Chapter 5

AIDS Ministry

INTRODUCTION

Extensive worldwide proliferation of HIV/AIDS started in the 1980s. In less than three decades during the first of which it was unknown and unsuspected, HIV became the first modern epidemic. Today, there are signs that the pandemic of HIV/AIDS may soon go out of control. We have noticed that HIV/AIDS has been spreading quite rapidly into areas and communities previously spared by the pandemic. And now within each affected community, the epidemic evolves and has been once more complicated with time. As the twenty first century has begun, AIDS has tightened its unyielding grip on Africa. About three million deaths due to AIDS have already occurred in Africa. At present, India has about 3.86 million HIV positive people and about 10,000 full-blown AIDS cases. According to the UNAIDS, by the year 2005 India will have 25 million HIV positive people and of these 6,000 will die, 3,000 will be widowed, and 12,000 will be orphaned daily! This is a
very grim situation. It appears that HIV and AIDS will be a part of the world's vocabulary and a crisis of varying magnitude into the twenty first century.\textsuperscript{169}

In this chapter we deal with the pastoral approach of the Church towards the people affected by HIV/AIDS and highlight the ministry of the Church. AIDS patients belong to any religion or culture. In Christian compassion there is space for all the affected. When we meet them, we meet Jesus Himself.\textsuperscript{170} 'The Church needs to respond to the pandemic in collaboration with all peoples of good will and in her ministry to draw upon her rich human, spiritual and sacramental resources. In India the Church should be prepared to follow this challenge in the healing ministry with liberated attitudes of faith and humanity.\textsuperscript{171}

\section*{5.1 Initial Biased Response of the Laity to HIV/AIDS}

Prevention of the spread of HIV infection is a major task for all health care workers and agencies. At the same time we cannot neglect the care of AIDS patients. 'The quality of care should not be vitiated by judgmental attitudes about the personal causes of the infection. It needs to be filled with

\textsuperscript{170} Holy Bible, Mt 25:31-46, Theological Publications in India, Bangalore, 1999
\textsuperscript{171} In \textit{Vidyajyothi}, a Journal of Theological Reflection, vol. 65, No. 8, August 2001, p. 564
humanity and compassion. That the HIV infection is a judgment of God is a facile pseudo-theology that has no place in the care and ministry of AIDS patients…’172 Our response to the sufferings of the AIDS victims should not be biased and conditional. Our response should be rather in line with Jesus’ unconditional compassion for the sick, the suffering and the poor. Some people are normally biased against those who suffer bodily ailments. In America, in the 18th century Cholera was viewed as a consequence of sin, an inevitable and inescapable judgment of God upon people who violated God’s laws. Cholera was not seen as a public health problem; it was an indication of God’s displeasure with the people who contracted the disease.173

In the same way in America, it was understood that sexually transmitted diseases were divine punishment upon persons who willfully broke the code of sexual relationship.174 Here God is perceived not as a Father, but as a harsh dispenser of justice through punishment! AIDS was initially described as ‘gay disease’. Some even considered it appropriate punishment for men who violated natural law. Thus AIDS, perhaps the ultimate

172 Ibid, p. 563
174 EARL E. SHELP&RONALD H.SUNDERLAND, AIDS and the Church- the Second Decade, John Knox Press, Louisville, Kentucky, 1992, p.18
venereal disease, is portrayed as a disease of sinners, an indication of moral decay.\textsuperscript{175}

\textbf{5.1.1 Opinions of Some Leaders}

The NBC science correspondent J. Robert Bazell said that AIDS was a story that could not be told when it first appeared, because, it was seen as a gay story.\textsuperscript{176} Public disregard for gay men took the form of indifference to a major emerging threat to public health. The fear of the epidemic was so enormous, that people with AIDS were fired from their jobs, evicted from their apartments, denied medical insurance payments, deserted by friends and abandoned by family members. Even funeral directors refused to handle the bodies of the AIDS victims. Louie Welch, a former mayor of Houston, Texas announced a four-point plan to control AIDS, one of which was to 'shoot the queers'!\textsuperscript{177} Jerry Falwell speculated that AIDS could be God's judgment on homosexual persons and society. His disbanded political organization, \textit{Moral Majority}, opposed government-funded research to find a cure for what it considered a 'gay problem'.\textsuperscript{178}

\textsuperscript{175} Ibid, p.19
\textsuperscript{177} In, \textit{U.S. News and World Report 99}, November 4, 1985, p.9
There have been also condemning as well as compassionate religious views. Eileen Flynn called Catholics to stand united with solidarity, and care for people with AIDS. Bishop William E. Swing, Episcopal Diocese of California, has commented that God the Father has compassion upon His, people. Rather than hurling wrath when, dealing with an adulteress, Jesus said, ‘whoever is without sin, cast the first stone....’ Thus he opines that Jesus does not become displeased, nor shows his anger.

Similarly Archbishop John R. Quinn, Roman Catholic Archdiocese of San Francisco and Cardinal John J. O. Connor, Roman Catholic Archdiocese of New York have called upon the faithful, ‘to do their best to minister to every person who is ill, of whatever disorder, because our commitment to the belief that every person is made in the Image and Likeness of God’. This call has well been welcomed by the faithful of these dioceses and there has been a fury of activity in this regard.

5.2 AIDS AND THE WRATH OF GOD

Is AIDS the wrath of God? This is a difficult question to answer. The Church has been consistent with the historic

179 EILEEN P. FLYNN, AIDS: A Catholic Call for Compassion, Sheed and Ward, Kansas City, 1985, quoted in AIDS and the Church, p. 24
181 Ibid, p.25
teachings over sexual behavior for over 2000 Years. The question before us now is how a traditional Christian view on morality can be equated with God’s call to love. Many clergymen declared in the mid nineties that AIDS was God’s plague on homosexuals—obviously as it only appeared to affect them.\textsuperscript{182}

Some years ago, a Catholic professor of philosophy in the US said at an International Conference that, ‘The gay community was the originator of AIDS troubles in America’. He further said that gay men should accept AIDS as ‘just punishment for their disgusting sins’.\textsuperscript{183} Such type of attitude is not confined only to the Western nations. In Uganda it was reported on state radio that a goat speaking in a loud voice, had prophesized that the AIDS epidemic was a divine punishment for mankind’s wickedness in not obeying the \textit{Ten Commandments}, and predicted a terrible famine. It terrified the local villagers and died shortly afterwards.\textsuperscript{184}

Such attitudes may be fuelled by a distorted perception of sexual sin; this distortion may be part of our culture, rather than derived from the teachings of Jesus. The Catholic Church in keeping with the mind of Jesus Christ has been encouraging compassionate, unconditional care, with self-control, chastity

\begin{flushright}
\begin{itemize}
\item \textsuperscript{182} \textit{Holy Bible}, Rom 1:26-27, there are those who quote this to argue that certain sexual sins are particularly abhorrent to God, Theological Publications in India, Bangalore, 1999
\item \textsuperscript{183} \textit{In, Ottawa Citizen}, May 3, 1992, p. A9
\item \textsuperscript{184} \textit{In Daily Telegraph}, June 3, 1992, p.12
\end{itemize}
\end{flushright}
and faithfulness. The Pope himself has restated the official Catholic position on AIDS.\textsuperscript{185} In fact many are still dismayed at Vatican suggestions that even married couples, where one is infected should not be allowed to use condoms. In the incident of the women caught in Adultery, Jesus showed the unconditional compassionate love. In this incident men had caught a man and a woman making love. One of them was married to someone else. They let off the man and judged the woman! They displayed double standards: their own they excused, the other they condemned. As far as they were concerned, they were expressing the natural wrath and displeasure of God, but Jesus rejected their whole attitude. He stood for forgiveness, compassion and love. The Church should work with this attitude to alleviate the sufferings of AIDS victims.

5.3 \textbf{RESPONSE OF CHRISTIAN DENOMINATIONS}

As the epidemic of AIDS started to take its toll, various Christian denominations adopted resolutions and issued statements with regard to the Church's witness in the face of the AIDS crisis. It was not a time to ponder over whether AIDS was God's wrath and punishment to the sexual sinners, but a time to all the christens to come together and evolve ways and means to fight the epidemic tooth and nail! Here below are

enumerated the pastoral responses of various denominations to the AIDS problem. This shows the interest of Christians to minister to the victims of AIDS.

5.3.1 Response of the United Church of Christ

It was in June 1983 the United Church of Christ adopted the first resolution in its Fourteenth General Synod. The resolution took into account the slow and meager response of the government towards the epidemic. The resolution said that AIDS, 'constitutes a threat to the health of all Americans and to the entire human population worldwide. Through this resolution, the United Church of Christ further declared, in part, 'its compassionate concern and support for all who are victims of AIDS and the 'opportunistic diseases' it facilitates infecting their lovers, spouses, families and friends. Finally the resolution called upon various agencies of government to increase their efforts in combating AIDS' devastating effects.'

5.3.2 Response of the Episcopal Church

The Episcopal Church had set up a Commission for Human Affairs and Health in the beginning of 1988. At the end

---

of the year the 69th General Convention received a report on AIDS from this Commission. On the receipt of this report the Episcopal Church at its convention adopted numerous resolutions calling for AIDS educational programs in every congregation and establishing an annual day of prayer and healing. Bishop William E. Serving of the Episcopal congregation and bishop of California has commented in these words: 'Jesus Christ, rather than hurling wrath when dealing with an adulteress, said, 'Whoever is without sin, cast the first stone…' Thus I do not believe in the God Who becomes displeased and decides to show his anger by murdering large numbers of people…'

5.3.3 RESPONSE OF THE UNITED METHODIST CHURCH

The General Conference of the United Methodist Church too adopted a comprehensive statement on HIV/AIDS in May 1988. The General Conference declared, 'It is not helpful to speak of diseases in inflammatory terms like 'wrath of God', or 'punishment for sin'. The Church accepted its tardy response to the epidemic and exhorted the existing AIDS ministries, such as care and education. It resolved that congregations should be open to and caring of people touched by HIV/AIDS, work for people with HIV/AIDS and develop specialized AIDS

187 J. GORDON MELTON, Episcopal Church, Additional Resolutions on AIDS, 1988, p.79
188 Quoted in, AIDS and the Church - the Second Decade, John Knox Press, Louisville, Kentucky, 1992, p.24
ministries, advocate the civil rights of adults and children with HIV infection and encourage global cooperation in battling the epidemic.

**5.3.4 Response of the Presbyterian Church**

The Presbyterian Church of the USA had its General Assembly sitting in 1986. The General Assembly passed a resolution acknowledging that, 'certain leaders of the Christian Denominations and groups' and 'certain persons seeking or holding political office or public position', were exploiting public fear and private suffering for individual advantage. This 198th General Assembly declared that AIDS, 'Is not punishment for behavior deemed immoral,' and called on Congregations to nonjudgmental ministry, urged increased funding for research and asked for legislation protecting civil rights of infected people. The General Assembly also called for, 'accurate, current AIDS information to diffuse the unfounded fears created by ignorance or false public information'.

**5.3.5 Response of the Southern Baptist Church**

The resolution adopted by the Southern Baptist Convention differed in many important ways from the statements by other large protestant denominations. The

---

189 MELTON, 'Presbyterian Church (USA): Resolution on Acquired Immune Deficiency Syndrome', 1986, pp.122-125
General Assembly took place in 1987. The resolution urges medical, legal, educational and public officials to give greater attentions to biblical standards of decency and morality’. About HIV/AIDS, the resolution states that ‘safe sex’ education that promotes the use of condoms, ‘seems to accept infidelity and adultery, as well as perversion, as an accepted fact of our American way of life. The convention further called for ‘Christ like compassion in dealing with the hurting victims of AIDS and their families’.  

5.3.6 RESPONSE OF THE GREEK ORTHODOX ARCHDIOCESE OF NORTH AND SOUTH AMERICA

The Archdiocese published a pamphlet in 1988 titled, ‘AIDS and You’. It echoed the prevention approach favored by the southern Baptist Convention (1987). The documents state that the Church has proclaimed her message loud and clear: abstention and monogamous relationships should be the motto promoted by both the medical community and the government. Young people...should be taught that abstention from pre-marital sex is the only way to combat the disease’. The document opposes the use of condoms to reduce the risk of HIV infection and says that this is a ‘band-aid approach’. The promotion of contraceptives distorts the values of mutual

respect, of wanting what is best for someone else, by camouflage as love what is often really exploitation'.

5.3.7 RESPONSE OF THE EVANGELICAL LUTHERAN CHURCH IN AMERICA

The Church Council of this Congregation approved a statement in 1988 and spoke about HIV/AIDS crisis in general terms, steering away from a single focus on sexual routes of transmission. The statement notes in response to disease, Church members are called to remember their common humanity and are summoned to, ‘compassion for, acceptance of and service with people affected by AIDS both within and outside our congregation’. Further the Lutherans are urged to be educated and anticipate in the complex public policy debates surrounding the disease.

These are some of the important views and official statements issued by the various Christian denominations. In all the statements and resolutions we see some common points: they stress on love and service and they are nonjudgmental about the HIV/AIDS people. In the following pages we shall study the Catholic answers and response to the dreaded

---

191 MELTON, ‘Greek Orthodox Archdiocese of North and South America': AIDS and You, 1988, pp 87-88
192 MELTON, Evangelical Lutheran Church in America: AIDS and the Church's Ministry of Caring, 1988, pp 86-87
epidemic and the way to minister to the AIDS victims. Of course there may not be clear-cut answers to all the problems the society faces. But we can make a try. Isn’t it?

5.4 HIV/AIDS CONSCIOUSNESS IN THE CHURCH

Patricia Hoffmann in her book, 'AIDS and the sleeping Church, says, ‘... for the most part the Church has been caught sleeping while Christ has returned in the guise of a person with AIDS. The Church has resisted praying with them in their personal Gethsemanes, to visit them during their illnesses.’

This view however should not be hastily over generalized.

‘Keep awake therefore, for you do not know on what day your Lord is coming’, thus Jesus had warned His Apostles. Jesus wanted His disciples not to be caught unaware by His return. Thus Jesus enjoined on His disciples while he suffered agony in the garden of Gethsemane that they should keep awake. It is the opinion of Patricia Hoffmann that the Church was not doing enough to care for the people of HIV/AIDS. Overcoming a phobia about leprosy, St. Francis of Assisi hugged a leper and later realized it was Christ Himself in disguise!’

Mother Theresa has recognized a leper as “Christ

---

194 Holy Bible, Mt 24:42, Theological Publications in India, Bangalore, 1999
in a distressing disguise". Hoffman feels that people with AIDS were treated as the lepers of our time: unvisited, unrecognized and unhugged by many Christians. The disciples of Christ must be alert to human needs, refusing to abandon those agonizing to themselves. Each must help his sister or brother to discern God’s will in their respective life situations. In this way we shall discern God’s will for our own lives too.\textsuperscript{196}

Patricia Hoffmann has tried throughout her life to awaken the sleeping Church to all kinds of human need. The Church needs to be alert to the need of serving individuals and families with AIDS and ensuring personal fulfillment. Providing pastoral care to the HIV/AIDS patients and especially to the terminally ill people with AIDS is a unique ministry. Pastoral care should not end with words of love, compassion, encouragement and sympathy. Words must turn into deeds that assist through all the possible means at all possible levels.

5.4.1 \textbf{Response of the Catholic Church}

The epidemic AIDS has reached its climax. It has been inflicting untold sufferings on its victims. In such a situation the Catholic Church has been responding to this grim situation in a very responsible way. The pastoral response cannot be

\textsuperscript{196} \textit{Ibid}
divorced from the medical, sexual and other aspects of the problem. At the same time the brutal and unexpected appearance of the disease and its dramatic character has inflicted a terrible social and cultural blow. With this background there have been notions like scourge of God, wrath of God, chastisement, punishment etc, from God to the patients of AIDS. But it is a way of escaping from panic.

5.4.1.1 CHURCH TEACHING ON AIDS

The Catholic Church has addressed the problem of AIDS on two levels, namely the universal level and on the level of the Catholic bishops of a particular country. In Catholic theological terms, the universal level is known as papal magisterium or teaching of the Pope as the head of the universal Church; and the Episcopal level of a particular country is known as the Episcopal Magisterium or teaching of the bishops.

5.4.2 PAPAL STATEMENTS

There are a few important papal statements addressing this subject. During his pastoral visit to the United States of America on the evening of September 17, 1987, Pope John Paul Second addressed a congregation of people with HIV/ AIDS. The Victim’s families, friends and those who cared for them too were present. Archbishop John R. Quinn of San Francisco was
also present at this gathering. The Pope addressed at the Mission Dolores Basilica of the USA. The Pope said:

"God loves you all, without distinction, without limit. He loves those of you who are elderly, who feel the burden of the years. He loves those of you who are sick, those who are suffering from AIDS and from AIDS related complex. He loves the relatives and friends of the sick and those who care for them. He loves us all with an unconditional and everlasting love." 197

The Holy Father showed the meaning of what he spoke by embracing a young boy with AIDS at the Mission Dolores Basilica. This way the Pope was showing that in each case of an HIV/AIDS patient, there was a human face and a unique personal history. Once again on Christmas day of 1988, the Pope in his ‘urbi et orbi’ blessing repeated the same message: ‘I think of them all, and to all of them I say, ‘do not lose hope’.

Then in Lusaka, on May 4, 1989, His Holiness made a reference to the AIDS patients when he stated that the Church, ‘proclaims a message of hope to those of you who suffer… to the sick and dying, especially those with AIDS and those who lack medical care.’ 198

197 Quoted in, HIV and Pastoral Care, CBCI Commission for Health, CBCI Center, 1 Ashok Place, Goldakkanna New Delhi, 1999, p.120
198 Ibid, p.120
Then from November 13 to 15, 1989 the Pontifical Council for Pastoral Assistance to Health Care Workers organized the Fourth International Conference at the Vatican City Synod Hall. On this occasion the Pope addressed the participants of this conference. His appeal was urgent and full of pleading: 'to our brothers in the priesthood and to our brothers, and sisters consecrated in religious life... First of all to those of you who are specifically dedicated to pastoral health care, my most fervent call that you be heralds of the Gospel of suffering in this contemporary world. The Church's history in health care abounds in heroic personages, priests, religious brothers and sisters who in their compassionate assistance to the suffering have exalted the doctrine and the reality of love'.

Later on the Pope met with the bishops of Burundi during his trip to some of the African courtiers and shared with them this problem though his statement was short, he made a reference to the victims of AIDS and how it was the duty of one and all, specially the Church to minister to the people suffering from HIV/AIDS.

Pope John Paul the second has been constantly reminding us about the need for the Church and its people to be a sign of love for all specially those who are marginalized. Whenever a

---

199 Dolentium Hominum, No 13, Fifth year, No 1, 1990, Church and Health in the World, Vatican city, p.9
200 In, L'Osservatore Romano, Vatican Press, Rome, September 10, 1990, pp 1-15
chance arose, he spoke on social concerns. He called upon the ministers of the Church 'to relive the misery of the suffering, work for them and reach out to them not only, out of her 'abundance’ but also out of her 'necessities'.

5.4.3 CALL OF THE HOLY SEE AT THE UN CONFERENCE ON AIDS

In June 2001, the UNO had organized a special session of the General Assembly on AIDS at New York and the response of the world Community to this health catastrophe was most positive. The New York meeting itself was a sign of the challenge the global spread of the HIV infection presented to the world. At the UN Conference on AIDS, the delegates of the Holy See made the following recommendations.

1. An increase in the number of treatment centers
2. Better information and education about HIV/AIDS
3. Fuller participation by civil society in the fight against HIV/AIDS
4. Greater involvement of people of good will in combating the disease.

---

201 Quoted in, HIV and Pastoral Care, CBCI commission for Health, CBCI Center, 1, Ashok Place, Goldakkanna, New Delhi, p.121
The Holy See also appealed to the industrialized countries to assist the needy countries in this campaign. While avoiding any semblance of colonialism, eliminating sexual exploitation, a maximum reduction in the price of antiretroviral medication for HIV/AIDS was urged. Intensification of campaigns to prevent the transmission of the disease from mother to child was recommended. At the same time the delegates of the Holy See discouraged use of condoms as a means to prevent HIV infection and exhorted the people on the contrary to the need to abstain from sex before marriage, fidelity in marriage and commitment to a life-long partner.

5.4.3.1 VATICAN BOOSTS FIGHT AGAINST AIDS IN UGANDA

On October 24, 2003 the Vatican contributed to the struggle against AIDS in Uganda with a 500,000 Euro donation and other initiatives. This shows the Church’s concern for the victims of AIDS. This important news was published in a statement of the Pontifical Council ‘Cor Unum’ the Vatican Organization presided over by archbishop Paul Cordes, which promotes and coordinates the Church’s charitable works in the world. This donation was made at the Ugandan Catholic nongovernmental organizations and of the Missionaries of Charity. During his visit to Uganda, Archbishop Cordes paid special attention to the situation of children there. The Pontifical Council ‘Cor Unum’ said that it had established five priorities in Uganda:
1. To give orphans a family
2. To foster education through the construction and support of schools
3. To offer health education to prevent AIDS
4. To offer professional training, especially for boys who leave juvenile centers
5. To establish a home, run by the Missionaries of Charity for children terminally ill with AIDS.

This is one example where the Church has shown that it was interested in the well being of the people suffering with AIDS.

5.4.4 RESPONSE OF THE CATHOLIC ARCHDIOCESE OF SAN FRANCISCO

On June 28, 1986 Archbishop John R. Quinn of the Archdiocese of San Francisco wrote an article entitled, 'The Crisis of AIDS: A Pastoral Response. Among other things he said that Christians, and the Church must not contribute to the breaking of the spirit of the sick and weakening their faith by harshness...The presence of the Church must be a presence of hope and grace, of healing and reconciliation, of love and perseverance to the end...AIDS is a human disease...As disciples of Jesus who healed the sick and is Himself the compassion of God among us, we too, must show our
Thus the Archdiocese of San Francisco clearly sees its mission in the face of AIDS that it was to minister in various ways to the AIDS victims.

5.4.5 RESPONSE OF THE CATHOLIC ARCHDIOCESE OF NEW YORK

The conservative Roman Catholic Cardinal the late John J.O’Connor, the Archbishop of New York was forthwith with his commitment to minister to the AIDS victims. He committed the archdiocese, ‘to do its best to minister to every person who is ill, of whatever disorder because of our commitment to the belief that every person is made in the Image and Likeness of God...’

5.4.6 RESPONSE OF THE CATHOLIC BISHOPS’ CONFERENCE OF USA

At the fag end of 1988, the bishops in the USA issued a joint official statement on this subject. The statement is entitled ‘Many Faces of AIDS: A Gospel Response’. It was an 8000-word statement giving detailed guidelines for the prevention of

the disease as well as for the pastoral assistance to the victims of AIDS.\textsuperscript{205}

It is the firm belief of the Church, that people with HIV/AIDS should be encouraged as far as possible to lead productive lives in their community and work places. The landlords and the employers are not justified in denying them decent housing and living. Further it is the mind of Church, that ‘priests and ministers should be the heralds of the Gospel of suffering, just as heroic personages in the history of the Church have set an example, persons like St. John of the cross, St. Camillus of Lillie.’\textsuperscript{206}

\textbf{5.4.7 RESPONSE OF CATHOLIC BISHOPS' CONFERENCE OF INDIA}

‘Walking in the footsteps of her Divine Master, the Catholic Church in India has been rendering yeomen service to the people of India in the field of health through her dedicated people, the Catholic hospitals, Health Centers, dispensaries and mobile units reaching out to the remote rural areas.’\textsuperscript{207} These are the words of the Chairman Catholic Bishop’s Conference of India at the inauguration of the commission for health in 1990. The main objectives were to inspire, coordinate, strengthen and

\textsuperscript{206} In, L'Osservatore Romano, Vatican Press, December 4, 1989, pp 8-15
\textsuperscript{207} Most Rev. Bishop Thumma Bala, Chairman, CBCCI Commission for Health, in his forward in the book, School Health, 1 February, 1996, p.iii
promote more and more dimensions of ‘Health Ministry’ in a systematic and effective way on behalf of the Church in India.

5.4.7.1 CBCI’s CALL FOR PREVENTION & CONTROL OF HIV/AIDS

The CBCI Commission for Health Care Apostolate has addressed a circular to the Catholics of the country exhorting them to be aware of the epidemic of AIDS and be prepared to prevent the spread of HIV/AIDS. The circular points out that this killer disease has been spreading with unprecedented rapidity and has now emerged as a highly disrupting social, economic, religious, ethical and public health malady.\textsuperscript{208} The Commission further states in the circular that, while offering curative care to AIDS patients, the cure seems to be a distant reality in the absence of a Vaccine, attempts must be made at evolving various strategies to prevent and control the unabated spread of this disease. For this, an immediate and effective response is required from the Catholic Community in our country in general and its education and health care in particular.\textsuperscript{209}

The circular further states that every region in India is experiencing a snowballing increase in the transmission of HIV.

\textsuperscript{208} CBCI’s call for Prevention and Control of HIV/AIDS, a National Circular, published by the Secretary, CBCI Commission for Health Care Apostolate, CBCI Center, 1 Ashok Place, Goldakkhana, New Delhi, 1992, p.1
\textsuperscript{209} Ibid
According to UNAIDS, India has the largest number of people living with HIV/AIDS – about 5 million. It is estimated that according to the current rate, about million new adult infections take place in India per year and 1,40,000 deaths occur annually due to AIDS.\(^{210}\)

5.4.7.2 Health and Healing Sunday

The CBCI Commission for Health care Apostolate declared February 6 of the Jubilee year 2000 as Health and Healing Sunday. This liturgical celebration was to continue in the subsequent years on February 6. The Catholic Health Association of India, based at Secundarabad prepared a beautiful liturgy for the occasion. The orations and the preface reflected the themes of health and well-being. The liturgy of the world highlighted God’s gracious love towards all His people irrespective of all castes and creeds and that the homily called upon everyone to care, minister and serve all the sick people in general and the AIDS patients in particular. The CBCI has exhorted the Catholic Community in India to celebrate this day meaningfully and encourage individuals and non-governmental organizations to minister to the sick people.

\(^{210}\) Ibid, p.2
5.4.7.3 HEALTH POLICY OF THE CHURCH IN INDIA

Under the aegis of the Catholic bishop’s conference of India, the commission for Health Care Apostolate framed the Health Policy of the Church in India. It published the guidelines in the form of a document in 1992. The purpose of this document is self-explanatory. In the preamble the document states that, ‘...the health situation of the people is unacceptable and calls for quantitative and qualitative changes. The objective of the Healing Ministry of the Church has to be to respond to all those who are in need of healing and wholeness. We have to go beyond the confines of our institutions, if we are to help the total person and the community in attaining and monitoring health...’\(^{211}\)

The document further opines that Health Care is an area, which has many legal, socio-economic, political, moral and religious implications. Hence there is definitely need of some policy guidelines from both the state and the Church. As for the state, the government of India has already brought out its Health Policy Document. The Catholic Church being the largest sector in the nation’s health care system next only to the government, health policy document of her own to augment the

\(^{211}\)Health Policy of the Church in India – Guidelines, Catholic Bishop’s Conference of India, Commission for Health Care Apostolate, CBCI Center, 1 Ashok Place, New Delhi, 1992, p.vi
Government’s Health Policy has been a step in the right direction.\textsuperscript{212}

\section*{5.4.7.4 Clause on AIDS}

The document has a forward, a preamble, and 31 articles. Each article has other sub-titles. The clause on AIDS speaks about our institutions as those giving loving care and compassionate service to all patients with AIDS. Prevention is the only way against AIDS at present. The document calls for correction of permissive habits and sexual promiscuity and prevention of the spread through blood and needles and attention to high-risk groups. The document suggests the following strategy:

1. Create an awareness of the problem and educate people about AIDS.

2. Welcome patients with AIDS; at the same time precautions will be taken so that the disease does not spread inadvertently among other patients or public or health care personnel.

3. Orient people towards orderly sexual behavior.

4. Promote voluntary blood donation by healthy donors, after testing for the HIV and discourage professional donors.

\textsuperscript{212} \textit{Ibid}, p. vi
5. Use sterile needles and syringes and disposable ones to the extent necessary and possible.

6. Keep close check on all blood products for statutory HIV test certificates.

7. Collaborate in the national programs against AIDS.

5.5 Catholic Answers to AIDS

The pastoral response of the Church should have anthropological and moral underpinnings. The Catholic Church has a particular understanding of the human person, his dignity, value of life, meaning of suffering, meaning of death, the meaning and role of human sexuality etc. Hence the pastoral responses must express these values. In the case of AIDS, the pastoral response takes the form of preventing the disease through appropriate educational measures and concrete assistance, care, medical, social and moral concerns, which are offered to the AIDS patients and their families.

5.5.1 AIDS and Use of Condoms

John Fuller and James Keenan share their views regarding the use of condoms and needle exchange. It is their opinion that the effective response to the need for immediate prevention of AIDS could be through use of condoms. They
feel that this need not threaten Catholic orthodoxy. They further feel that *Casti Connubii* and *Humane Vitae* are directed against contraceptive acts, not against condoms or birth control pills as such. Just as birth control pills can licitly be used by a woman to control irregular menstrual cycles or dysfunctional uterine bleeding, so too condoms can be used for purposes other than contraceptive.

This type of insight is extremely important in allowing condoms to be recommended to married couples when one spouse is infected with HIV. Many of the bishops and bishops' conferences have invoked the principle of the lesser evil, and they have argued that such illicit sexual activity is required because otherwise the wrongdoer would be violating not only chastity, but also justice by the possible transmission of a deadly virus. But how far can the Catholics take this type of opinion?

5.5.1.1 Opinion of Theologians

We are aware of the Church's official teaching against the use of all artificial methods against contraceptives. In the background of the deadly virus HIV and the havoc it has

---

213 JOHN FULLER & JAMES KEENAN, Catholic Answers to AIDS, in *The Tablet*, June 30, 2001, p.942
214 Ibid
215 Ibid
wrought on humanity, the Church has to look at the problem of condom use in the backdrop of the ministry to HIV positive people. For the last few years' theologians have given their opinion that condom use could be permitted in certain cases, but not as a policy.216

The delicate discussion as to whether the Catholic Church should tolerate the use of condoms as a 'lesser evil' in fighting the spread of AIDS gained credence at the Vatican in late September, 2000. Some of the theologians closest to the Vatican, while emphasizing that contraceptives should never be accepted, admitted the possibility of condom use in specific, extreme circumstances. In 1996, the French bishops released a document that said, that using condoms may be necessary, but insufficient means to battling AIDS. Vatican theologians were among those who agreed that condom use, while not morally licit, might be tolerable in certain circumstances.217 But there has been no official Church teaching to this effect.

5.5.2 GROWING RATE OF AIDS AMONG PRIESTS

Concern within the Roman Catholic Church about the number of its priests who have died of AIDS – related illnesses has grown for the last few years. In January 2000, The Kansas

216 JOHN NORTON, Theologians say condom use OK in certain cases, not a policy, in Catholic News Service/US Catholic Conference, September 22, 2000, pp. 1-4
217 Ibid, p.4
City Star reported that hundreds of Catholic priests had died of AIDS and that hundreds more were living with the HIV. Since then the Kansas City Star has documented more than 300 AIDS-related priests’ deaths nationwide through death certificates and interviews with family members and religious colleagues. As death records are closed in nearly two-thirds of the states, experts say that the exact AIDS death toll among U.S. Priests will never be known.\(^{218}\)

AIDS affects people of every race, religion, age and cultures. It does not distinguish between the religious and the laity! The Star found that one of the priests who died served as an AIDS consultant for the Vatican. Another was a rector of a Midwestern Seminary. Two were seminary vocation directors. Three were college chaplains. Others included the Spiritual Director at a Catholic Seminary, Catholic Prep. School Principal and a former employee of the National Catholic AIDS Network, which works with the conference of bishops.\(^{219}\)

Such being the case dozens of priests, AIDS experts, doctors, rectors of seminaries, psychologists and educators agreed that more education and dialogue was vital in efforts to stem the tragedy of priests dying of AIDS. The Church needs to face up to the truth.

\(^{218}\) JUDY L THOMAS, Concern grows over AIDS rate among Priests, in The Kansas City Star, USA, Jan, p. 1, also in April, June 2000

\(^{219}\) Ibid
In addition to the Church’s efforts in creating awareness among the masses about the deadly disease AIDS, the Catholic Church in every country in the World should realize that AIDS is everywhere, including in the life of its clergy and take up appropriate ministry to serve the AIDS Victims.\textsuperscript{220}

\section*{5.5.2.1 Counseling \& Celibacy Courses to Seminarians}

In order to be open to the problem of AIDS among the Clergy, the Church has started the ministry of Counseling and Celibacy courses to Seminarians. There is talk of HIV test for the Seminarians before ordination. Rev. Jim Walsh, executive director of the seminary department of the National Catholic Educational Association is of the opinion that the prospective priests (seminarians) should be given chances to talk freely and openly about sexuality in seminaries and formation houses.\textsuperscript{221} The diocesan seminary in Kansas City, Kansas has special courses for seminarians in counseling and celibacy. Rev. Benedict Neenan the seminary’s rector and president say that the seminarians are provided extensive sexuality training. He says that the first thing they do was teaching the seminarians to pray. The preparation for celibacy was first of all a good prayer

\begin{flushright}
\footnotesize
\textsuperscript{220} \textit{Ibid}
\textsuperscript{221} \textit{Ibid}, p. 8
\end{flushright}
life and community prayer life, that they become part of, and that they genuinely enter into and come to appreciate.  

5.6 PASTORAL MINISTRY v/S DISCRIMINATION  

Suffering, inequality and discrimination are age-old problems. When confronted by epidemics, natural calamities and other painful experiences, the victims are at a loss to find an answer. Chitra Soman was one among such problems: In April 1992, Chitra Soman a HIV positive women of the village of Kokakunnur in Kerala gave birth to Priyanka, her first child. Chitra was ordered out of her own household and later by the village itself because she was HIV positive. She had to face utter poverty and had nothing to eat or drink for two days until somebody took courage and fed her and the child. This is only one case that is highlighted. There are many more cases of this type.  

There is another similar case: Naresh was discovered to be HIV positive and there is lot of discrimination against him. He tells us that his family took care of him, but they treat him as an untouchable. Later even his mother stopped taking care of him.  

---

222 Ibid, p. 9  
223 JJEEMON, Here falls the Rain of Sorrows, in Deepica, July 22, 1992, p.4  
224 MARIA ABRAHAM, AIDS: Agony and Shame, in The Week, June 15, 1995, p. 29
5.6.1 DISCRIMINATION IN THE WORKPLACE

There is the fear of losing one's job if one is discovered to be HIV positive. 28 years old Lakshmi told that she was tested positive, but did not reveal to anyone, lest she lose her job.\textsuperscript{225} Here is another case of discrimination: Arulakam was sent away from the job when the management came to know that he was HIV positive.\textsuperscript{226}

5.6.2 DISCRIMINATION AT EDUCATIONAL INSTITUTIONS

There have been many instances of Child Victims of HIV who are discriminated against. For example, a 12-year-old boy was expelled from a reputed school in Bandra, Mumbai, when he tested positive and his neighbors in the posh apartment block would not allow even his family to use the elevator.\textsuperscript{227} There are many other instances of school and college-going students who have been discriminated against due to HIV.

5.6.3 DISCRIMINATIONS AGAINST HIV PATIENTS IN HOSPITALS

Hospitals are supposed to be the only succor to patients, more so to the victims of HIV/AIDS. But some hospitals

\textsuperscript{225} RASHMI SAXENA, Shadows of the Dead, in The Week, Dec. 10, 2000, p.17
\textsuperscript{226} SONORA NAMBIAR, Apathy is the Watchword, in Times of India, Dec.1,1999, p. 12.
\textsuperscript{227} MARIA ABRAHAM, AIDS: Agony and Shame, in The Week, July 16, 1995, p. 83
become nightmarish to many AIDS patients. Doctors and medical staff act against the code of medical ethics. Even the countries premier medical institutes discriminate against HIV patients. A thirty-year-old Sunil from Aligarh was tested positive for HIV. The All India Institute of Medical Sciences discriminated against him on many counts. In addition to discrimination, there are human rights violations committed against the people with AIDS. There is a charter of human rights by the UNO. The rights and duties of Indian Citizens are well formulated in our Constitution. Even then there are blatant violations of human rights especially of the people suffering with AIDS.

The existing information suggests that virtually all human rights and fundamental freedom are violated with regard to people with HIV/AIDS. Violations have been at their worst for people who are least able to assert and protect their rights. It is here that the Church should step in with courage and stand by these helpless people through awareness and education. The Church should be able to alleviate the sufferings of these patients.

5.7 Pastoral Dimension

The Church, when engaging itself in service to HIV/AIDS people, it must carefully differentiate between the person

---

228 Ibid, p. 33
himself and his/her conduct. We should avoid judgment upon such people. 'Ministries of compassion are not necessarily indicative of one’s moral opinion of a person or lifestyle, but such ministries are moral statements about the value of each person to God and to the community of faith. In this sense AIDS ministries represent moral and theological understandings of duty and the value of persons.'\textsuperscript{229} We have to offer pastoral care irrespective of a person’s moral imputability or guilt. Our focus in this ministry is on the welfare of the concerned person. Jesus invites us to an unqualified and unconditional attitude towards the vulnerable, weak and despised people. The HIV/AIDS people fall into this category.

5.7.1 CARING FOR HIV/AIDS PATIENTS

HIV/AIDS terminal cases need constant care and support. Both at home and at hospices one should feel happy and proud to serve the AIDS patients. One should not be afraid of getting infected by caring for a HIV/AIDS patient. Cohabitation involves no risks.

5.7.1.1 DIGNITY IN SERVING THE HIV/AIDS PATIENTS

We are speaking about our brothers and sisters in the Lord Jesus. During his short span of mission on Earth, Jesus set

\textsuperscript{229} GRACIOUS THOMAS & GEORGE PEREIRA, \textit{HIV and Pastoral Care}, CBCI Center, 1 Ashok Place, New Delhi, 1999, p.119
many examples of care and service to the sick people. There is dignity in serving the sick and the needy. Hence service done to the AIDS patients is service done to Jesus Himself. It is a great opportunity to show God’s love and Christian values. The AIDS patients can be helped to seek God’s love and blessings and prepare themselves to face the last day and die a peaceful death in God’s hands.

5.7.1.2 ANXIETIES OF AN AIDS PATIENT

When HIV/AIDS patients are diagnosed for this dreadful disease, he/she will have lots of anxieties and worries. They feel concerned about their spouse, children, their future and status in society, financial stability etc. These are terrible moments in their lives. The pastoral counselor should help them with appropriate advise, support and encouragement. They should also instill faith and trust in the infinite mercy of God. God is a merciful Father and ever ready to forgive those who wish to be reconciled with Him. Evidence of this is Jesus Himself whose wounds have healed all of us.

5.7.2 COUNSELING

A counselor should be equipped with the relevant information about the disease and understanding about the thoughts and sentiments of those struck by AIDS. The counselor should take holistic approach towards the patients,
while taking account also of the cultural, socio-economic and moral aspects involved in the illness. Counseling should also encompass the patient, his/her family, friends, relatives and neighbours.

5.7.3 SPIRITUAL TRANSFORMATION

People with AIDS normally think that they are to blame themselves for their pathetic, pitiable and miserable condition. Personal spirituality may be set in motion in an AIDS patient. John Fortunato in order to articulate what spirituality means writes in his book, *The Spiritual Dilemma*, ‘By spiritual I allude to the journey of the soul not to religion itself but to the drive in human kind that gives rise to religion in the first place. By spiritual I mean, the human striving toward meaning, the search for a sense of belonging.’

The spiritual needs of an AIDS patient during the course of one’s terminal illness undergoes vacillation. One might experience the closeness and the distance of God. The patient might even perceive that his/her illness to be a punishment from God. One might feel divine love and forgiveness and at the same time fears of God’s abandonment and condemnation. It is here that those providing pastoral care, very tactfully convert this inordinate sentiment of guilt to a sense of sin. There is a

---

230 Quoted in, *AIDS: Living and Dying with Hope*, p.110
clear difference between sin and guilt. ‘Guilt feeling is unhealthy, whereas sense of sin is redemptive. Guilt neurosis is a self-centered response to some moral violation. Sense of sin on the other hand is other-centered worry about some moral violation. Sense of sin leads only to reconciliation with the people one has offended.’ This type of feeling and understanding is very much in conformity with Jesus understanding of reconciliation. God is all merciful Father and He forgives the contrite.

5.7.3.1 ROLE OF PASTORS/HEALTH CARE WORKERS

i) Patients should not be allowed to have self-destructive feelings. Hence it is the duty of a good Pastor/Health Care Worker to take care that the patients do not feel unwanted, rejected, despised and discriminated against. Sentiments, if persist for long time, the patient may feel like committing suicide. Let the Pastor/Health Care Worker help the patient to see God in others. Often these people cannot see beyond themselves. They are prone to cause injury to others even unawares.

ii) The Pastor/Health Care Worker has a sacred duty to implant a proper image of God among the patients of

---

231 GRACIOUS THOMAS, GEORGE PERIERA, HIV and Pastoral Care, CBCI Commission for Health, CBCI Center, 1, Ashok Place, Goldakhana, New Delhi, 1999, p.122
AIDS. Through the Pastor the patient should see God as a merciful Father. The patient should realize that God is not revengeful or a punishing God; but rather 'He is a Merciful and Forgiving Father.'

iv. Pastoral companionship would help the patients a lot. Providing pastoral companionship to the patient is very important. This will help the terminally ill patient to cope with the realities of the situation arising out of one's disease. The pastoral companionship involves a human experience between the patient and the pastor. In India with limited hospital facilities very few priests, religious and Christian health care providers, it is difficult to provide a constant pastoral companionship. The privilege of ministering to persons with AIDS and to their family and friends awakens one to life. Pastors are formed by their experiences and achieve growth through their very experiences. Through the pastors, God's healing power reaches both the healer as well as the afflicted. St. Paul in his letter to the Romans, says, 'Now we know that for those who love God all things work together unto good.'

---

232 Holy Bible, Jn: 8:3-11, Theological Publications in India, Bangalore, 1999
233 GRACIOUS THOMAS, GEORGE PERIERA, HIV and Pastoral Care, CBCI Commission for Health, CBCI Center, 1, Ashok Place, Goldakhanna, New Delhi, 1999, p.124
234 Holy Bible, Rom: 8:28, Theological Publications in India, Bangalore, 1999
 Prayer groups help a lot to soothe and console patients. Hence pastoral care should aim at helping patients come together in prayer groups. Jesus Himself had said, 'Where two or three are gathered in my name, I am there among them.' With this deep faith the patients could be helped during group meetings to pray and share their anxieties. So far with no drugs for cure and certain of meeting an untimely death, the only solace one can get is from prayer.

5.8 CONDOLING WITH THE FAMILY

The Pastors and the health care providers should also focus their attention on the relatives of the bereaved. For a person dying with AIDS, this type of care brings the greatest degree of comfort and support. Once the person has died, the pastors or the care providers have reported that they get considerable consolation in the knowledge that they did whatever they could to assist the dying person. Bereaved family members and friends have special needs to which pastoral care can respond.

Bereavement can affect the physical and emotional health of survivors. Clergy are often among those individuals to whom the bereaved turn for guidance. An AIDS related death may

---

235 Holy Bible, Mt: 18-20, Theological Publications in India, Bangalore, 1999
introduce changes in family structures to such an extent that families can be torn apart. Pastors and Health Care providers can be helpful liaisons in bridging the distance that separates a bereaved family from others in the community and among friends and relatives.\footnote{WALTE J SMITH, AIDS: Living and Dying with Hope, Issues in Pastoral Care, Pauline Press, New York, 1998, p.174}

5.9 Health Care: A Unique Ministry

We have seen in history the natural and spontaneous generosity and help people give to their brothers and sisters when faced with natural calamities, such as earthquakes, famines, epidemics and floods. It is then that the best in us comes out. People show courage, love, compassion, magnanimity and a spirit of sacrifice. This is also true when facing the latest epidemic- AIDS. The Church in times past was the first one to come forward and render help during times of plagues, tragedies and terminal illness. People dying of HIV/AIDS have a unique claim on our love, compassion and ministry. The health care workers and the pastors might experience the redemptive work of Jesus, when one looks at a patient lying on his/her deathbed in a similar situation as that of the suffering and rejected person of Jesus Christ at the garden of Gethsemane.
‘We as Christians and Pastors of the Church recognize the redemptive value of the sufferings of Jesus Himself. Through our pastoral care, we know that we will be brought face to face with the sufferings of Jesus.'

God our loving Father urges us to care especially for those of our human families who suffer in any way as a result of the HIV/AIDS epidemic.

5.10 WORLD COUNCIL OF CHURCHES STUDY DOCUMENT

In a World Council of Churches (WCC) study document the AIDS pandemic was viewed in connection with other factors. Representatives of various Church denominations participated in the formulation of this study document. It highlighted the need of special pastoral ministries to the AIDS victims. After an evaluative study, the Churches arrived at a consensus regarding various issues. The document provided an excellent plan of action for the Churches and members. The action plan prepared by the WCC has many insights and guidelines that would fit in very well also with the pastoral ministry of the Catholic Church.

---

237 GRACIOUS THOMAS, GEORGE PEREIRA, HIV and Pastoral Care, CBCI Commission for Health, CBCI Center, 1, Ashok Place, Goldakhanna, New Delhi, 1999, p.127
238 Ibid, p.93
5.10.1 **Issues Affecting AIDS Patients**

AIDS has been testing the Church on the theological level, on the level of faith, as well as on the level of pastoral and congregational responses. To illustrate this, Rev. Manoharan, member of Lutheran World Federation (LWF) and one of the consultants at the WCC study seminar says that one of the pastors who participated in the consultation narrated his experience. He was questioned by one of his colleagues as to how he could baptize a person with AIDS! This is to show however in the clerical level, moral and ethical response is ambiguous. Rev. Manoharan highlights the following issues that affect the patients with AIDS and their families and suggests that pastors and health care workers have to be aware of such issues in order to perform effective pastoral ministry.

5.10.2 **Question of Fear and Guilt**

The report of the Lutheran World Federation consultation on pastoral work in relation to AIDS, held in Germany in March from 21-25, 1988, has this to say: 'The World-wide epidemic of AIDS has given birth to a world wide sense of fear which needs to be analyzed and to which we must respond. There is not only the fear of the disease as such, but also the fear of stigma and uncleanness. AIDS brings with it the fear of

---

dying, physical pain, rejection, isolation and shame. On the spiritual level the person with AIDS struggles with the issue of damnation or salvation. It is here that the Church with its pastors and health care workers can come to the rescue of these people engulfed in fear and guilt.\textsuperscript{240}

\section*{5.10.3 Question of Death and Dying}

Dying and death cannot be separated. It is a bodily as well as a social experience, which has to be faced by every human being. The dying person may need emotional and spiritual support that the pastors to a great extent can provide. The Christian community through the ages has faced death not only with mourning and fear but also with hope and expectation of the resurrection. It is the responsibility of the Church’s ministers to convey hope to these people who are on their last leg of earthly journey.\textsuperscript{241}

The LWF consultation report further says that, ‘AIDS challenges the Church not only to develop a more profound understanding of dying and death, but also to develop relationship with people who are dying and with those who have been and will be bereaved.

\textsuperscript{240} Ibid, p.49
\textsuperscript{241} Ibid, p.47
5.10.4 THE CHURCH: A CARING COMMUNITY

'A standard dictionary of Biblical words says that the basic meaning of 'KOINONIA' is to be shared with someone in something' Christians are called to have fellowship with the divine nature. 'His divine power has given us everything needed for life and godliness, through the knowledge of Him who called us by His own glory and goodness.' Christians have fellowship with their friends who are in need; they also share their best with Him. They do this because they have a share in the Gospel and because they share (Koinonia) with each other in the Holy Communion.

Being a member of the Church means loving one another and learning to hang on to one another. This attitude is needed for mental forgiveness and strength to be more like our Lord Jesus Christ. Thus the Church is called through the AIDS crisis to break down barriers that divide and build bridges between the victims of AIDS and those who are still relatively healthy.

5.10.5 CHURCH INVOLVEMENT OF PEOPLE LIVING WITH AIDS

AIDS is a serious health crisis in India as well as all over the world. It affects the whole of humanity in many diverse

---

242 Ibid, p.48
243 Holy Bible, 2 Pet 1:4, Theological Publications in India, Bangalore, 1999
244 Holy Bible, Rom 12:13, Theological Publications in India, Bangalore, 1999
245 Holy Bible, Phil 4:15, Theological Publications in India, Bangalore, 1999
ways. In addition to health care issues, AIDS affects people in a more serious way in their family lives. No wonder that the AIDS crisis often leads to faith crisis and also to a crisis in faithfulness and fidelity. Human value and dignity are being undermined from many angles these days.

The Church is the community of those who have placed their faith in Jesus Christ. The Church is a people in this world, just as Jesus was a man in this world, a man who walked and lived among the people. The role of the Church is to bring about a peaceful world, a world where all of humanity shares equally in the reign of God without the discrimination between rich and poor, old and young, literate and illiterate and so on.

5.10.6 The Prevailing Attitude of the Church

The spread of AIDS in India is continuing unabated. This dreadful disease has affected actually more than 3.5 million Indians. Both the government and NGOs have allotted an immense budget for addressing AIDS-related issues at various levels. In contrast, the Church in India has been particularly sluggish and slow to respond. It has been also slow to become aroused to the enormity of human suffering and rapidity of its spread in the families and communities of this country.
Is it not necessary then to ask, why this is so? Why has the Church's response to the suffering of patients with AIDS in our own hand has been so slow and meagre? Answers to this query can be found by examining the Church's attitude regarding the following issues. Very often the Church fails to realize the seriousness of AIDS and to take suitable precautionary measures to educate the faithful properly.

5.10.6.1 AIDS AFFECTS ONLY NON-CHRISTIANS

The general notion of some of the Churchmen was that AIDS was a problem of the World, not a problem with which the Church needs to be involved. This was the prevailing attitude of many Churchmen up to the mid 1990s. Even now one could hear a Christian remark that AIDS would not affect the Church, and that if one were a true Christian, one would not contract HIV!

Such remarks are made out of ignorance. By making such statements these Churchmen are making undue separation between the Church and the World. Further this kind of thinking may appear somewhat hypocritical in those who, while making a distinction between the world and Christians, follow the value system of the world rather than of the gospel.

---

246 ERLINDA C. SENTURIAS, 'Weaving Homes and Communities,' a talk at the Christian Medical Commission, World Council of Churches, Geneva, 1996
5.10.6.2 AIDS: A MORAL PROBLEM

Most of the Church members, both at the hierarchical and at the commoners level considered AIDS a problem exclusively sexual morality. This kind of a narrow perspective would provide no real guidance today for addressing the problem of AIDS in our families and communities. Of course, the general temptation is to see AIDS as linked to a failure with sexual morality. But the gospel teaching as well as the facts as we know them today, militate against such an assumption. Workers in the field soon come to realize that the link between failures in sexual morality and HIV, are not as universal as they were at all time presumed to be. Dietrich Bonhoeffer expressed powerfully the significance of Jesus’ teaching regarding the danger of judgment to love: ‘Christian love sees the fellow man under the cross and therefore sees with clarity. If when we judged others, our real motive was to destroy evil, we should look for evil where it is to be found, and that is our own hearts. But if we are on the look out for evil in others, our real motive is obviously to justify ourselves, for we are seeking to escape punishment for our own sins by passing judgment on others, and are assuming by implication that the Word of God applies to ourselves in one way, and to others in another.'

5.10.7 CHURCH’S CALL TO MISSION IN THE CONTEXT OF AIDS

Recalling that Christians are called to ‘weep with those who weep’, pastoral concern invites ministers, social workers, volunteers in the field not only to sympathize, but also to empathize with victims of AIDS, whether or not these victims are to blame. The pain and suffering of AIDS patients is the pain and suffering of the people of God. Unless and until Christians feel the truth of this statement, the Church will never give itself whole heartedly to the ministry among people living with AIDS. The Church should endeavor then to motivate local congregations, parishes, and institutions to take up AIDS ministries before it is too late!

5.10.7.1 THE CHURCH: A FRIEND OF LIFE

The basis of the Church’s ministry with people living with AIDS is Christ’s compassion and sacrificial love. The people who participate in this ministry declare themselves to be on the side of life. Ours must be a Church without walls, whose love is expressed without condition. The Church should stand as a faithful friend to the one who is in pain and grief, serving everyone willingly and lovingly after the manner of Jesus Christ who, ‘came not be served, but to serve.’
5.10.7.2 CHURCH: SERVANT OF GENERAL WELL-BEING

A good Christian counselor, whether he be pastor, an elder of the Church, or a doctor is supposed to understand all about HIV/AIDS and its implications. A Christian integrates the Word of God to provide hope for the unfortunates who are gripped with fear, guilt and uncertainty. God even wants to restore the wasted years of one’s life. He wants to make up for the loss. ‘I will repay you for the years that the swarming locusts has eaten.... the hopper, the destroyer, and the cutter, my great army, which I sent against you. You shall eat in plenty...’ 248 In this background the Pastoral Christian ministry in the context of the present AIDS crisis demands manifold response. No one organization, not even the Church can presume to go it alone. Accordingly the Church in this ministry will have to seek allies and partners in this special mission, in such seemingly unlikely places as public agencies, NGOs and philanthropic agencies. For, when the Church gives itself sincerely and with sacrifice to such a ministry, then the life and love of Christ is revealed clearly to all with whom they share the burden.

248 Holy Bible, Joel 3:25-26, Theological Publications in India, Bangalore, 1999
Pastoral ministries and care primarily focus on the welfare of the people in need. This notion is grounded in a sense of Christian mission and discipleship. Pastoral care is a spiritually motivated activity leading that person’s freedom to decide what is good for him. This has to be done with an attitude of humility and confidence. There is also a tendency among Christians to focus on their denominational differences. Their AIDS ministry will be affected adversely and rendered ineffectual by such emphasis on differences. The mercy that a believer experiences from God should be generously expressed toward all others without question.\textsuperscript{249}

Thus care provided to people in need, especially to the abandoned, rejected, the outcasts of the society, the victims of AIDS, is also an example for others to follow. The emphasis in pastoral care should be on being a moral agent, obeying the love command freely and without any conditions. By this pastors and other health care workers can commit themselves to the welfare and well being of others. Hence pastoral care is a gift of self on the one hand and sustenance for others on the other. It is a witness of faith in God. It is an act of obedience to

\textsuperscript{249} ARCHIBALD HUNTER, \textit{A Pattern for Life}, Westminster Press, Philadelphia, 1965, p.86
serve others especially those who suffer due to various diseases, in our case the victim’s of AIDS.250

CONCLUSION

This chapter on AIDS ministry has 10 main divisions with many sub-divisions. In the first few divisions we studied the response of various Church denominations and leaders to the epidemic of AIDS. We also studied the stand and response of the Catholic Church to this deadly disease. The exhortation and the call of the Pope to the World to contain the spread of HIV/AIDS by all means at the disposal of the Church and the World community, is praiseworthy. It shows how deeply the Church is seized of the matter.

To His friends and the curious crowds Jesus had presented the case for a quality of love that supercedes mere keeping of technical rules. The standard for relationship Jesus sets for His disciples is the example of God: ‘There must be no limit to your goodness, as your heavenly Father’s goodness knows no bounds’.251 Keeping this commandment of the love of Jesus, the Church has been doing its best with its vast resources and personnel to alleviate the pain and sufferings of the HIV/AIDS patients and their orphan children.

251 Holy Bible, Mt. 5:48, Theological Publications in India, Bangalore, 1999