

THE GLOBAL AIDS CRISIS: FROM LAMENT TO HOPE

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Text: Matthew 25:37-46

Political leaders long have realized that the recitation of large numbers prompts minds to go fuzzy and to dull the emotional impact or meaning. Thus politicians now speak of billions of dollars, since most of us haven't the slightest clue what a billion is.¹ Thus the Defense Department acknowledging we are spending \$1 billion a week in Iraq simply leaves most Americans unruffled, living their lives as usual.

Likewise talking about the global HIV/AIDS pandemic, and the 42 million people currently infected and the 22 million who have already died, leaves most congregations emotionally inert and spiritually inactive. This may be the worst health crisis facing humanity for 700 years, but basically it is business as usual for most churches, pastors, professors and seminarians.

It has been said that to speak of a million deaths is to utter a statistic, but to tell the story of one death is to share a tragedy. This morning Professor Antonio and I, each in our own way, will share a few stories of individuals, but who represent the escalating and overwhelming suffering and tragedy of God's people throughout the world.

I. "The Least Of These"

The scripture that challenges my soul are the familiar words of Jesus in Matthew 25. Sometimes I joke that all Christians are biblical literalists when it comes to this passage. Scholars might find it of interest to question the authenticity of Jesus' words or to explore the apocalyptic imagery. But I have never met a Christian, be they liberal or fundamentalist, an American, an Africa, or Asian, who didn't believe that to be a faithful follower of Jesus we are called to reach out to the "least of these" and to offer food for the hungry, to give shelter for the homeless, to visit the sick, and share friendship with the stranger. While we often do not live up to this creed, few if any of us would deny these are essential characteristics of those who claim to be Christian.

When faced with the global AIDS crisis, however, the Christian community has clearly fallen short and failed to join the risen Christ in a healing and helping ministry. The New Testament theologian, Dr. Musa W. Dube of Botswana, has challenged us to look at the global AIDS crisis through a paraphrase of Matthew 25:

I was sick with AIDS and you did not visit me. You did not wash my wounds, nor did you give me medicine. I was stigmatized, isolated and rejected because of HIV/AIDS and you did not welcome me. I was

¹ A billion seconds ago it was 1959. A billion minutes ago Jesus was alive. If a billion kids stood one on top of each other, they would make a human tower that would reach beyond the moon. If I would start counting from one right now, it would take me 95 years to get to one billion!

hungry, thirsty and naked, completely dispossessed and you did not give me food, water or any clothing. I was a powerless woman exposed to the high risk of infection and carrying a burden of care, and you did not come to my rescue. I was a dispossessed widow and an orphan and you did not meet my needs. The Lord will say to us ‘Truly, I tell you, as long as you did not do it to one of the least of these members of my family, you did not do it to me.’”²

II. Personal Stories

Let me share a few personal stories, since they reveal the unfolding tragedy of suffering and pain around the world. First, let me tell you about a crowded AIDS hospital in Tambaram, South India, where two years ago I shared Christmas gifts with 800 persons suffering from AIDS. Moving from bed to bed, floor mat to floor mat, we exchanged traditional Indian greetings and gestures.

One young woman, age 23, poignantly asked me, “why is there money for heart transplants, but no money to give me my medicine?” She was speaking for the 30 million people in the world who today need life-sustaining treatment. But only 30,000 are getting it. Though she had no idea about these mind-numbing statistics, she did see the plight of all the women in the ward around her. She, like all the rest of the women, was not only dying, but dying alone—not only didn’t they get treatment, nobody would even visit them.

Secondly, let me report about a visit last February to a Buddhist temple, just north of Bangkok, Thailand. The monks have transformed it into a hospice to care for those who are suffering and dying. They can accommodate 400 persons, but they have a waiting list of 4,000. Again, I spoke to lonely persons, who have been abandoned by their families.

Even death they know will not release them from the bonds of discrimination and stigmatization. They too know their families will never claim their cremated ashes, and they will join the tens of thousands of small white packages of marked cremains and bags of bones that were piled in front of the golden statue of Buddha.

A Dutch Christian volunteer pleaded with me to tell Americans of the need for medicines and medical care. She said, “If you could even send an expired morphine pack that was only 50% effective anymore, it would be 50% more pain relief than any of the women, men and children are now getting.”

A third experience I would share occurred last summer in South Africa, when my wife, Bonnie, and I visited a mental health clinic near three impoverished townships outside of Johannesburg. A Lutheran psychologist told us that 80% of all the people who come for services—be it for depression, abuse, counseling, etc.--also are living with HIV. She said, “Africa is experiencing a genocide from indifference.” The church and government do not care if thousands of Africans die daily and millions yearly.

As she spoke, the piercing cries of a mother and grandmother in the next room penetrated the walls and into our souls. Yet another child had been lost, and the lament crescendoed.

Pastors cannot keep up with the funerals in Southern Africa. Ten to twenty every week. One Methodist pastor reported 47 in one week alone! Do seminary professors and

² Musa W. Dube, International Review of Mission, October, 2002.

classes anywhere teach how to do assembly line funerals or how to provide pastoral care in the face of such ghastly grief?

And how do we respond to the crisis of orphans? Again, the numbers are numbing--14.1 million AIDS related orphans—a number equivalent to all children in the United States five years or younger. Just another statistic in our minds, or are the names of Ashok, Ranjana, Jose, Elizabeth, and other children weighing heavily on our heart?

III. God's Calling

I must limit my sharing of statistics and stories this morning and conclude by sharing what I believe is God's call for mission and ministry. It is a "kairos" moment, as I believe God is calling Christians to move from indifference to involvement, from condemnation to compassion, from apathy to action. We need to discern where God is at work in the world and join in God's healing mission and ministry.

The emerging agenda for advocacy and action--- that I think should be a priority of Christians, congregations, theological schools and denominations includes at least three items.

1. Commit ourselves to being in solidarity with persons living with HIV/AIDS and find ways to be in partnership with them in the struggle to stop the suffering of AIDS.
2. "Put our money where our mouth is." Liberal Christians give lip service to the challenges of global AIDS, but we do very little personally in terms of giving dollars or volunteer hours. Congregations and denominations may pass resolutions, but offer almost no money from their vast budgets.
3. Become advocates for action. A Global AIDS Alliance exists; students are organizing across the country. They are putting pressure on the administration, congress, and presidential candidates. But, "missing in action" are theological school students and professors and most pastors and laity. A new civil rights movement is emerging and most church people are being left behind.

IV. Where Do I See Hope?

In the face of overwhelming statistics and tragic individual stories, there is reason for lamentation. But where do I see hope amid this "global emergency"?

First, I see hope every Sunday when I hug my friend at church, and he reports that medicine is making HIV/AIDS a chronically manageable disease. HIV/AIDS is both preventable and manageable, if we but work toward that end. The "spiral of death" is not inevitable.

Second, I see hope when I hold a baby in Namakkal, India, and know that this child has probably escaped HIV because modern medicine was available to stop the transmission from mother to child. Children of the world can be saved, if we insist that all people in the world get treatment.

Third, I see hope when I meet Christian volunteers in Thailand and South Africa, reaching out to care for the sick and the orphaned. Emerging is a new type of "missionary"—full of life and love, care and compassion.

Fourth, I see hope when I have had opportunities to join hands with Christian health workers singing “We Shall Overcome” in South America, and

Fifth, I see hope when I stood with political social activists in Washington, DC last week and shouted a prayer, “Stop AIDS Now.” “Stop AIDS Now.” “Stop AIDS Now.”

Sixth, I see hope when Christians visit the sick, care for wounded, and reach out in solidarity to all God’s people living and struggling with HIV/AIDS. Then we see Jesus and experience God’s grace.