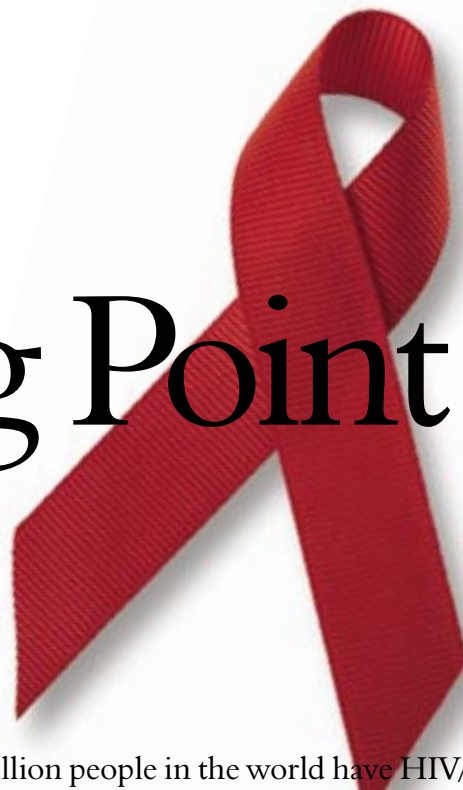


A Turning Point on AIDS

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HERE ARE THE FACTS. About forty million people in the world have HIV/AIDS, mostly in places where cultural taboos and the lack of adequate medical facilities and drugs make combating the disease and stopping its spread extremely difficult. Each day, about 11,000 additional people become infected, and about 8,000 die from the disease. Sub-Saharan Africa is home to more than 60 percent of the cases; more than half of these are women. Two million people died there from AIDS in 2005, while 2.7 million new infections were reported. In that region, only an estimated 17 percent of those with HIV/AIDS are receiving effective anti-retroviral treatments.

In the United States, where successful yet expensive pharmacological treatments have succeeded in both treating and masking the problem, turning many of the cases into chronic rather than more immediately terminal conditions, an estimated 900,000 people live with HIV/AIDS. Gay men are still disproportionately represented in these numbers, but the majority of new infections are found in heterosexuals (33 percent) and intravenous drug users (25 percent). The African American community bears the brunt of the disease—54 percent of newly infected people are African American. Women in the U.S. make up 30 percent of new infections, but 64 percent of these women are African American.

Behind the scenes, many Christians have responded to the AIDS crisis. Christian relief groups care for AIDS victims—distributing medicines and working on prevention—and Christian groups, many of them evangelical, lobbied the federal government to do

more about AIDS. Their work played an important role in getting the U.S. government to increase AIDS funding—with \$15 billion being spent over five years.

But in the public eye, Christians have been relatively quiet about AIDS.

The suffering of AIDS victims encouraged Kay and Rick Warren of Saddleback Church in Lake Forest, California, to become active in AIDS ministry, and to organize two international AIDS conferences. This past year's conference, held November 30 through December 1, was called "A Race against Time." The intention was to marshal the resources of Christians—along with business and political leaders—to fight AIDS.

The conference program put it this way: "With 2.3 billion people claiming to be followers of Christ, Christianity is the largest organization, has the widest network, and offers the biggest volunteer force on the planet. The church is larger than any...government or busi-

ness. In many parts of the world, the church is the only civil society structure."

The call for the church to go from familiar places of worship into unfamiliar communities at home and often risky locales worldwide is coupled with a call for cooperation.

Saddleback, located in the heart of south Orange County, is an overwhelmingly white church with a significant Asian population. It is predominantly upper middle class. But during the conference, the complexion of the congregation changed. It was more ethnically diverse to be certain, and also consisted of people who might not usually be in or speak to churches: Richard Feachem, executive director of the Global Fund to Fight AIDS, Tuberculosis, and Malaria; Mark Dybul, U.S. global AIDS coordinator; Christian Pitter from the Elizabeth Glaser Pediatric AIDS Foundation; Harvard anthropologist and AIDS prevention researcher Edward Green; and Mary Davis Fisher from the

Joint United Nations Programme on HIV/AIDS (UNAIDS). Bill and Linda Gates spoke via video.

The media was there mainly to cover two Midwestern presidential candidates, Republican senator Sam Brownback from Kansas, and Democratic senator Barack Obama from Illinois. Although focusing on the church's role in combating AIDS and caring for those afflicted, attendees also listened to the expertise of medical, social, and political groups, and to the perspectives of health professionals, nongovernmental organizations (NGOs), governments, and parachurch ministries.

I left the conference convinced that the issue of cooperation, or more precisely the resistance to and suspicion of it, is what the church and those outside of the church will need to work on in order to help those who are suffering. This is compounded, I think, by two factors.

First, we're at a cultural moment in the United States when we seem much more interested in controversy and the "show" that surrounds it than in the less stimulating process of understanding and solving complicated problems. Some people's interest in the conference was to protest Rick Warren's decision to "share his pulpit" with Senator Obama—likely because they disagree with some of Obama's political positions and because he is a Democrat.

The media was looking for controversy, and found some when Senator Brownback, in a combination of humor and banter, said that he had recently appeared with Senator Obama at a meeting of the NAACP and felt out of place. From the Saddleback Church pulpit, however, he said to Obama, "Welcome to my house."

But those dying of AIDS or the eleven-year-old children in Africa who, because of the epidemic, now find themselves the head of their households, could not care less about arguing over church territory.

Second, the church doesn't have a lot of experience formally cooperating with nonchurch agencies and non-believers, and the potential teamwork makes us nervous. Is such work a wa-

tering down of the Christian witness? Does ministering to gay men in the United States or to men in Africa who have spread the disease to their own spouses contradict the church's moral stances?

Let's look at one of Jesus's parables—a troubling story, as most of them are, given in response to a man who, when told to love God and to love his neighbor as himself responded, "Who is my neighbor?"

Jesus, as usual, gets right to the point. He describes a man who was robbed, beaten, and left to die in a ditch. Two church people, if you will, see him lying in the ditch and pass by, crossing the street to avoid him. Finally, a Samaritan, a social and religious outsider, sees the man and takes pity on him. He bandages his wounds, takes him to an inn, and watches over him for the day.

Then, before continuing his own journey, the Samaritan gives some of his own money to the innkeeper and says, "Take care of him; and when I come back, I will repay you whatever more you spend" (Luke 10:35-36). Then, in the following verse, Jesus asks the man he is addressing, "Which of these three, do you think, was a neighbor to the man who fell into the hands of the robbers?"

We're given no background as to why the two failed to help, but we can speculate that it was because of both the human instinct of avoiding danger and the religious response of wanting to avoid something spiritually suspect. (What did the beaten man do to get himself into this situation?)

But the Samaritan fights his human instinct and doesn't question the victim's credentials—nor does he wonder about the innkeeper's trustworthiness, theology, or political views. He sees him as a partner in the commandment by God to love our neighbors.

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Kent R. Hill, a graduate of Northwest Nazarene College and now assistant administrator of the U.S. Bureau for Global Health, reminded the conference attendees that arguments about AIDS created by and for Western culture and Christians will not effectively reach many of those infected with HIV. Loving our neighbors in combating AIDS will make action, culturally-aware education, and compassion the keys to uniting forces to address the problem. We must be willing to take action with and for those who do not accept the Christian worldview and allow our actions initially to be our Christian witness. (As St. Francis of Assisi reportedly said, "Preach the gospel at all times and, if necessary, use words.") AIDS education must be able to effectively address the cultural or socio-economic environments that may be contribu-

tors to perpetuating the spread of the virus. This includes debunking myths and fears about the transmission of the virus and AIDS testing. It also means ministering with mercy and compassion to many victims of circumstance: those raped, the children who see transactional sex as the only way of earning money for their little brothers and sisters they have been left to care for, the babies born with HIV because their mothers were infected. The numbers of those infected with HIV/AIDS in these groups, particularly in Sub-Saharan Africa, is staggering.

This AIDS conference inferred that the church is at a turning point—it is time to become God's hands and feet, to leave our comfort zones and, as in Jesus's parable, to walk the dangerous roads where our resources and faith will be taxed and stretched by what we encounter. □

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