

Covenant pastor Dennis Wadley prays during a service at St. Paul's Anglican Church in Philippi.



Bridge of Hope

A family leaves behind their home in Southern California to battle AIDS in South Africa.

Bob Smietana

When Dennis and Susan Wadley first told their kids that they would be leaving their home in Santa Barbara, California, and moving to South Africa to work on AIDS prevention in a township outside Capetown, daughters Tasha, eleven, and Addie, nine, were all for it. The girls had been to South Africa on a mission trip a year earlier and were excited about going back.

But their six-year-old brother Elijah, who had also been on that mission trip, wasn't so sure. "What if I don't want to go?" he asked.

"We will find you a good family here to stay with," his parents said.

At first, that sounded like a good idea to Elijah. "And I can eat whatever I want?" he said with anticipation.

"No way," Addie told him. "We will find you a family that will feed you liver three times a day."

That was enough to convince Elijah, or "E-boy" as his parents call him. "I guess I'll go."

So last winter, the Wadleys put their belongings in storage, rented out their house, sold their car, and left behind their family, friends, and their church, Community Covenant in Santa Barbara, where Dennis had been pastor for ten years. After a couple of days of meetings during the Covenant Midwinter Conference, they were on a plane, headed for their new home.

When people ask Susan Wadley what made them decide to go, she says the answer is simple. "We are extremists," she says with a laugh. She goes on to say that they had been preparing for this moment for most of their married lives. And it started even before Dennis and Susan were married—after meeting on a blind date, the two dated

An estimated 3 million children worldwide have been infected with HIV and 14 million children worldwide have lost one or more parent to AIDS.

for seven weeks, and then spent a month of their engagement on a mission trip to Poland with a youth group.

Dennis says he had not realized just how big the problem of AIDS had become until he read a *Time* magazine article in 2000, which chronicled the growth of the AIDS pandemic. By that time, according to the Joint UN Programme on HIV/AIDS (UNAIDS), an estimated 34.3 million people had been infected with HIV, with 2.8 million people dying in 1999. In 2002, those numbers had grown to more than 42 million total infections and 3.1 million deaths. More than 29 million people (70 percent) who are infected with AIDS live in sub-Saharan Africa.

As the Wadleys learned more about the AIDS pandemic, they started look-

the Wadleys and members of the church to start Bridges of Hope, an organization that tries to link Christians in the United States with people suffering from AIDS in South Africa.

One thing that struck the Wadleys during their first visit to South Africa was how few medical services were available to people living in the townships. In Philippi, they visited a clinic that serves 300,000, which had been constructed out of large empty shipping containers. "People started lining up at three in the morning just to have any hope of being seen by the one doctor that works at this clinic," Susan says. "The nurse told us, 'All we can give them is Tylenol.'"

Because people with HIV/AIDS have weakened or vulnerable immune

with AIDS [in South Africa] is thrush," Susan says. "People get it in their mouths and throats and pretty soon they can't swallow, and they die in excruciating pain from starvation."

The Wadleys brought along several bottles of thrush medication during their 2002 trip to South Africa. While



Elijah Wadley (front left) with boys from St. Paul's church

ing for ways that they and Community Covenant could respond. That led to two mission trips—a two-week trip in September 2001 and a summer project in 2002, where a team from Community Covenant worked for two months in the township of Philippi (pronounced FILL-ih-pee). And it led

systems, in Africa they often die from infections that could be easily treated with antibiotics or other medications. Something as simple as a fungal infection like oral thrush, a whitish, pasty film that covers the mouth and tongue, can be deadly.

"One of the main killers of people



Dennis and Susan Wadley, and their children, Addie (left), Elijah, and Tasha with St. Paul's pastor Muleki Nkoloti (center)

they were there, they met a twenty-three-year-old woman who had been "given up for dead" by her family because she was not able to eat or drink. The woman was being cared for by Agnes Zantsi, an older woman the Wadleys had first met a year earlier. The medication was enough to keep the young woman alive.

"We gave her a little bit of medicine," Susan says, "and within forty-eight hours, she was eating and drinking again."

It was through Agnes that the Wadleys learned firsthand about the effect that the AIDS pandemic is having on children. An estimated 3 million children worldwide have been infected with HIV and 14 million children

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A mission team member from Community Covenant Church in Santa Barbara with women from St. Paul's Anglican Church in Philippi

worldwide have lost one or more parent to AIDS. Agnes, who is a grandmother herself, is currently caring for three young children with AIDS who had been abandoned.

One, a five-year-old boy named Tobela, had been left in a dumpster after both his parents died from AIDS.

“Why are we worried about a disease that will kill us in ten years, when we are just wondering how to survive now, how to get through today?”

Agnes's daughter found Tobela, who was malnourished and covered with sores, and brought him home. After a year in Agnes's care Tobela is thriving, says Dennis.

The goal of Bridges of Hope is “holistic community transformation,” he says. That means focusing not just on AIDS, but on all the other factors—unemployment, hunger, poverty—that affect people's lives. One of the things that helps AIDS spread, Dennis says, is an overwhelming sense of hopelessness. “Why are we worried about a disease that will kill us in ten years,” people told him, “when we are just wondering how to survive now, how to get through today?”

After their first trip to South Africa, the Wadleys began thinking about leaving Community Covenant and working with Bridges of Hope full-time.

The church had flourished during the time Dennis had been pastor, growing from a congregation of about forty-five senior adults to an average attendance of more than 600, with a large percentage of college students. But Dennis felt like he had taken the church as far as he could, and that someone else

would do a better job as pastor in the future.

There was also an overwhelming sense that God was calling them to be involved in the AIDS pandemic. The closest thing they could compare it to—in scope of human tragedy—was the six million Jews killed during the Holocaust. About 25 million people have died from AIDS worldwide—a number more than the population of Texas (20 million) or about equal to the populations of Illinois (12.4 million), Minnesota (4.9 million), and New Jersey (8.4 million) combined.

And there was a sense, say the Wadleys,

that even doing something on a small scale could have a tremendous impact in the lives of people suffering from AIDS. One project that their church started early on was a Market of Hope—a way for people to give small amounts of money for specific projects. Fifteen dollars would buy a fruit tree that a township family could plant in their yard, giving them an extra source of food—something essential in an area with 90 percent unemployment. They could donate money for school supplies for kids or provide Christmas gifts for women involved in prostitution to give to their children.

Early on in the process, the Wadleys got a letter forwarded from a ministry that reaches out to prostitutes in Capetown. It was from a woman named Tracie who had received Christmas gifts through the Market of Hope program. Through that gift, she met Christian outreach workers who helped her get off the streets.

The decision to move to South Africa met with great support and approval from the congregation at Community Covenant. The church contributed \$100,000 to start Bridges of Hope and is providing ongoing support to the Wadleys. Two young people from the church, Amanda Yost and Jim Eddy, went with them to help with the transition.

Since arriving in South Africa, the Wadleys have settled in Stellenbosch, a small community outside Capetown.



A group of boys plays outside the building in Philippi where Bridges of Hope works.

Princess Zulu: "A Human Story"

For most of the first fourteen years of her life, Princess Kasune Zulu lived a comfortable, middle-class existence in the Kabwe province of Zambia. Then both of her parents died of AIDS.

"I became the one to take care of my family," says Princess (her name, not a title). "I was vulnerable and the only means of survival was to drop out of school and get married." Princess, now twenty-six, married an older man and soon became the parent of two young children, whom she cared for along with five step-children.

Then in 1997, Princess found out that both she and her husband were HIV-positive. She also learned that her daughters, Joy (then three) and Faith (then eighteen months), were HIV-negative. About one in every five people in Zambia, a country of ten million people, have been infected with HIV.

Learning that she had been infected turned Princess into an AIDS activist and educator. She began speaking at schools and businesses—"giving myself as a human story," she says—trying to break people's stereotypes of what an AIDS victim looks like. She also began hitchhiking with long-distance truckers, a group considered high-risk for contracting the disease, educating them to the danger of AIDS and on ways to prevent spreading it.

When she speaks, Princess focuses on what she calls "the hidden faces of the disease: women, children, and the grandparents who often care for AIDS orphans. "When I learned I was HIV positive," she says, "I knew God had chosen me as a voice for orphans and children."

At first Princess's husband demanded that she stop speaking about AIDS, but relented after having a "revelation from God," she says. She now hosts a national call-in radio show, *Positive Living*, which began airing in Zambia in October 2000. She brings in experts to talk about nutrition, strategies for living with HIV, public policy, HIV testing, and ways to prevent the disease such as abstinence and condoms. The show is designed to help prevent people from becoming HIV positive, Princess says, and to give hope to people who are HIV positive.

"The radio reaches into the remotest area, even where a car cannot pass," she says. "Even if people do not have access to clean drinking water, they will have access to the radio."

In 2001, Princess began working with World Vision, an evangelical relief agency, on AIDS prevention and education projects through programs in schools, such

as anti-AIDS clubs. Those programs work closely with churches in teaching young people to delay sex or to become "recycled virgins," Princess says. "It's not that you don't ever have sex," she says. "They can wait until it's the right time."

Working with churches is essential, she says. Not only do they have a great deal of influence in people's lives, they also will be there long after World Vision leaves. One of the key areas to help churches, besides AIDS prevention, is caring for people who are dying of AIDS without stigmatizing them.

Unlike most people in her country, Princess has been able to take anti-retroviral drugs to treat HIV. Princess's drugs are paid for by a church she visited while in the U.S. "My prayer is that every infected person in Africa will have access to these drugs," she says. And it's not just drugs for treating AIDS. There's also a need for drugs like Nevirapine, which helps prevent pregnant women from passing the virus on to their children.

In April and May, Princess toured the U.S. as part of World Vision's Hope Initiative, a fifteen-city outreach campaign aimed at educating Christians about the plight of people suffering from AIDS. Just before the tour began, she, along with other AIDS educators and representatives of relief groups, met with President Bush to discuss his plan to provide \$15 billion to fight AIDS in Africa and the Caribbean. She says she was impressed by President Bush's sincere commitment to helping people suffering from AIDS.

"Sometimes politicians say things because they have to," she says. "I could see his heart for the people in Africa and the Caribbean who have been infected." She was also touched that the president embraced all of the people who attended the meeting on April 28, many of who have been infected with HIV.

Following that meeting, the president gave a speech in which he referred to the parable of the Good Samaritan in pressing for the need to be involved in the fight against AIDS.

"When we see this kind of preventable suffering, when we see a plague leaving graves and orphans across a continent, we must act," he said. "When we see the wounded traveler on the road to Jericho, we will not, America will not pass to the other side of the road." □



Princess Kasune Zulu



Early on they had hoped to live in the township itself, but were warned off by residents there. “We were told by residents that not only could we not live there—because of how unsafe it would be—but we could never be there after dark,” says Dennis.

Being in Stellenbosch, an Afrikaaner community that was one of the strongholds of the apartheid movement, has allowed the Wadleys to begin building bridges between that community and the township. In April,

They also received training from Medical Ambassadors, a mission organization that focuses on grass-roots health education, and have begun working with young people (ages eighteen to thirty-five) from local churches in AIDS education and community development.

“There is a huge hunger and people are really passionate about wanting to see change happen,” says Dennis. “Medical Ambassadors does seem to fit well [here] because they empower

Capetown area,” says Dennis. “They are stacking graves on graves, they are pulling out the coffins and digging deeper so they can stack them on top of each other—it’s intense the amount of death and suffering . . . we are really going in as learners when it comes to grieving, accepting, and moving on.”

More than anything, the Wadleys say that they have seen in people they meet, especially their friend Agnes, an ability to grieve and then to persevere. Agnes still has scars from bullet wounds

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Dennis met several people in Stellenbosch who work for large produce suppliers that routinely throw away fruit that is edible but not considered “grocery store” quality. Working with his new contacts, he was able to arrange the donation of three tons of citrus fruit to Philippi.

In their work, the Wadleys have been careful not to come in with preconceived notions of what they want to accomplish. Instead, during last summer’s trip and since their arrival in February, they have spent time listening to local residents, asking about their concerns and working with them to develop solutions. They are working closely with Muleki Nkoloti, pastor of St. Paul’s Anglican Church of Philippi, whom they met during their previous two trips.

people to deal with the issues that they feel are the most pressing, and to come up with solutions that they can maintain as a community, rather than something that would work in America and wouldn’t work over here.”

The Wadleys say that just being in South Africa has helped give hope to people living in the township, many of whom have felt like no one in the outside world knew they existed. That was evident even during their first trip to South Africa, says Susan.

“People wanted to have their picture taken so they knew someone in America knew that they existed and knew about what struggles they were facing,” she says. “We had people who wanted us to take pictures of their children so someone would know that they were alive.”

One of the ironies of the AIDS pandemic is that the funeral industry is one of the growth sectors of the South African economy. Some of the people whom the Wadleys met during their initial trips, including a young boy named Sibewe, have already passed away. And dealing with the ongoing death and despair caused by the pandemic is one of the challenges faced by everyone in their community.

“They have to limit the number of funerals that they can have in the

she received during the struggle against apartheid.

Last summer, the Wadleys saw Agnes walk out of a funeral of an AIDS victim who had left behind a young AIDS-infected son, saying how much she hates the disease and what it does to families. Despite their grief, Susan says, “They see themselves in a battle. It’s a war [and] they don’t want to give up.”

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For More Information

To find out more about the work of the Wadley family and Bridges of Hope or to support them, contact:

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AIDS Prevention: Creating a Social Vaccine

In the mid-1980s, facing a growing AIDS epidemic in a country where even basic medicines like aspirin were in short supply, Ugandan president Yoweri Museveni and his advisers devised a low-cost, people-intensive way to fight the disease. They targeted the two main behaviors that were driving the epidemic, says Harvard medical anthropologist Edward “Ted” Green—young people having premarital sex and people of any age having multiple sexual partners.

The approach they used may have been as simple as ABC—abstain, be faithful, use a condom—but it was also ingenious. By mobilizing all sectors of Ugandan society—government, education, religious groups, entertainment—Museveni made fighting HIV an act of patriotism for all Ugandans.

The idea was to make sure that “everybody understood that there is a threat of AIDS. You will die [if you get it], so you must change your behavior,” says Green. Condoms were made available and targeted for those least likely to change their behavior and considered at high-risk for HIV—long-distance truck drivers, soldiers away from home, and sex workers.

The result was that by 1989 the growth of incidence (the number of new infections) began to slow. Prevalence (the total number of people infected) peaked at 15.1 percent of the population in 1991, and by 2001 dropped to 5 percent, making Uganda’s HIV prevention program the most effective in the world. A similar program was started in Senegal and prevented HIV from getting into the general population. Senegal’s HIV prevalence peaked at 1.1 percent in 1990, and by 1997 had dropped to 0.4 percent.

Green says that it is helpful to compare the example of Uganda with that of neighboring Kenya. There, after years of initial denial, the government launched a small AIDS prevention program, funded by outside donors and focused mainly on condoms for prevention. The result, says Green, was that prevalence continued to increase and stands at about 20 percent today. The

government of Kenya also did not engage the religious community, which led to a “confrontation between many people in the faith-based community in Kenya and those who work in AIDS prevention,” says Green.

“There would be rallies by religious leaders,” says Green, “who would have bonfires and they would burn condoms and denounce AIDS prevention as something that spread condoms and therefore immorality.” In 1999, the government adopted an ABC approach and by 2002 had begun to see a drop in the rate of prevalence.

Green, who has worked in Africa for decades and began studying the Ugandan ABC program in 1993, says it is essential that any AIDS prevention program in Africa include active participation by religious groups.

... “everybody understood that there is a threat of AIDS. You will die [if you get it], so you must change your behavior,”

“Religious leaders and organizations in Africa are very powerful,” he says. “You either get them on your side and they help you, or you leave them out and they work against you the way they did in Kenya before 1999.”

Recently, Green has become one of the leading advocates for the ABC approach, which he holds for scientific—not religious—reasons. While he is quick to point out that he is a “fairly secular person and not a regular churchgoer,” Green argues that—at least in Africa—the ABC method is the most effective way to prevent new infections of AIDS. “We need to move away from consensus-based AIDS prevention and toward evidence-based AIDS prevention,” he says.

“We have had these assumptions that when a certain level of the population is all using condoms correctly and consistently prevalence will go down,” he says. “Well, there is no evidence in Africa that that is so. In fact, the countries with the highest levels of condom use and the highest level of condom availability, also have the highest level of HIV infection.”

While much of the scientific effort has gone into finding an effective vaccine for AIDS, Green and his colleagues think that the Ugandans have created something more effective. Rand Stoneburner and Daniel Low-Beer presented a paper at the 2000 World AIDS Conference that called the ABC approach a “social vaccine,” which was 80 percent effective in preventing the spread of HIV. Green says that the first successful new AIDS vaccine will likely be about 30 percent effective. □

These two boys from Rwanda are among the 14 million children who have lost a parent to AIDS.

