

AJANews 99 - March 2011

Women and HIV

Six Years on ART and Many Examples of Sacrifice, Love and Compassion The parish: A privileged place to fight HIV and AIDS

Blessed Anuarite Nengapeta is a young Sister of the Holy Family of Kisangani. She worked at Wamba as a teacher. She was murdered resisting the sexual demands of a rebel leader in the Congo in 1964. Saint Aloysius Gonzaga is a young Jesuit who selflessly gave his life caring for victims of the deadly plague in Rome in 1591. We entrust the African Jesuit AIDS Network to their prayer and protection.

WOMEN AND HIV

International Women's Day, celebrated on 8 March every year, gives us the occasion to look into the condition of women in the context of the AIDS pandemic in order to raise awareness of the challenges and to investigate what needs to be done to improve the situation. Fr. Paterné Mombé, SJ, Coordinator of AJAN, gives a reflexion on women and HIV/AIDS.

In Africa, women are without doubt the first people affected by the HIV pandemic. They bear the heaviest burden due to their commitment to caring for family members who are sick because of AIDS or for children orphaned by the pandemic. Since the nineties, the AIDS pandemic, which, in the beginning, was largely confined to men--at first homosexuals, but then heterosexuals--has come to impact women much more. As underscored in a June 2010 speech by the Director of UNAIDS, Dr. Michel Sidibé, the epidemic sadly remains a women's epidemic. Women aged 15 to 49 represent more than 57% of cases in Africa.

Within AJAN, the majority of people living with HIV who are cared for by Jesuit institutions (e.g., *Service Yezu Mwiza* in Burundi, *Parlons-SIDA* in the D. R. Congo, *Centre Esperance Loyola* in Togo) are women. HIV test results year after year and across the map confirm the greater vulnerability of women.

To be sure, at the root of this situation is the biological fact that women are two times more likely to be infected by HIV than men. But there is also the sociological fact of inequality between the sexes and, moreover, there are certainly the economic factors which cause the vast majority of women, in the throes of poverty, to live more in a state of economic dependence than men. This state of affairs makes them extremely vulnerable to all sorts of things, including HIV infection.

Additionally, we cannot silently ignore the sexual violence to which women are victims in this day and age. During my last visit to South Africa, I was reading in the newspapers the story of some young girls who were abused by their male schoolmates. One can also recall the odious and tragic situation of the widespread rape of women in the east of the Congo, particularly in Bukavu. The reality is that women in Africa are far from receiving any protection whatsoever. It is time to start a serious reflexion to see how to change this situation.

I dream of an Africa where women aged 15 to 30 in dire circumstances can receive, like the unemployed in developed countries, social aid from the state to strengthen their capacities and allow them to take charge of their lives. A passing dream. At any rate, concrete action must be taken to improve the condition of African women and strengthen their protection. In order to be able to significantly reverse the trend of the pandemic in Africa, it is necessary to drastically reduce its incidence and its impact on women. To do this, we can promote a certain number of actions in their favour; notably, we should promote laws and other measures of protection for women, encourage access to micro-finance or credit for income-generating activities, increase access to education, and develop an information strategy for relaying awareness around the issues of HIV and AIDS (while taking care, as far as possible, to include spouses). For its part, AJAN intends to work in a special way, in its network, for the reduction of poverty, especially among women affected by the pandemic, and also to ease many of them of the worry about how to educate their children. May the Lord enlighten, help and support us in this endeavour, and may He always bless our efforts to succour the widow and the orphan.

SIX YEARS ON ART AND MANY EXAMPLES OF SACRIFICE, LOVE AND COMPASSION

This testimonial from 'Mrs. J. M.' in Kisangani, D. R. Congo, illustrates the manifold challenges faced by many women infected by HIV. At the same time, her history shows that with a little support, with compassion and with the grace of God, it is certainly possible to overcome the most distressing difficulties and take charge of one's life.

My name is Mrs. J. M., I am 40 years old and I have been HIV-positive since 2 June 2005. I have lived positively with my status for six years. In the beginning it wasn't at all easy because it seemed as though I was living in a nightmare. Being HIV-positive was a shock. Eventually, I understood that I needed to start by coming to terms with and accepting the state of my health in order to live well. But how?

I remember my situation then as though it were yesterday. Only three months after having told my status to my husband, with whom I had had five children, he chased me away and I didn't know where to go. I used to cook once a week to feed my children. And during this time, I had many relapses.

God is great and compassionate. At *Parlons Sida [Let's talk AIDS]* they understood that despite my HIV-positive status, I was still of worth for my family and for society. They took me under their wing and gave me spiritual, psychological, medical and moral support. The team was always ready to listen to me, to strengthen me, to support me, to counsel me. Since then, I have understood that my path for reducing the prevalence of HIV is to live in abstinence for the good of others, and also to bring up my children well.

Being poor is a tragedy. But in this tragedy, one always meets people who are ready to give you a hand. *Parlons Sida* has done this with a lot of compassion, and despite their limited finances. My prescriptions for opportunistic infections have been honoured and two of my children have remained in school until this day. One of my children, who was six months old at the time when I was weak, brought down and abandoned, has never gone without the *Nido* powdered milk which *Parlons Sida* gave me for her. Without this compassion and solicitude, I truly never would have seen this six-month-old infant become a beautiful three-year-old girl.

Moreover, thanks to *Parlons Sida*, I studied at the the *Institut Technique Médical* (Technical Institute of Medicine) and today I am an 'A2' nurse and useful to society. Yesterday, I was

was unstable, rejected, humiliated and abandoned, and now today, I have regained hope and a relish for life. I know that I need to work to give my children a future and also to demonstrate to others who are sick the same attitude of sacrifice, love and compassion rooted in Jesus Christ which *Parlons Sida* revealed.

In 2006, I was on antiretroviral therapy. I remember that there needed to be someone to be my witness and sign a little document as required by the GTZ so that the doctor could give me this antiretroviral treatment. Instead of my husband--the one who, along with me, said 'yes', for better or for worse--it was my eight-year-old child who was my witness. Since then, he has supervised the taking of my medication. He has also taught his younger brother to do likewise. These two 'angels' give me my medication, knowing the time at which I need to take it and the correct dose. *'O God, take care of these children as they want their mother to live positively. Do not forget them whenever they call upon You. Remove them from every danger, and may they live in happiness.'* This is my prayer for them.

There is much more I could relate, but I would not know how to say all there is to say. A thousand thanks to those at *Parlons Sida* for initiating me into the struggle against this pandemic. I profoundly thank all the coordinators, particularly Father Martin Bahati, who was the first to welcome me at *Parlons Sida* and was always available to hear my joys and sufferings, my desires and preoccupations. He was like my spiritual father in my time of doubt, of questions and of crisis. I sincerely thank the new coordinator and all the collaborators for their spirit of sacrifice and compassion. *Parlons Sida* remains a father to me.

THE PARISH: A PRIVILEGED PLACE TO FIGHT HIV AND AIDS

Experience has shown that in a sub-Saharan African context, the parish can be a privileged place to fight HIV/AIDS. In the fourth of an AJANews mini-series about AIDS ministry in Jesuit parishes, Fr. Martin Bahati, SJ, shares how his parish, Saint Pierre Claver/Nguba, is helping to combat the violence, exclusion and discrimination faced by women infected with HIV.

For about twenty years, the East of the Democratic Republic of the Congo has made a name for itself with violence, wars, insecurity and the shameless rape of women. These barbarities have had and continue to have many repercussions in the lives of all the peoples of the region and especially in the spiritual life of Christians in the land. Exercising my priestly ministry in one of the city's parishes, I have had to receive the various victims of these human tragedies. Today, I would like to share with you my experience as the pastor of a parish and, specifically, what we are doing for victims of HIV/AIDS.

The situation of HIV/AIDS in the East of the Congo is often tied to violence. Many women and men infected by this deadly virus have become so because of rape. The perpetrators of these ignominious acts are often soldiers of Ugandan, Rwandan, and Congolese armies, as well as the innumerable militias, all present in the region and containing within their ranks a very high prevalence of HIV.

As a parish, a church for the family of God, we welcome all victims of human barbarity without discrimination or blame. It should be pointed out that often a woman who has been raped is chased from her home by her husband because he thinks that his wife let it happen to her, or, in the military language used here, it is said that 'she cooperated'. What is behind this is his shame of having a wife who has been raped, or the fear of being infected

himself. The parish does the work of speaking out for these women unjustly chased from their households. Each Thursday at three-thirty, local time, we celebrate a mass of blessing and inner healing for all the sick of the parish. The celebration is a time of sharing and mutual support. The prayers of the people and other prayers, the readings and the sharing (in place of a homily), the blessing and the prayer specifically for the sick are of capital importance and play a significant role in providing psychological calm. The mass of blessing also serves as a setting for personal reconciliation with God, with oneself and with others. This reconciliation goes even further: it stirs the sick to recognise the Christian requirement of forgiving their enemies. Many of the sick have told us that they were able to forgive their tormentors thanks to having listened and meditated on the Word of God. Others have shared with us that they can bear and live with their illness thanks to the Word of God which they hear and share each Thursday.

It seems to me that the parish is an appropriate environment to have this type of activity of integration and for contending with the exclusion and discrimination of people affected and infected by HIV/IDS, because in a parish all strata of the population are mixed together-- rich and poor give each other the peace of Christ; whites and blacks share the Gospel of Jesus Christ; adults, the elderly, young people and children listen together to the Word of God; etc. The acceptance and integration of people living with HIV in the various parish activities (prayer groups, parish committees, etc.) challenges the level of our faith, our hope and our charity. I am convinced that if those infected and affected by HIV are well integrated in all the areas of parish life, they will also be in wider, secular society.

For people living with HIV, Saint Peter Claver/Nguba Parish has chosen a fundamental Christian option: those who are infected and affected by the virus are not only our brothers and sisters, but also Christians together with us. Being sick, they merit our attention and affection. Every Thursday afternoon when you pray among yourselves, think of us and keep us in your prayers because in our mass we shall be in communion with you. 'Bless Lord, all those who pray for us and sustain us spiritually and materially. Amen.' (*Prayer for the Sick*)

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