

IF WE SO CHOOSE

There was a time when AIDS was in the news most every week—even everyday. Schools and churches held educational seminars. Movie stars and athletes wore red ribbons to build awareness of the issue. Celebrities flocked to charitable events designed to raise funds for treatment and research. The AIDS Quilt was laid out on the Mall in Washington, and then toured the country, moving people with its graphic depictions of the impact AIDS had on those who are sick, and those who stand by them.

But then HIV was discovered to be the cause of AIDS. And effective methods of prevention were identified. And the so-called triple cocktail of drugs to treat AIDS was developed. And here in the United States, fewer people died, and many more lived longer with the infection. All of which was, and is good, very good. But gradually it meant AIDS left the front pages and all but disappeared from television newscasts. And though the pandemic was still largely unchecked in places like sub-Saharan Africa, one could be excused for thinking we'd beaten back the threat, when clearly, we had not.

HIV/AIDS was in the news again this week, it even made the front pages of the *New York Times*. It appears that the methodology for counting folks with HIV, the virus that causes AIDS, has been revised over the past year, and the newest estimates from the United Nations reflect a lowering of the numbers. Instead of the old figure of 39.5 million infected persons, UNAIDS and the World Health Organization now estimate that only 33.2 million people are affected. There are a variety of reasons why, but none of those reasons suggest sudden and dramatic decline in infections. We can only hope that people don't read these latest figures and think the battle is over and victory is at hand! HIV/AIDS remains one of the greatest health threats in the world. Between 2001 and 2007, the total number of people infected with HIV has risen from 29 million to the current 33.2 million. And over this past year 2.1 million died of AIDS related illnesses. (All statistics above www.unaids.org) As Harvard-based HIV expert Daniel Halpern said, "[This statistical adjustment] doesn't mean the epidemic is going away, everything is fine, now forget about it—not at all." (*New York Times*, A-10, 11-20-07) In the war against AIDS the mission has not been accomplished.

Here in the United States, through 2005, the last year reported by the Center for Disease Control, there have been close to one million reported cases of AIDS in the United States. Reported. Many go unreported or unidentified. And today, almost 434 thousand people are living with AIDS. Over 17,000 here in Connecticut. Indeed, in 2005 there were over 42,000 new cases of AIDS reported in the 38 states that make such reports public. (www.cdc.org)

But that is just the tip of the iceberg. Around the world especially in parts of Asia and Africa, the picture is much worse. As Daniel Halpern notes, “There are still about 10 countries in southern Africa that are real nightmares.” (Halpern, *Ibid*) Indeed, in eight of those countries, more than 15% of all adults are infected with HIV, about one in seven. And 76% of all AIDS-related deaths around the world this year have happened in sub-Saharan Africa. Almost unbelievably, 12 million children have been orphaned in that part of the world due to AIDS.

Statistics are important. But they can sometimes leave us a bit numb. As one writer notes: “AIDS statistics are numbers with the tears washed off.” (*Coming to Say Goodbye*) So a story or two to flesh things out.

My friend Dan was a minister who worked with the homeless. He was a real firebrand, constantly reminding those of us in parish ministry of the importance of reaching out in meaningful ways to those less fortunate.

Dan was gay, and in a committed relationship. But his partner strayed, and then, when he returned, brought with him an infection. It was HIV. Dan began to take the necessary drugs to prevent AIDS from developing, but it had taken awhile to identify his condition, and the drugs came a bit too late. He developed full blown AIDS. He began to waste away. His landlord learned about the AIDS and evicted him. It was illegal, and Dan fought it. But his energy was low, and this man who gave homeless souls hope, was on the verge of homelessness himself.

I will never forget a conversation I once had with Dan about his illness. I asked him what the worst part of it all was. A rather impertinent question, but he was a friend, and I wanted to know. “Being lonely,” he said. “You’re sick, and you feel you can’t tell people why. And when you do, so many of them run away.” He was gay. He was sick. Many in his family didn’t want anything to do with him. So too many of his so-called friends and colleagues. Not just cut him off, but also blamed him for being sick.

Dan died not long after we had that conversation. And while it’s probably a bit better today, I still wonder just how many folks feel they need to suffer in silence?

In many cultures, it is far, far worse than here. Taboos against homosexuality, make it socially risky to even be tested for HIV. And even though a large majority of new cases of HIV in Africa are due to heterosexual behavior, the stigma persists. Indeed, 61% of all persons infected in sub-Saharan Africa are women! Polygamy adds to the overall problem, as does the persistent belief in some areas that having intercourse with a virgin will cure the disease.

In Zambia, 16% of adults are HIV positive. Funerals are so common place that coffin building is considered a growth industry.

A Zambian software engineer named Andrew lives with his wife in Ndola. They have four children of their own. But they also care for nine orphans, nieces and nephews whose parents died from AIDS related illnesses. Speaking of the AIDS crisis, Andrew calls it a major disaster. "It is the breadwinners who are dying," he says, "We have a very big problem with the children who are left behind." The ones related to Andrew are being cared for, but not all are so fortunate. What Andrew doesn't say is that many of those children left behind are infected themselves and often undiagnosed. And even when they are, they are unable to procure or afford the necessary drugs to treat their condition. No wonder Andrew calls being a grave digger "the most secure job in Zambia." ("Voices of Hope: stories from communities affected by HIV and AIDS," www.who.int)

In the study guide for a fine documentary called *The Age of AIDS* Kate Ott and Debra Haffner ask a very important question: "Unlike many current tragedies," they write, "AIDS is entirely preventable through education and awareness. The central question . . . is 'Why has humanity failed to stop the spread of AIDS?'" (*The Age of AIDS: A Study Guide for Faith Based Communities*, 2)

I want to suggest our scripture reading from Luke holds the answer to that question. It is one of many healing stories in the gospels. And like some others it is about leprosy.

Leprosy was in many ways the first century equivalent of AIDS. It was believed to be highly contagious, though it is not. It was believed to be sign of immoral behavior, and a divine punishment. Those who had leprosy were forced to live away from others—they were often abandoned by their families and shunned by the religious community. They were believed to be ritually unclean. A leper could not worship. A leper could not work. A leper could not live with his or her family. And absolutely no one was to touch a leper.

But Jesus does not let any of that get in the way. He treats lepers with dignity and respect.

In today's story, a leper takes the brazen step of approaching the healer from Nazareth. Jesus doesn't run away. He stands and listens as the man speaks. "Lord," he says, "if you choose, you can make me clean."

Those standing around must have been shocked. Perhaps they backed away, not wanting to be contaminated themselves. Will Jesus rebuke him? Will Jesus remind of the laws which prohibit any sort of interaction between lepers and those free of the disease?

No. Instead, Jesus reaches out and touches the man. "I do choose," he says. "I do choose to heal you." And the man is cured.

Why has humanity failed to stop the spread of AIDS? Because, in the end, we have not made that choice. We have allowed ourselves to believe all sorts of myths and lies and untruths about the disease and we have failed to do all that we can to eliminate this scourge from our planet.

Bringing an end to HIV/AIDS is not going to be simple. It involves addressing a wide array of cultural and scientific issues. But it can be done. It can most certainly be prevented—and it can most likely be cured. But only when, as individuals, and as a global community, we make that choice.

As parents and concerned adults, we can choose to be honest with our young people about the joys and the risks of sex. We can provide them with real information about sexually transmitted diseases. We can encourage abstinence, and we can provide information about safer sex. We can encourage our schools to do the same. It is better to give a young person a condom than to visit them in the hospital as they waste away from AIDS.

As a congregation we can provide resources and information for all our members. To that end, I encourage you to participate in our sermon dialogue today, and in the course I will be offering early in December. As a congregation we can help our children, youth and adults to develop a sense of self-esteem and self-acceptance that will help them say no to using drugs and engaging in promiscuous sexual behavior. We can make sure that all people feel embraced here. All people. In a survey conducted among persons living with AIDS 60% said they felt unwelcome in their religious communities. We must be a place of refuge for all. And we can do a better job of supporting our friends Willie and Anne Salmond as they work to address the issue in Uganda.

As consumers, we can consider how best to spend our discretionary funds. This past Friday Americans spent \$20 billion on iPods and large screen televisions and toys and other holiday gifts. Think what even a fraction of that could do in the hands of organizations working with AIDS patients.

As investors and people in business we can ask drug manufacturers about their willingness to provide low cost medications for folks in places like Zambia. We can applaud those efforts already underway, and encourage those that need to be.

As taxpayers we can challenge our government to fund scientific research and humanitarian aid.

As members of the world wide community, we can support the efforts of international organizations to address the problem in places where we may have little or no personal influence.

We can choose to end AIDS. It will take a great deal of time, talent and money, but it can be done. But it will never be done unless we so choose. We chose to end smallpox, and it happened. We chose to deal with polio, and it happened. We can choose to end AIDS.

Simon Wainyoke lives in Nairobi, Kenya. He has lost an uncle and three friends to AIDS. He has chosen to work for the end of the disease. He is also speaking out. In a poem, called "AIDS Have You No Mercy" he urges people to pay attention to the dangers of the pandemic. He encourages folks to do what they can to prevent it. "Brothers and sisters," he writes, "friends and relatives . . . Lend me your ears and get this message right/With a broken heart I am asking you/Please, please be faithful to one another . . . " But he is also a realist, and is defying the cultural norms of his community by distributing free condoms. Simon understands, it will take a variety of approaches to end AIDS. But he believes it can be done. "From North and South," he writes, "Women and men/ Let's join hands together/We can defeat AIDS." (www.pbs.org)

And so we can.

We who are followers of Jesus, we who are his hands and feet, his eyes and ears here on earth, we who are the church, the body of Christ, we can lead the way in the fight against AIDS. But only if we follow his example and choose to act.

Humanity can stop the spread of AIDS. If we so choose.

Amen

John H. Danner