon. Therefore the most sensible way to fight HIV&AIDS is by giving people the life skills to know how to avoid infection. There are several ways of doing this, such as: empowerment through knowledge, adolescent sexual education, the ABC strategy, and the prevention methods which include the bible and the church. We will examine these options below individually.

Empowerment through knowledge

It is important for people to be knowledgeable about what HIV&AIDS is. Many people still do not have adequate knowledge about HIV&AIDS. It is important for our theology to equip people with information; such as the fact that HIV&AIDS is incurable, and therefore utmost everything must be done to avoid infection. It is also important for people to know ways through which the HIV virus is spread. We cannot afford to take anything for granted, people ought to know that HIV&AIDS is

primarily spread through unprotected sex. It is not something that infects only certain people. All can be infected with the virus irrespective of their social and religious status. Some people think that HIV&AIDS cannot affect them because they are faithful to their partners. But as you will remember from the case study in unit 5, Botshelo had been faithful to her partner yet she ended up being HIV positive. HIV&AIDS therefore do not just affect those whose morality is compromised, but all are at risk from infection.

Other means through which HIV&AIDS is spread is through blood transfusion, or exchange of fluids. Many people have to nurse their loved ones who have AIDS. According to cultural etiquette it is not easy to wear gloves when taking care of a loved one. However, people should be empowered to know that the most loving thing to do is to protect themselves by wearing gloves so that the threat of HIV&AIDS is curbed within families. Theology of life should therefore be about providing life skills for people to know how to navigate their way in the era of HIV&AIDS.

ACTIVITY 1

Describe how your church is seeking to empower people against HIV&AIDS infection through knowledge.

Adolescent sexual reproductive health (asrh)

For prevention to take root it is important to begin at the early stages of human development. In traditional Tswana society when young people reached puberty they would be taken for initiation. Elders in the community would take candidates to designated places in the bush where the training would be conducted. The initiation schools taught the young people basics on sex education, as well as acceptable sexual behaviour. For example, young men would be taught how to relate to females and how to respect them. The females would be taught about their responsibilities as homemakers and would also be empowered to be assertive. So at an early age young people were exposed to sexual education, which empowered them to make informed decisions concerning sex when the need arose.

Prevention therefore needs to be taught to young people at quite an early age. Sex is a subject that is 'taught' to young people through the media. Every new pop song is about sex, as is every new Hollywood film. Young people are bombarded with 'sex education' which is incorrect and which must be countered with proper information and guidance.

Such adolescent sexual reproductive health education can be taught at schools, Sunday school, scouts and confirmation classes. It is therefore necessary to develop a school curriculum that enables teachers to have the skills to impart sex education to the young minds. The objective of such education should be to give the youths information about their bodies, sex, the opposite sex, and enable them to make informed decisions about sexual matters. Another objective should be to delay age of sexual onset to at least early adulthood if possible. The theology of life should empower young people to love themselves and love their bodies and have sufficient knowledge of sex and sexuality so that they can be able to know right from wrong.

ACTIVITY 2

- 1. Discuss your understanding of HIV&AIDS prevention.*
- 2. Describe how your culture and people have received the HIV&AIDS prevention messages.*
- 3. State how the response of the church has been the same or different from popular population.*

THE ABC STRATEGY

The ABC strategy has been adopted in Botswana and many other countries as a way through which people can prevent infection. The letters represent: **Abstinence**, **Be faithful** and **Condomise**.

Abstinence

Abstinence is what has been taught and promoted mainly by the church and other religious organisations. Unfortunately there has not been sufficient theology to bolster this very important strategic teaching. For Christian theology, family life is an important structure within the broader human community. Our creation theology

attests to the fact that God created a family where men and women live together in love and harmony. Through such an environment, children must be reared and brought up to be responsible citizens. The nativity family provides a model for all human families of love, nurture and support. Although we must admit that the evangelists do not give us much opportunity to see how Joseph, the father of Jesus, participated in raising his son.

Unfortunately, many people choose to have sex outside marriage, and in the end many children are born outside the safety net of a conventional family. Abstinence is therefore an attempt at going back to the basic understanding of family. The understanding here is to encourage young people to not engage in sexual activity before they are married. It is to remind people that marriage is a hallowed institution and that every young person must abstain from all sexual activity until they are married. This does not mean that young people may not engage in love relationships. But it does mean that they can set some boundaries for themselves and maintain them. They may choose to talk, kiss or touch each other, but it is very important for them to communicate with each other about keeping sex for after marriage.

It is not enough though to teach youths, particularly girls, just about abstinence. It is important to give them the skills to be able to actualise the teaching. For instance, gender skills should be mainstreamed into school curricular at an early age. It is important for youths to be able to learn at an early age to respect each other, especially for boys to respect girls. It is also necessary for girls to be equipped with assertiveness skills and to be able to resist unnecessary pressure to have unwanted sex.

ACTIVITY 3

Most churches hold abstinence to be the best prevention method for youth.

State some situations that hinder the idealness of abstinence.

We have to be careful that our concept of family is not exclusive of those who are single parents. Although we are talking about the ideal concept here, we should know that family is a dynamic institution. Many single parents head families and they nevertheless provide secure and loving environment for their members.

Be Faithful

One of the things that exacerbate the spread of HIV infection is the tendency by some people to have multiple sexual relationships. Theology of life should seek to strengthen the institution of marriage. One way of doing this is by equipping pastors with the necessary skills for preparing couples that intend to marry. Marriage preparation is a necessary process through which the institution of marriage can be nurtured and strengthened. However, it is also important for there to be means to provide opportunities for the nurturing of marriages. This could be through marriage seminars, family conferences and couples' fellowships.

ACTIVITY 4

Explain why faithfulness does not always work for all married people in HIV&AIDS prevention.

It is also important to recognise that some people have long lasting sexual relationships without necessarily being married. It would do no good to pretend that these kinds of relationships do not exist. What is important is to accept these as a fact, and perhaps see them as potential marriages and encourage them in that direction. Only when we have accepted such relationships can we be able to teach faithfulness within such relationships.

Condomise

There has been a raging debate about the use of condoms in the fight against HIV&AIDS. Conservative theologians have been categorically against the use of condoms as they believe that they will encourage promiscuity. However, we should remember that our theology places life over moral principles. The question is not whether a condom is morally preferable over the other strategies, but rather what is the most loving thing to do in a particular situation? What is ethically life enhancing: for the church to denounce condom use, or to give condoms to people who are known to be sexually active so as to save them? The church has to recognise that many people do not necessarily subscribe to Christian morality and therefore will not necessarily listen when we say they should abstain. But does it mean that because

people are outside the ambit of Christian faith our theology should have no regard for such people? Our theology is about enhancing life for all God's people, irrespective of whether or not they are members of the church. It therefore means that any strategy that can save people from the threat of HIV&AIDS must be used, even if they may be morally unacceptable to others. The strength of the ABC strategy is that some people will be attracted to the emphasis on abstinence, whilst others may choose not to abstain, but at least they can decide to be faithful to their partners, even if they may not be married. Others who may not abstain nor even be faithful to their partners could still escape the threat of death by using a condom. The emphasis therefore is on the fact that our theology is about saving life rather than imposing a particular moral ethic on people.

ACTIVITY 5

- 1. What are the advantages and disadvantages of the ABC strategy?*
- 2. Some churches insist that condoms promote promiscuity. Explain why you either agree or disagree with this perspective.*

The Role of Men in Prevention

The role that men can play in the prevention of HIV&AIDS is a very crucial one. The example of Jairus is a relevant one for men today. He was so full of love for his daughter that he did everything possible to seek healing for her (Matthew 9:23-26). This is an unusual story because in Africa, it is women who generally take care of the health of their families whilst men play no significant role in caring for their families' health. There are many educational programmes on the impact of HIV&AIDS in society, and it is the women who attend these. This is why I find Jairus fascinating, because he does not send his wife or his older daughter to seek healing for his younger daughter; he goes out himself and asks Jesus to heal her. This is an invitation to men to take their rightful place and be men by caring, loving and protecting their families and societies.

Men need to become acquainted with all the facts about HIV&AIDS, particularly about prevention. While men continue to be ignorant about the epidemic, it will make it difficult for them to play a meaningful role in the efforts at preventing its spread.

The formation of men's organisations are a welcome development towards empowering and organising men and their contribution may soon be a formidable one.

Men have a strategic role in society. Culturally, men have decision-making powers in their families. Traditionally, it is the men who decides what should happen with regard to lovemaking. If a man was to decide that he and his partner should use a condom, it is most likely that this would be acceptable. If men were to play an active role in promoting abstinence, being faithful and *condomising*, it would not be difficult for the message to be accepted.

The role of men in mentoring their boy-children will also be critical in raising young men who would be knowledgeable about the epidemic. It is important that men create opportunities to sit down with boys and teach them about HIV&AIDS and how it can be prevented. Through such opportunities, fathers, uncles, men in churches and other community formations help youths begin to be streetwise when it comes to the epidemic.

ACTIVITY 6

Do men play an active role in prevention efforts in your country? Explain.

PREVENTION IN THE BIBLE

The story of Joseph and Potiphar's wife (Genesis 39) is a good illustration of how young people can prevent illicit sexual activity and hence the spread of HIV&AIDS. Joseph was young, strong, handsome and attractive to the opposite sex. He could easily have used these characteristics to exploit Potiphar's wife's infatuation with him. But he obviously had a good moral grounding and he knew what is wrong from what is right. He refers to how good Potiphar was to him and that he cannot repay him in this way. He knew that there are certain boundaries that cannot be crossed; if you cross them it becomes detrimental to society.

Prevention demands discipline. Potiphar's wife did not entice Joseph to bed just once, but many times. She did everything in her power; used her beauty, her power as the wife of his boss and her sexual appeal. None of these worked for Joseph. He stood by

his principles and would not budge to the temptation to sleep with his employer's wife. Prevention therefore is about people sticking to their principles and not allowing any kind of temptation to persuade you to change your opinion.

Many young people or disadvantaged people can be lured through material things such as money, property and employment. However, a disciplined person will have the courage to desist from succumbing to such things.

The other important thing about Joseph is that it appears that he was somebody who had a vision for his life. He knew what he wanted in life and therefore had a direction of where he was going. He was an alien in Egypt and wanted to make the best out of the fortunes he had found in his new home. He therefore would not let anything to deter him from accomplishing his dream or vision. It is therefore important that people have a purpose or a vision that guides them in their lives. That would mean that they would not just be blown this way and that way by just any wind. As the scripture goes, where there is no vision the people shall perish. Let us now look at the role that the church can play in engendering prevention in people's consciousness.

ACTIVITY 7

What other text in the Bible would you use to demonstrate the importance of prevention?

THE CHURCH AND HIV&AIDS PREVENTION

The Church has a very important role to play in the prevention of HIV&AIDS. As we have already said in unit 5 above, the church is established in most communities and this therefore, makes it a very useful instrument in the fight against HIV&AIDS. Some of the ways through which the church could play a significant role is through its different ministries such as the Sunday school, youth, women and men's movements.

Another way is that through worship the church can bring the question of prevention and HIV&AIDS to consciousness of the worshippers. Through worship, the problems of the world are brought before the face of God. The worshippers have an opportunity to bring their fears, concerns, doubts and emotions to God through acts of service.

There are several points in the Christian worship service that worship leaders could use to bring about the message of prevention. It could be through the sermon, scripture sentences, song, drama and prayers. I wish to suggest here several ways through which prayer can be used to highlight the message of prevention. A typical worship service in most denominations would have four types of prayers which are; **A**doration, **C**onfession, **T**hanksgiving and **S**upplications (ACTS).

Adorations

Adorations is an opportunity for the worshipping community to express how they feel before God. Belief in God is very important for Africans, particularly in the era of adversity. Therefore, through these prayers the believers are able to express their devotion, trust and love for God. This is important because God loved the world and demonstrated that love through the incarnation (John 3:16). The least humans can do is to reciprocate through prayers of adoration.

Confession

Two things can happen through our prayers of confession. Firstly, the worship leader can communicate to the worshippers the need to actively seek prevention of infection, by praying for God to forgive them. Sometimes it is more effective to communicate through prayer than by way of direct talk. Secondly, through the prayer of confession the worship leader can perform an act of absolution on the worshippers. In other words, it is an opportunity to release those who have been living reckless lives from the bondage of guilt, and to give them a new start in life.

Thanksgiving

Through these prayers that the community of faith comes before the throne of God with thanksgiving for what God has done for them. At this point in the service, the worship leader could focus on the fact that although many of our countries are ravaged by HIV&AIDS, the majority of people are still HIV negative. In other words, they have been able to avoid infection. It is important to recognise that even in a country in which 35 per cent of its population is HIV positive, the majority (65 per cent) remain negative and that is something to be thankful to God for.

Supplication

Here the praying community have an opportunity to bring their concerns before the throne of God. These prayers of intercession could include praying for people with multiple partners, both survivors and perpetrators of rape, and others who do not practice safe sex. It is also an opportunity to pray for the church to play a meaningful role in encouraging responsible living.

ACTIVITY 8

Write a prayer on prevention using the ACTS model.

SUMMARY

As we conclude this unit, do remember what we have been focusing on so far. We started off by explaining the meaning of prevention, and then moved on to describe some of the prevention methods that are in existence, with particular attention to the ABC strategy. We then looked at the role men play in the prevention of the spread of HIV&AIDS. The role of men is critical, and it must be enhanced if the epidemic is to stop. Thereafter, we looked at the story of Potiphar's wife and Joseph, to illustrate prevention in the Bible. The unit also looked at the role of the church in harnessing prevention, particularly looking at prevention in the context of worship.

SELF ASSESSMENT ACTIVITY

1. Describe what prevention initiatives are currently being undertaken by your church.
2. How can men be empowered to play their role in HIV&AIDS prevention?
3. How would you go about teaching your congregation about prevention?



FURTHER READING

Dube, M. W. 2004. "Grant Me Justice: Towards Gender-Sensitive Multi-sectoral HIV/AIDS Readings of the Bible," pp. 3-24. In Dube, M. W. eds. *Grant Me Justice! HIV/AIDS and Gender Readings of the Bible*. New York: Orbis.

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UNIT 7

CARE GIVING AND THE THEOLOGY OF LIFE

OVERVIEW

This unit focuses on care giving in the different aspects of life. We have to keep reminding ourselves that HIV&AIDS is an incurable disease. However, despite this reality we still have several options we can choose to assert life over HIV&AIDS. In the previous unit we explored the issue of prevention as one strategy through which we can declare life over death. So although HIV&AIDS is as yet incurable, it nevertheless is not intractable. One of the practical strategies of life available to us in the era of HIV&AIDS is to use our humanness or *botho* to care for those infected and affected.

We will begin with extrapolating from the Bible a basis for a theology of care-giving. Our first concern will be what has the Bible to say about the ministry of caring? Are there some Biblical guidelines for those involved in care giving?

The unit also relates to some of the things we have covered in the previous lessons. For instance we look at the Setswana cultural framework and how it can provide a basis for those who are involved in caring for others. In other words, we ask if there is anything in our cultural and social make-up that can enhance the ministry of HIV&AIDS.

OBJECTIVES

At the end of this unit the learner ought to:

- ⌘ Be familiar with some Biblical texts on care giving
- ⌘ Understand how Batswana (Africans) care for each other
- ⌘ Be able to relate to how PLWHA live and care for each other
- ⌘ Be able to understand the ministry of the church concerning care giving
- ⌘ Have knowledge of some organisations that are involved in care giving

TOPICS

- ✠ Care giving in the Old Testament
- ✠ Care giving in the New Testament
- ✠ Care giving in Setswana Culture
- ✠ Caring for PLWHA
- ✠ The Church and Care giving
- ✠ Organisational Care giving
 - Holy Cross Hospice

Summary, Self-Assessment, Further Reading

CARE GIVING IN THE OLD TESTAMENT

In the story of the two brothers Cain and Abel, there are some important hints concerning how humans should relate and care for each other (Genesis 4:1-16). Two very important questions are raised in this narrative. The first question is asked immediately after Cain murdered his brother Abel, when God asked him: “Where is Abel your brother?” The context within which this question is asked is that of a feud between siblings. However, the question raises issues that go beyond sibling rivalry. It is as though God is saying that humans are responsible for each other. Cain ought to have cared for and protected his brother Abel, but instead he brought harm to him. This question has rung through the years to all human generations. The question pricks the souls of all humanity and pushes us to reach out to each other in the hour of need.

The second question comes from Cain: “Am I brother’s keeper?” This question obviously comes from the guilty conscious of a murderer. Cain is someone who is so obsessed with the self that he does not even care about another person. However, in a strange way, deep inside himself, he knows that his brother’s welfare and protection ought to be his concern, hence the question. But instead of ‘keeping’ or caring for his brother, he has soiled his hands with his blood.

In the era of HIV&AIDS, our theology of life requires people to be each other’s keeper. HIV&AIDS is not a problem just for individuals and their families. As we said in unit 1, it is a global problem that requires individuals, churches, community

based organisations governments and global movements to play their part in its eradication. However, when it comes to caring, it is an individual who must have the heart, the mindset and the theology that commits them to such loving action. Yet institutions should also build structures that are founded on justice to and with all its members. Institutions should enable and empower all their members to care and to be cared for. Where structural injustice exists, individual efforts can be hindered.

ACTIVITY 1

1. *Read Genesis 4:1-16 and discuss the two questions raised above in the light of HIV&AIDS:*
2. *What other Old Testament text would you tease out to develop a theology of caring?*

CARE GIVING IN THE NEW TESTAMENT

The gospel of Mark records the narrative of a group of friends who carried a paralytic man to Jesus (2:1-5). The man was bed-ridden and was therefore unable to take himself to Jesus on his own. He needed someone else to carry him to Jesus the healer. This man's disability meant that he was dependent on others, i.e. he was bathed, clothed, and fed by his family and friends.

The man in the Markan narrative would have died had he not had the love of his four friends. Many people with HIV&AIDS suffer alone without the company of friends and family. Theology of life therefore begins with an invitation from God to be concerned for each other: '*where is your brother or sister?*' It also requires us to come to self-consciousness about God's requirement on us to be our brothers or sisters' keepers. Thirdly, our theology of life requires us to care for others and live in communal solidarity.

The four friends took the paralytic man to Jesus in order to seek healing for him. It is probable that they had taken him to many other healers to try and see if they could get help for him. It was likely that the friends spent money and time caring for their

friend. What is clear is a deep sense of solidarity and commitment on the part of these four men towards their friend. Caring clearly requires self-giving on the part of the caregiver.

A further point to make is that care giving is not an easy exercise. The four friends had to cut through a lot of hurdles before they could actually get to Jesus the healer. They had to travel to Capernaum to find Jesus. Once there they found that there were crowds all over, and so they had to plough their way to get to the hut where Jesus was inside exercising his ministry. A further hurdle was to get inside the hut and bring the man before Jesus. In order to overcome that hurdle, they had to remove the roof and bring down the stretcher upon which the sick man was lying.

Jesus was impressed with the faith and the determination of these men. He was moved by their sense of solidarity and love for their friend, and he is moved to say to the sick man, 'son your sins are forgiven' (2:5b).

ACTIVITY 2

- 1. Re-write Mark 2:1-5 in your own words and put it in today's context*
- 2. What theology of care can we derive from Mark 2:1-5?*

CARE GIVING IN SETSWANA CULTURE

Remember that Setswana culture has a strong concept of the extended family. The inter-connection between people of the same kindred is important for the survival of the community. During critical moments in the life of Batswana such as weddings and funerals, members of the same kin come together in solidarity.

In the event of illness, it normally the immediate family members who take care of the patient. They bathe and feed the patient. The family members would also dig herbs for the patient and take the patient to the doctor. If the patient does not improve, other family members, such as the aunt, grandmother or cousins would come in and take turns in the nursing duties. They may relocate from their own homes and stay with the family of the sick person until they improves—or until the person dies.

Care giving in Setswana is a community activity. In the event that the person dies, there is a change. The care giving will shift from focusing on the one who is diseased to focusing on his or her family, who is now grieving. Members of the extended family, friends and the community come and stay with the bereaved family until they would have laid to rest their loved ones. Care giving is, therefore, not just concerned with sick people, but it is also expressed towards widows, orphans and other bereaved people.

ACTIVITY 3

1. *Discuss ways through which care giving is provided in your culture.*
2. *Are these methods of any use in the fight against HIV&AIDS?*

Caring for PLWHA

One of the ways through which HIV&AIDS is spread is through inappropriate caring methods. In many African cultures it is considered inappropriate to wear gloves when caring for someone close to you. As a result many people, especially older people, who are caring for children, end up being infected because they do so unprotected. Infection of care givers is tragic and puts families in endless shadow of HIV&AIDS suffering—it must be avoided. When people are suffering from AIDS and it is at an advanced stage, they often have sores on various parts of their body i.e. the penis, vagina, anus, mouth. These need to be washed and often mothers and aunts are reluctant to wear gloves in doing so. Wearing gloves is interpreted as showing a lack of respect and love for the patient. Unfortunately though, it often leads to the nurse contracting the virus.

Due to the overwhelming effect of HIV&AIDS in Botswana, hospitals do not have the capacity to contain all the PLWHA. Many people are brought into hospitals when they are very sick and weak for palliative care. Because of this, many are sent home to be taken home to be care for by relatives. This is why home-based care is a very important aspect in the fight against HIV&AIDS.

In taking care of a patient a number of things are required; it is important to know the needs of the patient. Those who are involved in-home base care must know how to

handle their patients, and must know when and how to wash them and how to turn them over. The caregiver must also learn to exercise patience and understanding because people who are sick can be full of emotions such as anger, regret, shame and fatalism. They may therefore be erratic and have mood swings, which is something that a caregiver must be well aware of.

The caregiver ought to also have knowledge about the nutritional needs of the patient. HIV&AIDS is better controlled with eating the right foods, and having them at good intervals. Many of the foods in the supermarkets are not good for our bodies as they are processed. It is therefore important to go for natural foods such as beans, sorghum, vegetables and fresh fruits. One way through which people are able to access these is through keeping small cottage gardens.

Home-based care also requires a lot of resources that the caregivers need in caring for their patients. For example, when a person has been bed-ridden for a long time he or she will most likely get bedsores. It is therefore necessary for the caregiver to have in their possession lotions such as aqueous cream. As we said earlier, it is also a prerequisite for the caregiver have access to nursing gloves. This is necessary when the caregiver is bathing the patient or has to treat the sores. Other things that a caregiver need include, antiseptics, cotton wool, mouth caps and bandages. In most cases these are provided free of charge by hospitals and clinics.

ACTIVITY 4

- 1. Why do people find it difficult to wear gloves when they are caring for their loved ones?*
- 2. What basic knowledge does a caregiver need to have in order to be effectively involved in home-based care?*
- 3. Describe how home-based care is done in your community?*

THE CHURCH AND CARE GIVING

Many churches are involved in care giving in one way or the other. When we talk about care giving it is worthwhile to remember that we are not talking just about those

who are sick. We are using the concept in the broadest sense. Care giving could mean many things: caring for the sick; those who are depressed and in need of counselling; those who are caring for those who are vulnerable, such as children.

The church is involved in the caring ministry through counselling. Many ministers and pastors find that their time is spent counselling people who have recently found out that either they themselves are HIV positive, or that their spouse is HIV+. Ministers/pastors have to assist them to accept their status and learn to live with it. Others who need counselling are often those who are fatigued from caring or nursing members of their families who are living with AIDS.

Another way through which care giving is exercised is through children's ministries. For example, in Botswana the Anglican Church mothers union in Mahalapye and the Congregational Church in Kanye, both run day care centres for orphaned children in their respective communities. Through these projects, children are brought to the two centres where they are taught how to read and write and how to care for themselves. The children are also given healthy meals. Some of these children are HIV positive and therefore they need a special care.

The church is also involved in care giving by encouraging their members to volunteer to be part of the home-based groups in the communities. In fact, you would find that the majority of home-base care volunteers would be women from the mothers' union groups. In this way the church is involved in care giving as a way of fighting HIV&AIDS.

ACTIVITY 5

- 1. How is the church involved in care giving in your community?*
- 2. Does volunteerism still work in your community?*
- 3. What children's ministries are exercised by your church?*

ORGANISATIONAL CARE GIVING

There are organisations in place in different countries, which are established to provide care and support for PLWHA. In Botswana there is Botswana Network of

people living with HIV&AIDS (BONEPWA) and the Holy Cross Hospice. What is important about these organisations is that they are mainly run by people who are themselves HIV positive. They are therefore able to use their own experiences of living with the virus to help others. It is different when the caregiver is merely talking from a theoretical point of view.

Holy Cross Hospice

The Anglican Church in Botswana started this organisation some eight years ago. It is situated in an inner-city place in the South of Gaborone. Through the Holy Cross Hospice, the church is able to provide care to people who are known to be terminally ill.

The Hospice is open to all people who need their help, irrespective of what church or creed they belong to. The institution provides facilities for people to come for day care. In the evening they go back to their respective homes. During the day, the patients start off the day with prayers and reflections. Thereafter, they are allowed an opportunity to share their experiences with peers and staff. Through these life-enhancing conversations they are able to restore their self-belief and hope for themselves. The patients are provided with healthy meals, which enable them to regain strength and boost their immune system.

The Hospice also has qualified staff who visits the patients that are not able to come for their routine at the centre. Through these visits they are able to motivate and encourage them to plan to live rather than just wait to die. Those whose health has deteriorated are then taken to the hospitals for immediate help. The social workers that visit are also able to identify the needs of their patients and then recommend appropriate action. This may include the need to supply them with food.

There are often institutions that are willing to assist PLWHA with food. For example Woolworth's chain shops donate food to PLWHA. Caregivers are able to make requests on behalf of their patients and therefore make food available to them. Government social services also provide food parcels for PLWHA. When PLWHA are unable to access government food parcels themselves, organisations like the Holy Cross Hospice are able to assist them to have access to the food.

ACTIVITY 6

1. *What organisations do you know of in your community that are involved in care giving?*
2. *Identify one organisation that is involved in care giving and describe its work?*

SUMMARY

This unit has focused on the theology of life, particularly with regard to care giving. We looked at some basic pointers in the Bible that must inform our theology of care giving. You will remember that we used the story of the two brothers, Cain and Abel. We especially asked the two questions: “Where is your brother Abel?” and “Am I my brother’s keeper?” Thereafter, we looked at the Markan text of the four men who took their sick friend to Jesus in Capernaum.

The unit also looked at how care giving is practiced in Setswana traditions. Thereafter, we tried to describe how care giving, especially home-based care, is presently being exercised in Botswana. We have described some of the difficulties, opportunities and necessities in care giving. The unit ends with a look at how the Holy Cross Hospice is involved in care giving.

SELF ASSESSMENT ACTIVITY

1. Why is care giving important in the fight against HIV&AIDS?
2. How can the concept of *botho* assist us in developing a theology of care giving?
3. What is the advantage of PLWHA being involved in care giving?
4. Describe the role of the church in care giving



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UNIT 8

THE LIVES OF WOMEN IN THE HIV&AIDS EPIDEMIC

OVERVIEW

Developing a theology of life is about fighting the demons of death described above in unit 1. In our previous discussions we established that women and the poor are the two groups most susceptible to HIV&AIDS. For this reason, this unit concentrates on the lives of women in the HIV&AIDS epidemic.

We begin by describing the situation of women in the era of HIV&AIDS. As you go through this unit, recall the situation of women in your own community. It is important that you collect information and statistics about the affect of HIV&AIDS on women, as compared to men. Your own stories of women who have been infected or affected by HIV&AIDS will also contribute to the learning process.

For theology to be life-giving it must arise out of and engage with experiences of the people in a particular context. It is also important to note that a theology of life cannot be neutral in any particular situation. Neutrality, perhaps unintentionally, sides with the dominant and powerful. A theology of life, therefore, cannot afford neutrality; it has to deliberately take sides with the oppressed, in this case women.

OBJECTIVES

By the end of this unit you will be able to:

- ✘ Describe the vulnerability of women to HIV&AIDS
- ✘ Discuss the factors that make women vulnerable to HIV&AIDS
- ✘ Develop a theology of abundant life based on John 10:10
- ✘ Take a advocacy or prophetic stance with women's issues

TOPICS

- ⌘ Women and HIV&AIDS in Botswana
- ⌘ Factors Leading to the Prevalence of HIV&AIDS among Women
 - Biological Factors
 - Socio-cultural Factors
 - Economic Factors
- ⌘ 'I have come that they may have life'

Summary, Self-assessment Activity, Further Reading

WOMEN AND HIV&AIDS IN BOTSWANA

Botswana is one of the countries in southern Africa most affected by the HIV&AIDS epidemic. According to the recent sentinel surveillance reports, HIV&AIDS prevalence among pregnant women averages around 38% nationally. However, in some regions it reaches 50%, such as Ghanzi and Selibe Phikwe. The infection rate is often at its highest among women who are between the ages of 20 and 29 and among men in the age groups, 30-39. In all cases, women are more prone to infection than men.

In 1999, it was estimated that there were 145,000 women living with HIV&AIDS, compared to 125,000 men. Similarly, it has been proven that girls are more susceptible to HIV infection than boys. For every boy who is HIV positive, there are two girls. Among youths aged 15-24, the gender ratio of infection is also 1:2.

AGGREGATED AGE SPECIFIC HIV PREVALENCE AMONG
PREGNANT WOMEN 1999

(all sites in Botswana)

Age Group	Sample Size	No. HIV +	HIV Prevalence
15-19	479	103	21.5
20-24	847	328	38.7
25-29	559	240	43.3
30-34	364	153	42.0
35-39	213	71	33.3
40-44	106	27	35.5
45-49	11	4	36.4
Total	2574	926	

Adapted from AIDS/STD unit, 1999

As we can see from the above table, women have a high risk of HIV infection. There are many reasons for this, some of which are biological, socio-cultural, and economic. In the following sections, we will briefly look at some of the factors that exacerbate the prevalence of the virus among women.

ACTIVITY 1

1. *Collect and describe information on how women are affected by HIV&AIDS in your community or country.*
2. *Analyse the table above and explain the picture that these statistics indicates.*

FACTORS LEADING TO THE PREVALENCE OF HIV&AIDS AMONG WOMEN

As we stated above, there are several factors that put women at more risk of infection than their male counterparts. We will discuss only three of these at this point, even though there are a lot more.

Biological Factors

Women, biologically, are more vulnerable to sexual infections than men. Most are infected through unprotected vaginal intercourse. Naturally, it is normally the vagina that is the receiver of male fluids. The larger mucosal surface area in the vagina greatly exposes women to viral infections since it provides a large surface area for absorbing the virus. This obviously places the woman more at risk than the man. In addition, men who are HIV positive have a greater viral load in the semen than in the there is in vaginal secretions. When the latter is deposited in the vagina during unprotected sex, infection rates for women becomes much higher.

Women are more prone to be infected by HIV&AIDS when they have ulcerative sexual transmitted infections (STIs), such as chancroid, syphilis, and herpes. Even non-ulcerative infections, such as gonorrhoea, Chlamydia, and trichomoniasis, place women at a greater risk of HIV infection.

It is often easier for men to be diagnosed and treated for STIs, then women. For women most STIs are a symptomatic. They may be unaware that they need to seek health care. This impedes early detection, thus putting them at further risk. In areas in which women generally do not enjoy good health, there is often a higher death rate.

ACTIVITY 2

1. *Biologically, what makes women more vulnerable to HIV&AIDS infection?*
2. *How would you teach women about their health, with regard to HIV&AIDS?*

Socio-Cultural Factors

There are many socio-cultural factors that expose women exposed to HIV&AIDS infection. There are many cultural practises, taboos, and myths held in different cultures that support the sidelining of women in society. For example, when people get married in most African cultures, newlyweds go through a process of premarital advice. Married women meet separately with the bride, providing her with advice. The groom usually undergoes a similar process. Unfortunately, during this process women are told things such as, a *'man is never asked where he comes from'* and *'a man is like a calabash, he is too be shared'*. This say means a husband's unfaithfulness is culturally tolerated and it is not a reason for divorce. Such 'instructions' put women in a state of servitude during marriage. Women, therefore, are never able to develop to the point that they can relate as equals to their spouses and make their own choices. On the other hand, men are made to think that it is acceptable to be unfaithful and to lord over their partners and wives.

This situation, as mentioned in unit 1, takes away women's ability to choose. They are rendered defenceless. In the context of the HIV&AIDS epidemic, which necessitates that people are able to have control of their bodies, this is extremely troubling. Cultural and social expectations deny women the opportunity to choose when and who to have sex and to negotiate the terms.

ACTIVITY 3

What are some of the cultural and social practices in your culture that could lead to an increased spread of HIV&AIDS? Suggest how this situation can be reversed.

Economic Factors

As mentioned in unit 1, women are often constitute a majority of the most impoverished in all regions of the world. Girls are often kept home to look after younger children when the boy-child is sent to school. In many African cultures, there are those who allow their girl-children to marry earlier. Some are married when they are barely teenagers. The result of this is that the girl/woman will remain completely economically dependent on her husband for the rest of her life, as she was not afford the opportunity to develop her skills.

In most cultures when a woman is widowed her inheritance is often taken by her male relatives, such as her father, brother or even uncle. This often results in a woman being needlessly impoverished. The result is that they often become dependent on relatives or, alternatively, they enter into another marriage in order to find some economic security. This situation was common in Biblical times as well, as is indicated by the recurring prophetic imploration to care for the widows, the poor and the children (Isaiah 1:17).

ACTIVITY 4

- 1. How is the economic situation of women in your country?*
- 2. How can the economic empowerment of women be a weapon against HIV&AIDS?*

“I HAVE COME THAT THEY MAY HAVE LIFE”

This module began with a reflection on creation theology. It is worth remembering the joy, gladness and hope that God had for creation. The author of Genesis repeatedly declares that creation is good and that God was pleased with God’s handiwork. We also looked at the very special place that a human being has in creation.

However, we have the privilege of canonical hindsight to note that almost immediately after God pronounced the perfection of creation, things went wrong. The goodness of creation was marred by sin and human folly. Human beings were not satisfied with their creatureliness. They wanted “to be like God, knowing good and

evil” (Genesis3:5). This led to a distortion of creation from what God had intended it to be. Brothers began to have enmity against each other. Humans were no longer able to reside within the home of God (Eden); they had to be banished. A gulf developed between humans and the inanimate which a human had been tasked to look over. Men and women began to point fingers at each, blaming each other. Power became gendered; the man began using physic, culture and theology to dominate the woman. Worse still, human beings were no longer comfortable in the presence of God. When God visited, human beings hid themselves in shame.

The good news is that the narrative does not stop with this distortion of creation. Human rebellion brought grief and a heartache to God. However, it is in the nature of God not to give up on those that God loves. Bringing creation into being, God put a self-limitation upon Godself, risking the pain God was now experiencing. God was not about to give up on creation. God did not want chaos to reclaim its dominance, as had been the case before the divine declaration “Let there be light...” The fall, therefore, was the beginning of what is sometimes referred to as salvation history.

Again, with hindsight, we know the intermediate story. Beginning with the story of Noah, Abraham and the ancestors, Moses and the Exodus story, the Prophets, and the story of the returnees from exile, the narrative leads us to its climax. Through these events God continued to love, protect and be faithful to creation. However, humans continued to be obstinate and to take delight in instant gratification, like worshipping other gods, oppressing women, children, the poor and people of other races. Through these vices they tried to assert their power over others and ‘to be like God’.

The climax of the redemption narrative is the event of incarnation (Philippians 2:1-11). God took the form of a servant, in the person of Jesus Christ. He was born to a young woman named Mary, thus validating womanhood as a hallowed part of God’s creation. Through Jesus’ life God demonstrated how men and women are to live with each other. Jesus related to women from other religions and cultures (Mark 7: 24-30), women who were from broken families (John 4:1-41), middle-class women (Luke 10:38-41), and through his interaction with them he affirmed their womanhood. The evangelist John, who is credited by many New Testament scholars of having a bold

Christology, presents Jesus saying: “The thief comes only in order to steal, kill and destroy. I have come that you might have life- life in its fullness” (John 10:10).

This Christology is very important for our purpose as we develop a theology of life in the era of HIV&AIDS. Jesus’ declaration is subversive. He knows that to declare life is in effect a declaration of war against the agents of death. It is to declare war against poverty, against gender discrimination, against injustice and against all the other demons of death. His observation that thieves come to steal, kill and destroy is critical for those of us who live in the era of HIV&AIDS. It is important to identify those who come with the sole purpose of stealing, drafting fanciful project proposals claiming to fight HIV&AIDS when in fact they are only about making money. It is important to identify those who ‘kill and destroy’ by engaging in reckless sexual lifestyles, those who make policies that deny the poor access to food and medicine and those who kill the souls of the infected by condemning them further. These agents are anti-life. Our project of life requires a critical engagement with them.

SUMMARY

As we conclude this unit let us remind ourselves what we have discovered so far. Our main point of discussion revolved around the situation of women in the era of HIV&AIDS. Due to the breath of this subject, we could not do it adequate justice in this limited space. However, we did establish that women are more vulnerable to HIV&Aids than their male counterparts. Some of the reasons for this related to biological, socio-cultural and economic factors. We have highlighted some statistics to illustrate how this epidemic more significantly affects women.

The unit draws on John’s Christology as captured by the text in John 10:10. This is a bold Christology, which call to account all anti-life forces in our communities. This Christology offers us a theology that is subversive and life enhancing.

SELF ASSESSMENT ACTIVITY

1. Generally, how are women generally affected by HIV&AIDS?
2. Identify one text in the New Testament in regards to women and discuss Jesus' attitude towards women.
3. How do you interpret Jesus' words when he says, "I have come that they may have life in its fullness"?
4. Describe your contribution to bringing abundant life in your community.



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UNIT 9

CHILDREN, HIV&AIDS & THEOLOGY OF LIFE

OVERVIEW

Children feature prominently in this module. Children are an important part of the HIV&AIDS problem. They are infected through mother to child transmission and often suffer the effects orphan-hood at an early age. They often fall prey to predators, such as rapists and inheritance-stealers. They can be the target of rich, infected adult men who use their cash, cars and cell phones to tempt young girls into relationships, intentionally seeking to infect them.

Children are also important to a theology of life in the era of HIV&AIDS because they were important in Christ's ministry. He used children to illustrate the kingdom of God, instructing adults to use them as a model. In this unit, we will explore Christ's theology of children which should inform our development of a theology of life.

This unit invites you to look at several aspects of life relating to children. You are invited to think of children in your own community; what experiences have they had in regards to HIV&AIDS? Culturally, what is their position in life? How can children play a part in the fight against HIV&AIDS?

OBJECTIVES

At the end of this unit the learner should be able to:

- ✂ Understand the place of children in African cultures
- ✂ Use folklores from their culture in the fight against HIV&AIDS
- ✂ See how children are important in the ministry of Jesus
- ✂ Understand the place of children in the Bible, especially in the life and witness of Jesus Christ

TOPICS

- ⌘ Children in African Culture
- ⌘ Children in the Era of HIV&AIDS
- ⌘ Children in the Old Testament: Negative and Positive
- ⌘ Children in the New Testament
- ⌘ Jesus and Children (Mark 9:33 and 10:13-16)

Summary, Self-Assessment Activity, Further Reading

CHILDREN IN AFRICAN CULTURES

In many African cultures children are taught at an early stage to learn to respect older people. We noted in previous units that every African child is taught *botho* or *ubuntu* at an early age. They would be taught that every person, especially a person older than themselves, must be respected. *Botho* also helps an individual respect themselves and gives them a set of taboos that guide them on how to conduct themselves and how to relate to other people. Every evening children would sit with their parents and grandparents to talk. During these fireplace conversations, they were told folktales that were meant to build them and guide them in their growing.

One of these stories is about a hare and a fox. The story is as follows:

Once upon a time, lived a Hyena with its beautiful wife in a far away village. Hyena loved his wife dearly and they lived happily together. Then hare started visiting them, and began to take interest in Hyena's wife.

One day hare visited the Hyena family and found Hyena's wife alone. He greeted her and then proceeded to propose love to her. But she declined his proposal, citing fear of her husband. Hare was disappointed and angry when he left, but he went straight to Hyena who was doing some errands.

When he got to Hyena he threw himself on the ground, as if he fainted. He pretended to be unwell and asked hyena to carry him home. Since Hyena was a kind person he carried him home.

On the way Hare asked the Hyena if he could cut a tree branch so that he could use it to blow off flies. This Hyena did and the hare continued with his pretence game. As they approached Hyena's home the Hare, in view of everyone, started hitting Hyena with the branch, which by now he had made into a nice stick. He then jumped off and ran away from Hyena. Hyena's wife was shocked to see this, and was sad to see that she was married to a stupid man. She then decided to leave him.

That evening Hare visited Hyena's former wife and boasted about what had happened. "I told you that Hyena is a useless man, I am the real man." The woman was convinced by this and she agreed to marry hare. And here ends the story.

There are many stories like this in African folklore, which can be used to communicate some essential messages to children about love, fidelity, friendship and betrayal. Our parents used these narratives to construct a fireplace theology that empowered children to be well equipped to deal with the challenges of life.

On the other hand, many African cultures are not open on sexual matters. They would often teach children rules such as *a girl should not wash at night*. Another related Tswana saying is that *a girl should not come home after sunset*. These taboos are not usually discussed, as children are not allowed to ask questions. Though the taboos are not meant to help in shaping children, children would not know this.

Another aspect of African cultures that should be addressed in our analysis of children and HIV&AIDS is the issue of language. Many of the African languages are full of metaphors for discussing sexual matters. Often these are deliberately meant to make it difficult for children to know what the parents are talking about. For example, in some cultures, instead talking about sex they used the phrase *letsa molodi* (to whistle) or *go ya mokwena* (to go on a journey). Besides this, it would often be said that newborn babies are taken from the river or some other such myth.

This way the children would not understand what is being talked about. However, the question that needs to be asked is, does this way of communicating actually keep vital information from children?

Another important aspect of this discussion is that boy-children and girl-children are raised differently, with different expectations. Boys would often grow up at the cattle posts with fewer taboos than girls.

ACTIVITY 1

- 1. What are some of the taboos that are taught to children in your culture?*
- 2. Discuss the story of hare and hyena. What are the messages in it which can help in the fight against HIV&AIDS?*
- 3. How are sexual matters talked about in your language?*
- 4. How is language important to the fight against HIV&AIDS?*

CHILDREN IN THE ERA OF HIV&AIDS

Birth is a cause for rejoicing and celebrating. However, the HIV&AIDS context in many sub-Saharan African countries today makes giving birth one of the most risky things a person can do. There is a very thin line between birth and death. Many children today are born with HIV which, in some societies, will mean the death of the new born baby.

It is important at this point to explore the experiences of children in the era of HIV&AIDS, which we have mentioned thus far. These include sexual abuse of children, particularly infants, who are used by sexual predators to 'cleanse' themselves of HIV&AIDS. Another common experience is that of orphaned children who are raised in the care of relatives or friends. Such children often suffer physical, mental and sexual abuse. There are many cases of orphaned children being robbed of their inheritance by greedy relatives.

Growing up in the era of HIV&AIDS is a difficult experience. Despite the difficult experiences that children have, there are often great stories of resistance against the forces of death. Many children are knowledgeable about HIV &AIDS. They know what it is, how it spreads, and how it can be avoided. This, in itself, is a sign of life. Many children are involved in activities against the epidemic. For example, there are many who are involved in peer counselling programmes.

ACTIVITY 1

- 1. Write a prayer or poem expressing your pain about the situation of children in the era of HIV&AIDS. You could assume the position of a child who is either an orphan or is HIV positive in your prayer/poem.*
- 2. Discuss some of the experiences of children in the era of HIV&AIDS in your society.*
- 3. Design a programme to help youths in your community in the fight against HIV& AIDS.*

CHILDREN IN THE OLD TESTAMENT

We mentioned above how African children are raised and socialised. Jewish children were also taught certain things that were embedded in their consciousness throughout their life journeys. The Jews had experienced brutal oppression at the hands of the Egyptians. However, God had heard their cries and had sent his prophet Moses to help them confront their oppressor. The story of the Exodus therefore was a very important lesson for every Jewish child. They were taught not to forget what their ancestors had gone through and not to forget what God had done in liberating them. Such a memory helped them to face adversity, whether as individuals or as a nation. They knew that Yahweh would save them from evil.

Deuteronomy 6:4-9 offers us another lesson. In this section of the Bible the Jews were given a lesson on how to live as well as on parenting skills. This text is the heart of the Torah (law of God), because it is on the bases of verse 6:5 which reads “Love the Lord your God with all your heart and with all your soul and with all your strength.” The Jewish religion was monotheistic; Yahweh was the only reference point. There were no other gods. Every Jewish child was taught this and this became their basis of life.

It was important for the Jews to take responsibility for the education of their children. Every parent had to make sure that their children were not influenced by external forces. The Deuteronomist instructs all Jewish parents to teach their children the Torah (Deuteronomy 6:7). What is important in this text is not so much the content of

the teaching, but the fact that all aspects of life were seen as an opportunity to mould and shape the destiny of their children. When they set down for meals, it was an opportunity for reminding the children about the Torah; whether they went to fetch water or went on a journey, every opportunity was used to encourage their children to go in a particular direction. Unfortunately, in our context, parents allow their children to be influenced by outside factors; they are too busy with their careers and other preoccupations.

ACTIVITY 3

- 1. What do you think the most important lessons are for children as they grow up in the era of HIV&AIDS?*
- 2. What are some of the 'external influences' that parents in our age often leave their children to?*
- 3. What parenting tips would you give to young parents in your community?*

CHILDREN IN THE NEW TESTAMENT

Children were very close to the heart of Jesus. They featured prominently in his sermons and he enjoyed meeting them in his journeys. He healed many children, allowed them to contribute to his ministry and occasionally they took centre-stage in his teaching ministry.

One of the popular children texts in the gospel is in Mark 10:13-16. On this particular occasion, Jesus was working on his teaching ministry, as always. Among the people who came to see him were children; adults often brought children to him to be blessed. However, the disciples display an attitude that to a judgmental reader may seem foolish; however, they are not dissimilar to attitudes of today. Children are often excluded from workshops, seminars and conferences on HIV&AIDS. They are often regarded as too small to understand and are said to have nothing to contribute to these processes.

The parents who are able 'to bring children so that they may be touched' is critical in the fight against the epidemic. It is important to have adults, be they parents or guardians, who are willing to take the interests of children to heart. Such parents will

find, create and give children life-enhancing experiences during which they can be 'blessed.' These include holiday camps, after school clubs and sporting activities that take them away from boredom and idleness.

Jesus' indignation is indicative of something very important. He had a passion for children and when children were being pushed aside, he took exception to that. He became an advocate for children when they were being sidelined and treated unkindly. This is important because there are not enough voices advocating for the needs and rights of children. In Jesus' theology, children are not just important they are the very centre of the kingdom of God.

Another side of Jesus' indignation is a reminder to the church to be indignant at the abuses that children suffer. This is particularly important because many children do not have a parent to speak for them, to protest on their behalf. It is, therefore, important for the church to become the mother who blesses and protects children in their unpleasant experiences.

ACTIVITY 4

- 1. Think of another biblical text and discuss how children are portrayed in it.*
 - 2. Devise a strategy through which you could keep children involved in your community.*
- What advocacy issues concerning children should the church be addressing in your society?*

SUMMARY

This unit has attempted to bring to the issue of children to the fore front in the fight against HIV&AIDS. We have discussed how children are raised in African cultures. This includes teaching children about *botho*, taboos and storytelling. The unit has looked at parenting in the Old Testament. Whilst we noted some affinity between Africans and Jews on this matter, we also acknowledged much difference as well.

We also looked at the position of children in the New Testament, particularly by sticking to the Markan text. Through this text and on the basis of Jesus' attitude to children, we have been able to suggest what the church should do for and with children.

SELF ASSESSMENT ACTIVITY

1. Think of a folktale in your culture, which can be used to share 'important messages' in the fight against HIV&AIDS.
2. Explain what your church can do to empower and protect children.
3. Describe some of the stories of orphaned children that you have heard.
4. Describe what your church is doing for orphaned children.
5. Discuss some scriptural basis for propounding a theology of life.



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UNIT 10

ON BEING AN EASTER COMMUNITY: LIVING IN THE RESURRECTION HOPE

OVERVIEW

As we conclude this module, I want to remind you of where we started. We started off by looking at the context from which we are attempting to develop a theology of life. This is a context that is riddled with what we called 'demons of death'. We made the point that HIV&AIDS does not exist on its own but thrives on other epidemics. Thus, it creates a complex situation that requires a multi-pronged response.

Throughout the module we have looked at different issues concerning women, men, children, stigma, and prevention. It is evident that a theology of life will not be created quickly or easily. It is an ongoing process. As people seek to be faithful to the demands of the gospel by addressing these issues, we must keep in mind that *a theology of life is not about wonderful words and ideas, it is about loving action*. It requires that the Church demands that the gospel confronts the principalities of earth and calls for an alternative society.

One of the important tenets of the gospel is hope. A theology of life is a theology of hope. Even though the situation may be dire and death and hopelessness may be a reality of our time, the gospel of hope breaks through death so that a new day may dawn. The prophet Ezekiel was surrounded by death and despair, akin to that of our HIV&AIDS epidemic. All he could see around him were lifeless, dry bones. Yet those dry bones became the arena of God's activity. In this unit, we shall conclude by focusing on hope based on the resurrection of Christ. Since the church follows and lives in the hope of the resurrection of Christ, it is a perpetual bearer of hope for life, quality life. Quality life is essential given that the devastation of HIV&AIDS on individuals and communities has the capacity to kill hope for life. The church must perpetually remind us that because Christ arose from death, we have hope for tomorrow.

OBJECTIVES

By the end of this unit you should be able to

- ✂ Construct a theology of hope
- ✂ Read the resurrection of Christ as the hope for life
- ✂ Inspire hope for tomorrow in their churches and communities

TOPICS

- ✂ Death and Resurrection in Africa
- ✂ The Passion of Jesus of Nazareth
- ✂ The Resurrection of Jesus (John 20:1-18)
- ✂ Living in the Resurrection Power

Summary, Self-Assessment Activity, Further Reading

DEATH AND RESURRECTION IN AFRICA

One of the fascinating things about African cultures is that they do not believe that death is the end of life. For Africans, there is an inter-connection of life forces between the unborn, the living and the living-dead (ancestors). Although death is a daily reality, it does not bring finality to life. Dying is seen as a transition to another level of living. This African theology defies death. Although death is perpetually experienced, it cannot altogether prevail over life. Death's prowess is only temporary because although it is painful to lose a loved one, in the end you are comforted by the knowledge that that person continues to live in the world of the ancestors.

This particular philosophy of life is close to the biblical teaching on the resurrection. Both hold on to the hope that nothing is too strong to totally destroy life. This means that even epidemics such as HIV&AIDS have only a temporary stranglehold over us.

An important aspect of this African philosophy is not just its eschatological significance, it is also the fact that the life force of the dead continues in the living; this means that the energy, the beliefs, the values and the spirits of the dead become re-incarnated in their offspring. So even though some people die, they do not die at

the same time. Their children and grand-children will live after them and continue the fight against the forces of death that resulted in the demise of their parents.

ACTIVITY 1

1. *What is the significance, if any, of the concept of the living-dead for today?*
2. *HIV&AIDS have a temporary stranglehold on us. Discuss*

THE PASSION OF JESUS OF NAZARETH

The passion narratives in both the synoptic gospels and the gospel of John indicate that Jesus of Nazareth was arrested and was tried at night (see Mark 14:53-73, Matthew 26:57-75, Luke 22:54-71 and John 18:12-27). Africans can identify with this nocturnal trial as it symbolises their own struggle. The night is always symbolic of difficult times when humanity is groping and grappling with difficult situations. The fact that Jesus was tried at night should therefore be seen as a parody for the human struggles that we go through.

The fact that Jesus was tried and then given an unfair verdict is something that Africans can identify with too. The era of HIV&AIDS has revealed many things, particularly about the relations between the North and the South. The fact that the epidemic has gone on and has killed millions of Africans over two decades; yet, only recently have rich countries from the North begun to respond. This is indicative that we are facing injustice similar to that which our Lord suffered. Other human catastrophes in other parts of the world attract a rapid response and good will from the people of the world. Even the fact that antiretroviral drugs have been in existence for close to a decade now, yet they have only recently become accessible on the African continent. This is a sign of injustice against those who are most affected by the HIV&AIDS epidemic.

Jesus was beaten and made to suffer in a way that is difficult to understand. His body was broken so that all of the broken bodies of God's children may be brought back to life. Herein lies the gospel, Jesus' death brought new life for those who suffer. Jesus' suffering, his brokenness and his death is actually an act of solidarity with the

suffering and grief of the world. This is an important part of incarnation theology because by becoming one with humanity, Christ fully participated in human suffering. Christians, therefore, worship a crucified God; God is HIV positive with us because he participates in our suffering. The image of God that we should be developing is that of a God who embraces our suffering and weeps with the poor because God too shares in our poverty. It also means that his triumph over death is also the victory of humanity over all forces of evil and death.

Our theology of life should therefore be a theology that takes the cross seriously. The cross is a sign of victory against HIV&AIDS and against all the sufferings that human beings encounter.

ACTIVITY 2

1. Define the following terms:

- **Vicarious death*
- **Parody*
- **Human catastrophes*
- **Nocturnal trial*

2. Define your image of God in the era of HIV&AIDS

The Resurrection of Jesus (John 20:1-18)

As we struggle with the HIV&AIDS epidemic, it is important that we develop a theology of hope. One way of doing this is to draw on the gospel narratives of the resurrection. In the text cited above an interesting series of events take place. The first notable event is that the narrative tells us that it was a few female disciples who went to the tomb on the first day of the week to care for the body. It is worth noting the courage and commitment of the women who were caring for the body of someone who had died as a result of a treason trial. This is significant because ordinary people, like the women, can make a difference in confronting the forces of death that are a threat to life. The women became the first apostles because of their passion and compassion. They ultimately became the ones who declared the good news of Christ's resurrection.

Another important part in the narrative is the fact that the stone had been removed. Its removal meant that Jesus, who had been dead for three days, was now able to rise

from the dead. The fight against HIV&AIDS means that we must remove the obstacles which are holding people bondage. These obstacles include stigma, poverty, gender inequality and others that are linked to HIV&AIDS. It is only when these are removed that God's people may be able to rise from their virtual death.

The text also recounts how the women, particularly Mary Magdalene, cried. This shows the love they had for Jesus. She knew that Jesus had not only been a good friend but a prophet. One of the virtues that we desperately need in the era of HIV&AIDS is compassion. Only when communities can care for each other and practice *botho/ubuntu* will some of the effects of HIV&AIDS be addressed.

Mary's experience of Jesus' resurrection opened her eyes to the reality of the risen Christ. She cried with excitement, "I have seen the Lord!" In the midst of death, it is still possible for our eyes to open up so that we might be able to experience new life. We might still be able to see new life where everybody is seeing death. Jesus, whose body was broken for us, may still be seen and experienced in the broken lives of many who live with HIV&AIDS.

ACTIVITY 3

- 1. Who would you say the women in the text represent today?*
- 2. What are some of the 'stones' that need removing in order to make life bearable?*
- 3. What are the signs of hope that are in your community?*

LIVING IN THE RESURRECTION POWER

The resurrection is the most radical teaching of the New Testament. It is a belief that attests to the fact that Jesus conquered death and won a new lease of life. However, the resurrection is not just something in the future. It is something that people can experience on a daily basis.

The author of the Acts of Apostles gives a picture of the resurrection community as an egalitarian community (Acts 242-47). This community is described as one that was

based on *koinonia* (fellowship), sharing goods and worship through the breaking of the bread. This is a model that Christians must explore in this era of HIV&AIDS. There are many people who live in abject poverty, even when their community has plenty. The question, therefore, is how can the church be a resurrection community in such circumstances? For example, I can imagine a congregation or a cluster of congregations organising themselves so that they can support a home-based care project in a particular village. They could organise the training of care givers, work with social workers by organising food parcels and mobilising their community members to volunteer as care-givers. Already there are some churches that are engaged in this kind of ministry.

The USSCA Broadhurst Church is situated in a low income community in Gaborone. They offer a healthy meal once a week to people living with HIV&AIDS and others who are in need of nutrition supplement. The people come to the church where they meet their friends and other people for conversation. They are offered a meal and sometimes they can even take home food to eat later. Through these activities, people's self-esteem is lifted and they are validated as a people. This is what the resurrection story is about, raising people from mental oppression, hunger and from emotional turmoil.

ACTIVITY 4

- 1. Resurrection is not something in the future, it is something people can experience on a daily basis. Discuss.*
- 2. What can we learn from Acts 2:42-47 for our lives today?*
- 3. Give examples of how the church is trying to be a resurrection community in your situation today.*

SUMMARY

As we conclude this model, it is important to remember that there are many threats to life. We have discussed them throughout this module. However, what we have also discussed is that these threats can be overcome. They can be overcome by an

approach to life that says good is greater than evil, light is stronger than darkness and life is stronger than death. Although Africa is besieged with anti-life forces, we know that Christ, who was crucified for creation, is part of grief and pain.

We have also discovered that we have a lot of resources with which we can build a theology of life. Such resources include our experience as a people, our cultural heritage, and the Bible, which is full of guidelines on how to live a life that Jesus described as the kingdom of God. The resurrection power makes us raise against the depressing spirit of HIV&AIDS deaths. Like Paul, the resurrection story of Christ helps us to laugh, to scorn the power of death, asking, “death where is your sting?”

SELF-ASSESSMENT ACTIVITY

1. What does it mean to be an Easter Community today?
2. Would you say that HIV&AIDS is a justice issue? Give illustrations for your answer.
3. You are a new pastor in a rural congregation. The community has a 30% unemployment rate, 18% of the population is HIV positive and there are many beer halls in the village. The quality of life is generally poor and lately there have been reported suicides. How would you go about addressing these issues?
4. Prepare a sermon on ‘Living in the resurrection power’ for your congregation.



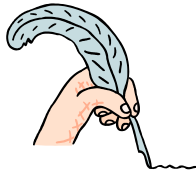
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TEST: UNIT 6-10

TIME: 1 HOUR

INSTRUCTIONS

1. Attempt all the questions.
2. Please write your answers in your notebook.
3. If you cannot answer any question, please feel free to return to the relevant unit and re-read.

Questions

1. Discuss why HIV&AIDS prevention programs are part of practically living out a theology of life.
2. In two paragraphs, discuss the ABC strategy and how the church can use it.
3. Explain the importance of men's involvement in HIV&AIDS prevention and how the church can encourage men to be actively involved.
4. Discuss biblical perspectives that support HIV&AIDS prevention.
5. Using the model of A,C.T.S (unit 6), design a church service and sermon that will help your church to deal with HIV&AIDS and all its related issues.
6. Using scriptures of your choice, give a theological base for a theology of care giving.
7. Using examples from your context, discuss African perspectives on care giving.
8. Describe examples of organizational care giving from your country and church/es.
9. Discuss how women are affected by HIV&AIDS in your country and church.
10. Explain the importance of preaching the resurrection hope in the HIV&AIDS era.



EXAMINATION PAPER

Time: 2hours

Instructions: Choose and Write **Two Questions Only**

1. Write an essay on ‘Women, HIV&AIDS and a Theology of Life’. It must have the following sub-headings:
 - a. Statistical Facts Showing Women’s Vulnerability
 - b. Factors Fuelling Women’s Vulnerability
 - c. Biblical Perspectives that Empower Women
 - d. Conclusion: A Theology of Life that Empowers Women

OR

2. Write an essay titled ‘Stigma is an Unacceptable Sin before God and Other Human Beings’. Your essay should be written under following sub-headings:
 - a. Definition of Stigma and HIV&AIDS stigma
 - b. Impact of Stigma on the Quality of Life of PLWHA and their Families
 - c. Scripture and Stigma
 - d. The Church and the Fight Against HIV&AIDS Stigma
 - e. Conclusion: Towards a Compassionate Church

OR

3. Write an essay on ‘Welcoming Children; Welcoming God,’ which challenges the church to care for children in the HIV&AIDS context.
Your essay must have the following sub-topics:

- a. Children Orphaned in the HIV&AIDS Context
- b. Children Infected in the HIV&AIDS Era
- c. Children Stigmatized
- d. Jesus and Children
- e. What the Church Can Do
- f. Conclusion: A Theology of Life for Children

OR

4. Write an essay on 'Prevention of HIV&AIDS is Preservation of Life.'

Your essay must have the following sub-headings:

- a. Current State of HIV&AIDS Infection in Your Country and World
- b. Impact of HIV&AIDS Infection on the Quality of Life
- c. African Perspectives on Prevention of Disease
- d. Biblical Perspectives on Prevention Disease
- e. Jesus and Prevention of Disease
- f. Conclusion: What the Church Can Do to be Effective in HIV&AIDS Prevention



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USEFUL INTERNET RESOURCES

- UNAIDS (www.UNAIDS.org) is a joint United Nations Program on HIV/AIDS, offering worldwide information on the epidemic.
- AIDS Org (www.aids.org) provides updated information, especially treatment news.
- Bill and Melinda Gates Foundation (www.gatesfoundation.org)
- AIDS Map (www.aidsmap.com) offers worldwide information and articles.
- www.lutheranworld.org –Lutheran World Federation
- United Methodist HIV/AIDS Ministries Network (www.gbgm.umc.org/health/aids)
- www.wcc-coe.org/english.html (then click on Ecumenical HIV/AIDS Initiative in Africa (EHAIA))