

Where and When It Hurts Most: The Theology of Hope and Accompaniment in the Context of HIV and Aids in Marriage and Family Life

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Abstract

The reality and effects of HIV and Aids are enormous and devastating, i.e. marriages are broken, the married are widowed and children become orphans. This has direct impact in the church's life in that some of the people infected and affected by the spread of HIV and Aids are members of the global church. In most cases these people are rejected and judged by the church without realising that the church is rejecting its own. Metaphorically speaking the church of God is HIV positive whenever one of its own is positive. The main question that this paper addresses is: what is it to become a church when and where the effects of HIV and Aids shake marriages and families? What should be the response of the church in the light of the scourge that she faces? This paper proposes a theology of hope and accompaniment that seeks to stand in solidarity with those infected and affected by HIV and Aids thereby providing them with hope that enables them deal with the present as they wait eagerly for the future.

Keywords

people living with HIV and Aids, church in Africa, marriage life

Introduction

We live in a generation of HIV and Aids. An estimated 38.6 million people worldwide were living with HIV in 2005. An estimated 4.1 million became newly infected with HIV and an estimated 2.8 million lost their lives.¹ Indeed,

¹ UNAIDS, *Report on the global AIDS pandemic*, May 2006, 6.

we live in the world full of pain and death. The 2.1 million Aids related deaths in sub-Saharan Africa represented 72% of global Aids deaths. HIV and Aids pandemic is a growing threat to world population. It has become one of the most destructive plagues in history.² Recorded reports indicate that, whilst HIV and Aids is a global disease, the pandemic is overwhelmingly concentrated in sub-Saharan Africa. Sub-Saharan Africa continues to bear the brunt of the global epidemic with almost 25 million HIV-infected individuals; 72% of all Aids-related deaths in 2006 occurred in the region.³ Women and children constitute the majority of people living with the virus. Women are increasingly becoming the face of HIV, accounting for about half of all HIV infections globally and 57 percent infections in sub-Saharan Africa.⁴

The reality and effects of HIV and Aids pandemic in this generation are enormous and devastating. There is a vast increase in numbers of people who are falling sick, suffering physically, emotionally and spiritually — many in abandonment and desolation because of HIV and Aids. The effects of HIV and Aids are massive in terms of the hurts and suffering experienced by people infected and affected. According to the study document of the World Council of Churches published in 2002, the effects of HIV and Aids are impoverishing people, breaking hearts, violating their human rights and wreaking havoc on their bodies and spirits.⁵ The effects of the spread of HIV and Aids have also touched the core of every society and church — marriage and family. There are so many broken marriages and family relations, widows, and orphans in the world today than in any other time in human history as a result of the spread of HIV and Aids. It is therefore the objective of this paper to uncover the hurts in marriage and family as a result of the spread and effects of HIV and Aids, but also to propose in a practical way how the church in mission can function in such a context. What is it to become a church in the context of HIV and Aids pandemic? The sad thing about the whole situation is that people infected and affected by HIV and Aids frequently face pronounced shame, stigma and discrimination by their families, communities and the church. It is no wonder why there are so many crying voices in the theological arena demanding for

² A.C. Van Dyk, *HIV/AIDS Care and Counselling: A Multidisciplinary Approach*, Great Britain: Pearson Education 2005, 3.

³ UNAIDS/WHO, *AIDS Epidemic Update Fact Sheet*, December 2006, 1.

⁴ K. Krisberg, 'HIV AND AIDS Pandemic a Growing Threat to World Population', *Nation's Health* 34/7 (2004), 11.

⁵ WCC, *Facing Aids: The Challenge, the Churches' Response. A WCC Study Document*. Geneva: WCC Publications 2002, 7.

justice on behalf of those infected and affected by the scourge. It is becoming clearer that you cannot do theology in such a time as this without attending to HIV and Aids pandemic. Isabel Phiri noted among others that there is no doubt that HIV and Aids is also an urgent issue for theology of mission in Africa and the rest of the world.⁶ In her research, she concluded that the church needs a theology of hope, but did not expand further as to how that can be applied in real context. The need for a theology of hope also appears in the works of many African theologians including Samuel Kobia,⁷ Njongonkulu Ndungane,⁸ Musa Dube and Musimbi Kanyoro⁹ just to mention a few. This paper seeks to expand more on the theology of hope by adding an element of accompaniment, hence the words 'theology of hope and accompaniment' in the title. Although Archbishop Njongonkulu Ndungane does not use the word 'accompaniment', his words come close in describing what is considered in this paper as a theology of hope and accompaniment:

I have hope and I have the conviction that the faith community can make a difference in the lives of those living with and dying from HIV and AIDS. I am committed to the principle that no one shall die alone, but more importantly no one should care alone. We need each other. We need our communities. We need our families. We need our friends and loved one. We need all of them to help alleviate the suffering in this, the greatest human tragedy in history. God will give us the strength to do this.¹⁰

Where It hurts Most: HIV and Aids in Marriage and Family

Whenever and wherever HIV and Aids strikes the consequences are devastating and unbearable. The pandemic reveals tragic consequences of personal actions that directly harm others, and of negligence that opens persons to additional risk. Those infected and affected undergo enormous pain and suffering. The reality of HIV and Aids pandemic and its aftermath in marriage and family contexts is perhaps summed up in the following words of Mrs Getrude Cele who depicts HIV and Aids as the 'new terrorist':

⁶ I.A. Phiri, 'HIV/AIDS: An African Theological Response in Mission', *Ecumenical Review* 56/4 (2004) 426.

⁷ S. Kobia, *The Courage to Hope: The Roots for a New Vision and the Calling in Africa*, Geneva: WCC Publications 2003.

⁸ N. Ndungane, *A World with a Human Face: A Voice from Africa*, Geneva: WCC Publications 2003.

⁹ M.W. Dube & M.R.A. Kanyoro (eds.), *Grant Me Justice!: HIV and AIDS & Gender Readings of the Bible*. Pietermaritzburg: Cluster Publications 2004.

¹⁰ Ndungane, 62.

Today I am facing my last son and my daughter-in-law dying because of HIV and AIDS. Since 2000 I have buried 6 of my children, including a grandchild. I am facing a war which is not easy to fight. Today I am suffering, hungry and alone. Even my neighbours are tired of this family who is burying people so often. I miss my children so much: they used to care for me and love me. They were the source of my joy and happiness, and they used to support us.¹¹

This story is one in many stories in Africa that indicates how marriages and families are affected by the spread of HIV and Aids. HIV and Aids has unfortunately become one of the harsh realities that our present generation is faced with. The spread is so rife that the UNAIDS research indicates that more than 49 million people in the whole world will be infected by this virus by 2010. In the case of South Africa, a research study from the Medical Research Council of South Africa showed that information gathered from death certificates suggest that already half of all adult deaths can be attributed to Aids and related diseases. It is however an unfortunate situation that women and children are the most vulnerable and the ones who suffer most from this calamity. I would like to expand more on the pain caused by HIV and Aids in marriage and family.

Risky Heterosexual Sex

The primary means of the spread of HIV and Aids in sub-Saharan Africa is risky heterosexual sex.¹² Infidelity in marriage is one of the reasons why many couples involved in heterosexual and monogamous marriages contract the virus. In fact some people are beginning to lose faith in the institution of marriage because of the high rate of infection of people in heterosexual and monogamous marriages. The same goes with the church's teaching about abstinence as a preventive measure. The following words by Krisberg Kim captures the spirit of this growing trend:

ABC offers no hope for women who have no control over their reproductive life and little legal status in comparison to men. Abstinence is meaningless to women who are coerced into sex. Faithfulness offers little protection to wives whose husbands have several (multiple) partners or were infected before marriage. And condoms require the cooperation of men.¹³

¹¹ D. Gennrich (ed.), *The Church in an HIV + World: A Practical Handbook*. Pietermaritzburg: Cluster Publications 2004, 101.

¹² F.P. Hosken, 'The Status of Women and HIV and AIDS in Africa'. Women's International News, 27/3 (2001), 1.

¹³ Krisberg, 11.

Stories of those infected with the virus within marriage context reveal that:

- It is painful to find out that your partner has been cheating on you whilst you remained faithful to your marriage vows. The majority of women in Africa only discover the facts about their status when they are pregnant or after the death of their husbands. In the case of the later they are even exposed to massive abuse and accusation on the side of the family to have bewitched their deceased husbands;
- It is painful to be accused of having brought the virus home whilst in actual fact your partner is the guilty party. In most cases men refuse to go for the test and even forbid their partners who already know of their status to divulge such information to the public. In some instances men become violent and abusive towards their infected partners. This has rendered the majority of women more vulnerable because they cannot access support from support groups and other institutions, like churches, providing help to people living with HIV and Aids. In this case infected women who are denied the right to come open with their status are also denied the opportunity to access treatment. It hurts to know that you are dying without access to the antiretroviral that can prolong your life because a person who infected you is denying access to them.

Stigmatisation

Many people who contract HIV within their marriages are always afraid to declare their status to the public because of the problem stigmatisation in our societies. There are deep-rooted stereotypes and stigma towards people living with the virus. The stigma attached to HIV and Aids is based on the assumption that people who are living with the virus are infected because of their immoral sexual behaviours or immoral lifestyle. The most popular one has to do with Aids being regarded as a 'homosexual disease' and to a lesser extent a problem for intravenous drug users, another socially disvalued group.¹⁴ These deep-rooted stereotypes and stigma towards people infected and affected by HIV and Aids have crippled the ability to respond to its spread and effects meaningfully. This has hampered the opportunity for the human race to unite against the common enemy. Many people have died lonely as a result of stigmatisation within their families and society. They died without anybody to

¹⁴ E.E. Shelp, & R.H. Sunderland, *Aids and the Church*, Philadelphia: The Westminster Press 1987, 1.

comfort and give them strength to face the inevitable. These deep-rooted stereotypes and stigma leads to:

- *Societal rejection.* It hurts to know that your own people are rejecting you because of your ill-health condition. It is even worse when you are branded as an immoral person whilst you have been infected by your unfaithful partner.
- *Discrimination.* Societal rejection to people living with HIV leads to discrimination. People start to gossip and avoid contact with you. People also start to avoid using same utensils that you use. The story of Betty Strauss says it all.¹⁵ She was diagnosed HIV-positive in November 1998, soon after the death of her husband. People in her community started avoiding her and did not want her anywhere near their children. She could not find the job and she became a desperate person because of the discrimination she suffered at the hands of her own people. Betty's story is one of the harsh realities that remind us that discrimination against people living with HIV and Aids unfortunately occurs in all societies and communities. It has become in a sense one of the major obstacles for every community to deal with the spread and effects of HIV openly. The more this trend develops and gain momentum, the more our societies remain vulnerable to the spread of HIV. According to WCC resistance to discrimination against people affected by HIV should be integrated in our prevention programmes.¹⁶ This is supported by Byamugisha who noted that the destigmatisation of HIV and Aids and the acceptance of people living with HIV are essential preconditions for preventing further spread of the pandemic.¹⁷
- *Family rejection.* People living with HIV also experience the pain of family rejection. It hurts to be rejected by your own family, but it is one of those harsh realities that people infected by the virus have to face. In most cases families tend to reject their own because they do not want to be branded as immoral people by being associated with their ailing siblings. Family rejection leads to despair on the side of a person who is infected by HIV.
- *Rejection by the church.* According to Byamugisha HIV-related stigma and the rejection of people with HIV are rooted in the judgemental attitudes and inhibitions about sexuality which are prevalent in many churches and

¹⁵ G. Byamugisha et al., *Journeys of Faith: Church-Based Responses to HIV and AIDS in Three Southern African Countries*, Pietermaritzburg: Cluster Publications 2002, 18.

¹⁶ WCC, *Facing Aids*, 58.

¹⁷ Byamugisha, 100.

other faith-based organisations. The story of Betty Strauss further enhances this truth claim. She wanted to share her pain with her church but her pastor could not allow her to do so. Betty's pastor and church elders did not bother to pay her house-visitations to provide counselling for her. She felt that no-one from her church wanted anything to do with her. She was lonely and growing in despair.¹⁸

Unfortunately Betty's story represents many such stories of people who are being rejected by the church. The church becomes too judgemental to its members leaving with HIV and Aids and forgets that when one of its members is positive it also implies that the church as a whole is also HIV positive. In this case we might conclude that the church is failing in its calling to be a loving family of God willing to associate with those in pain and sufferings as much as it does with those in happiness.

Poverty and Unemployment

There is a strong case for the relationship between poverty and the spread of HIV and Aids. There are so many cases in Africa of women who are forced to become sex workers because of poverty. The painful thing about the whole thing is that those who know their status and are willing to be open about it when seeking for a new job are discriminated against. It is not easy to find a job if you are HIV positive. Consequently most of the people living with the virus are not able to provide for themselves and their families. The worst part of everything is that you need healthy nutrition for you to be able to take antiretroviral medication. It is also hurting if you have children and you are unable to put food on their table because you are discriminated against as a person living with HIV. Betty Strauss experienced the same pain.¹⁹

A Generation of Orphans

Orphans are the most tragic and long-term legacy of the HIV and Aids pandemic. Of the more than 13.2 million Aids orphans worldwide, over 90% are in Sub-Saharan Africa. There is a growing trend of child-headed households as a result of HIV and Aids pandemic.²⁰ One of the most hurting things when a couple is dying of HIV and Aids is the thought of leaving your children

¹⁸ Byamugisha, 100.

¹⁹ Byamugisha, 18.

²⁰ Gennrich, 9.

behind, as orphans with no one to fend for them. The most recent statistics of UNICEF about the impact of HIV and Aids on children reveals that South Africa has the largest number of orphans because of the loss of parents to the scourge of Aids.

A Generation of Child-Headed Families

One of the harsh realities in marriage is to see many children losing both parents to Aids. In South Africa, due to this growing trend, we are being confronted with a new type of family — the child-headed family. It hurts to see how traumatic it is for children to lose their parents to Aids, especially to children who are left to fend for themselves and also to take care of their siblings. There are many child-headed families in South Africa because of this pandemic. In this case it hurts to know that there are just too many children who do not have the experience and luxury of growing up with a father or mother figure in their households.

When It Hurts Most: The Theology of Hope and Accompaniment

The main question here is how does the church respond to pain and hurting people as a result of the spread and effects of HIV and Aids in marriage and family life. It is my thesis of this paper that the church should provide those infected and affected with the theology of hope and accompaniment. In outlining this type of theology, we pay attention to three aspects, namely: the meaning of theology of hope and accompaniment, the Biblical principles of the theology of hope and accompaniment, and its implications to people infected and affected by HIV and Aids in marriage and family life.

Towards a Working Definition

According to S.M. Smith the theology of hope emerged as a new approach to theology in the 1960s.²¹ Its leading proponent was a German theologian Jürgen Moltmann who believed that God's promise to act in the future is more important than the fact that he has acted in the past. He called upon the Christian community not to withdraw from the public life, but to actively participate in the world in order to aid in the coming of the better world. The

²¹ S.M. Smith, 'Theology of hope', in: Walter A. Elwell, *Evangelical Dictionary of Theology*, Grand Rapids: Baker Book House Company 1997 .

Christian is to be seen as a 'hoper' who is impatient with evil and death in this present age. This theology has had much influence and impact in the Third World churches. As already noted above, many African theologians have called for the theology of hope in the face of HIV and Aids. In this paper the element of accompaniment is introduced. The concept accompaniment in theology has received much attention with the publication of the book *Caminemos Con Jesus: Toward a Hispanic / Latino Theology of Accompaniment* by Roberto Goizueto. I believe that the concepts hope and accompaniment belong together in the church's effort to deal with the spread of HIV and Aids and its effect in marriage and family life.

Theology of hope and accompaniment is defined in this paper as a theology which seeks to affirm life of God's people in the midst of suffering and death based on the resurrection power of Jesus, who did not only identified with God's people in their shame but also accompanied them in their journey of life in pain and suffering until he hanged shamefully for them on the cross, buried and resurrected thereby affirming life for those who identify themselves with him.

The Biblical Basis of the Theology of Hope and Accompaniment

First and foremost, theology of hope and accompaniment is based in the person and ministry of Christ on earth. He became our Immanuel (God with us) when he humbled himself and identified himself with the fallen humanity in their shame. His ministry was characterized by mercy and compassion, such that he also accompanied them in their journey of pain and suffering until he paid for their debts by hanging shamefully on the cross (Philippians 2:5-11).

Secondly, theology of hope and accompaniment is grounded in the resurrection power of Jesus Christ. The Christian faith acknowledges that God approved the sacrificial death of Christ on the cross by resurrecting him from the dead, thereby making him the first born of those who will rise from the dead. Christians now live anticipating the better future.

Thirdly, theology of hope and accompaniment has implications for the here and now. It gives the church strength to holdfast to faith in the midst of trouble. The militant church keeps on striving in the midst of all tribulation hoping for the better future, a future where it will become victorious when the earth and heavens and all of the redeemed humanity are restored (Revelation 21; Revelation 7).

Fourth, theology of hope and accompaniment does not encourage the spirit of withdrawing from the world and its problems. On the contrary, it encourages Christians to participate in a meaningful way in the fight against evil and suffering in this world. This encourages the church, out of compassion and

mercy, to identify and accompany those in pain in their journey in life. In his model of healing, James comes very close in outlining the theology of hope and accompaniment as a kind of theology needed most in this world with severe pain and sufferings (James 4:13-18).

Practical Implications

Theology of hope and accompaniment has practical implications for the manner in which the church should respond to the spread and effects of HIV and Aids in marriage and family life, and the following can be mentioned:

Theology of hope and accompaniment teaches the church to rediscover the concept of being 'one big family' in the face of HIV and Aids in the world. It reminds us that the church should identify with those members who are infected and affected by HIV and Aids in their marriages and families. In this case the church must follow the footprints of Jesus Christ by exercising compassion and mercy to those who are experiencing pain as a result of the spread and effects of HIV and Aids. Indeed if one member suffers all suffer together (1 Corinthians 12:26).²² In this way the global church, without pointing a finger at HIV and Aids as an African problem, will join the brothers in the developing countries in the fight against the scourge.

Theology of hope and accompaniment teaches the church to accompany those who are infected and affected by the scourge. In other words it affirms life here and now as we are waiting for the better future — a generation without Aids. In this way the church becomes a healing, inclusive and accompanying community which does not discriminate against its own members who are infected and affected by HIV and Aids in their marriages and families.

The healing model of James 4:13-18 encourages the church to adopt a holistic approach in dealing with pain and suffering, HIV and Aids included. In the process of identifying and accompanying those infected and affected, the church will now learn to listen to the stories of those suffering. They will not only listen, but also learn how to be compassionate and merciful. The elements of love, grace, forgiveness, reconciliation, restoration, perseverance and hope in the midst of all pains in the face of HIV and Aids in marriage and family will encompass their ministry. In this case theology of hope and accompaniment will go hand in hand with practical care, improving people's quality of life, so that they are not left just to look forward to life after death.

²² A. Van Wyngaard, 'Towards a Theology of HIV AND AIDS', *REC Focus* 6/1 & 2 (2006), 51-75.

Theology of hope and accompaniment therefore seeks to affirm life in this present age whilst at the same time hoping for a better future. In this case the church in Africa and the rest of the world will accelerate all that they are doing in terms of advocacy, awareness campaigns, support groups, care giving, and counseling in the face of HIV and Aids in marriage and family. Where there are no delivery points for the antiretroviral drugs to prolong life to those infected, the church should be seen opening its doors to provide its facilities and manpower for that just cause. The notion of carrying each other's burden will manifest itself in this way.

Contrary to the judgmental approach, that always seeks to associate HIV and Aids with immorality and God's punishment, theology of hope and accompaniment reminds us that suffering and hardship in this life is not the sign of being rejected by God. The vision in Revelation 7:9-17 reminds the church that those who are gathered before the throne of God in the end of times are people who are coming out of the great tribulation, but they are said to be standing before the throne receiving comfort from God because they identified themselves with Christ in the midst of their tribulation. The message about the cross and the resurrection of Jesus Christ from the dead is therefore not an embarrassment to the church, but a message of hope which affirms life in this present age and the age to come where we look forward to a perfect generation without Aids and death. Hope and redemption go together in this case.

Theology of hope teaches us that we should put our energy in revitalizing the much-demonized institution of marriage and family in this world. I do not think there is anything wrong with the teaching of the church about abstinence among the youth and faithfulness to your partner in a heterosexual monogamous relationship. We need to look at changing the attitudes and behaviors of people when coming to human sexuality, violence, abuse and marginalization of women in marriage, family, church and society. Theology of hope and accompaniment is therefore about transformation of life — thinking, attitudes and behaviors. I therefore agree with Njongonkulu Ndungane that we must develop new respect for the ancient wisdom of the church about monogamy as being crucial for our survival. We must acknowledge that the church's traditional teaching of fidelity is about life, not limitation.²³ The church is called to play a critical role in shaping and modeling the moral values of our society. In this case it will seek ways and methods of encouraging

²³ Ndungane, 61.

humanity to speak openly about issues of human sexuality, pain and deaths caused by HIV and Aids in marriage and family life. Issues of safe sex, gender equalities, love, respect for life, compassion, moral values, sexual behaviors, caring, and transformation will constitute part of the vocabulary used as part of the discussion about HIV and AIDS in marriage and family life.

Conclusion

The angel of death has visited us again. We live in the generation of HIV and Aids. We are all tired of the massive spread and effects of HIV and Aids. Africans are just like the rest of the world, we are living with and dying from HIV and Aids. There are just too many deaths — we all look helpless and hopeless. It was my intention with this paper to reiterate what other theologians have been calling for, 'theology of hope' with an addition of an element of 'accompaniment'. My thesis is that as we deal with the pain and suffering in marriage and family as a result of the spread of HIV and Aids, hope and accompaniment belongs together. The church should identify and accompany those infected and affected by HIV and Aids in their journey of life, providing them with hope for a better world — a world free of pain and suffering. Indeed, I hope and long for a world without HIV and Aids. I hope and long for an everlasting marriage — that of the lamb and his bride (the church). I hope and long for one family of God — without stigmatization and discrimination. Everybody has the right to dream and hope for this better future — let us give them that opportunity.