



## – AIDSLink #54 – Gender issues, HIV & AIDS

“So God created human beings, making them like himself. He created them male and female.” Gen 1:27 (GNB)

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Every day 14,000 people are infected with HIV – most of them are young and the majority are women and children. Although gender is commonly raised as an important issue, we often struggle to know how to adequately address this in practical ways especially from a biblical perspective. How is this being approached in your setting?

Please take a moment to share your experiences, favourite resources and valuable feedback through AIDSLink by replying to: [international.aids-consultant@sim.org](mailto:international.aids-consultant@sim.org)

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SIM AIDS related ministries and HOPE for AIDS

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## 1. Jesus' "gender agenda"

Read Luke 8:40-56. If we focus only on the miraculous power involved in these incidents, it is easy to overlook the radical nature of Jesus' "gender agenda" as he 1) notices, 2) ministers to, and 3) empowers the women and children of his world.

- a. v42b-48. A woman suffering physically, emotionally and relationally, ritually unclean and cut off from God in the religious understanding of everyone present ... except Jesus. This "nobody" dares to approach Christ only to find that her intended private healing becomes a public affirmation of her humanity.
  - List the things that this woman is struggling with when she approaches Jesus. Which of these affect women in my society today?
  - In what ways does Jesus break social conventions as he responds to her? Make a list. What are the implications of these?
- b. v41-42a, v49-55. A young girl at the point of death, lamented by her parents but of little worth in that society. Note Jesus' intense commitment to her v54-55.
  - What was a girl child "good for" in Jesus' day? What worth does Jesus give her (see 18:15-17)?
  - What is a girl child "good for" in my society? What would Jesus have to say about this?
- c. How does Jesus challenge the norms, traditions and customs of my society today in terms of women and children? How would Jesus' approach make a difference in the context of HIV & AIDS?

## 2. Mobilizing around gender issues – Project Positive Ray

The following contribution is from Edmara Ngwane, a senior volunteer with Project Positive Ray, Port Shepstone, South Africa. She has been with the project since its commencement in August 2002. Her main responsibilities are teaching on HIV & AIDS in schools and promoting home base care.

"I work and interact with many women. In our culture gender is a very big problem. Women are treated as subjects while men are superior and possess authority. This authority is often abused. Women abuse comes in different forms. Women bashing, rape and women as the inferior sex are some forms of abuse. This leads to substance abuse, alcohol, drugs and divorce."

“However, the main problem I encounter in my field of work is the stigma that goes with HIV & AIDS. For example when a man is tested and the result is positive, there is no need for disclosure and no questions must be asked. On the other hand when a woman is HIV+, she is blamed for bringing the virus into the relationship. She is normally mistreated and regarded as dirty and very often asked to leave home. The man will refuse to get tested and will act on the pretense that he is fit and that there is nothing wrong with him. He will continue to sleep around with other women infecting them. For this reason we have more women infected than men.”

“We address the issue by talking with men and women educating them about HIV & AIDS. Our Education and Awareness program covers sex education, hygiene, what is HIV & AIDS, how people are infected and affected, the dangers of having more than one sex partner, commitment and faithfulness to your partner, abstinence etc. A very important component of the program is VCT (Voluntary Counseling and Testing) and anti-retroviral treatment. We mobilize and motivate people to get tested so that they know their status. Although women are very reluctant because of the abuse they might encounter if they are tested positive, our program has been effective. We set a goal of 700 people to be tested in 2006. We are presently over the 600 mark. Clients who are tested and have a viral count of below 200 are encouraged to enroll for anti-retrovirals. Most of our clients are women.”

“We are convinced that the only solution to the problem of gender abuse is to educate our people. Mindsets and behavior patterns need to change. Men and women need to understand their God-given roles. Information based on facts must be disseminated so that people can make informed choices/decisions. As a Church based program we believe that God’s design for man and women to live together as husband and wife, committed and faithful to each other in a loving and caring environment is the answer to gender violence and HIV & AIDS. Our programs are caring and loving, working in the interest of both men and women, live a better life and to understand their role in the plan of God. We are the ‘hands and feet’ of Our Creator.”

### 3. Resources on gender issues

Some useful resources for further thinking on gender issues include the following. You will need to be discerning in your application of these.

a. *“Tackling HIV and AIDS with faith-based communities: learning from attitudes on gender relations and sexual rights within local evangelical churches in Burkina Faso, Zimbabwe, and South Africa”* (2006) in *Gender & Development* Vol.14 No.3, Nov 2006 p369. Available (88KB) at <http://tilz.tearfund.org/Topics/Gender.htm>

b. *“Incorporating Gender into your NGO”* (2006) is a manual explaining the basic concepts related to gender, followed by ‘what to do and how to do it’, both inside and outside an organization. It helps us scan all issues with a gender sensitive eye. Downloadable (512KB) at: [www.networklearning.org/download/gender.pdf](http://www.networklearning.org/download/gender.pdf)

The following key questions in a checklist “Gender in the project cycle” are downloadable (28KB) from: [www.networklearning.org/download/gender-checklist.pdf](http://www.networklearning.org/download/gender-checklist.pdf)

- Is the project design based on a real understanding of the needs of men and women?
- Look at the planned results. Are they really what the male and female stakeholders need?
- Look at the daily life of the community. Look at who is using their time, labour, and resources. Which groups are in the most disadvantaged position? Why? How will the project make things better?
- How will the project contribute to the empowerment of men and women in the sector it deals with?
- Check that at all stages of the project cycle, any data collected is broken down into data related to women and data related to men – that is, gender disaggregated data.

c. *“Stepping Stones: A training package in HIV & AIDS, communication and relationship skills”* by Alice Welbourn, ActionAid (1995) is a 240-page manual for trainers with an accompanying workshop video/DVD of 15 five-minute clips. The materials enable people to explore the range of issues which affect sexual health - including gender roles, money, alcohol use, traditional practices, attitudes to sex, attitudes to death and our own personalities. Though designed with HIV & AIDS in mind, the package covers many related topics such as gender violence and alcohol use.

*Stepping Stones* requires time, good training, skilled facilitation, care, thought, negotiation, and prolonged follow-up. It is designed for use in existing HIV & AIDS projects, and development projects which plan to introduce an on-going AIDS component. It is available in French (titled "Parcours"), Portuguese, Spanish and other languages

from Teaching AIDS at Low Cost (TALC). [www.talcuk.org](http://www.talcuk.org) For further information including where Stepping Stones is being used visit: [www.stepsstonesfeedback.org/](http://www.stepsstonesfeedback.org/)

d. *"Boys and Changing Gender Roles: Emerging programme approaches hold promise in changing gender norms and behaviors among boys and young men."* (2005). This 4 page paper, part of the YouthLens series, reports that a growing number of projects recognize the importance of working with boys and young men to change gender norms and at the same time affect behaviors related to reproductive health and HIV& AIDS. Available (144KB) from [www.fhi.org/en/Youth/YouthNet/Publications/YouthLens+English.htm](http://www.fhi.org/en/Youth/YouthNet/Publications/YouthLens+English.htm)

For an introduction to gender and youth visit:

[www.fhi.org/en/Youth/YouthNet/ProgramsAreas/gender/Key+questions+related+to+gender+and+youth.htm](http://www.fhi.org/en/Youth/YouthNet/ProgramsAreas/gender/Key+questions+related+to+gender+and+youth.htm)

#### **4. World AIDS Day 2006 - December 1**

The aim of World AIDS Day and AIDS Awareness Week is to raise awareness in the community about HIV & AIDS issues, including the need for support and understanding for people living with HIV/AIDS, and the development of education and prevention initiatives. World AIDS Day 2006 will focus on accountability using the slogan, "Stop AIDS: Keep the Promise". This year has seen many new and renewed commitments at all levels to make significant progress in reducing the spread of HIV through prevention measures and working towards universal access for treatment and support. But while some promises have been kept, many have not.

World AIDS day activities around the world will be broad and varied. What will you be doing?

Ideas for 2006 are available at: [www.chaa.info/resources.php](http://www.chaa.info/resources.php)

[www.crs.org/worldaidsday/](http://www.crs.org/worldaidsday/) [www.worldaidscampaign.info/](http://www.worldaidscampaign.info/)

[www.worldaidscampaign.info/index.php/en/resources/world\\_aids\\_day\\_resources](http://www.worldaidscampaign.info/index.php/en/resources/world_aids_day_resources)

#### **5. Help edit "AIDS is real & it's in our church"**

Dr Mike Blyth, Evangel Hospital, Jos, Nigeria writes:

*"AIDS Is Real and It's In Our Church!"* by C. Jean Garland and Dr. Michael Blyth is available *free* online at <http://www.aids-is-real.com>. You can view individual parts of the book in HTML web format, or download the entire book as a PDF file. Dr. Tim Teusink of SIM Ethiopia says, "I've used this 327-page text in my classes for the past three years and have found it to be the best book written on HIV&AIDS prevention and care in Africa."

"Now you can not only view the book but have input into it as well, at <http://tinyurl.com/hp7n7> What is a "wiki"? A place where you can not only read the text but easily make changes and contributions to the text, ask questions, dialogue. You can do anything from correcting a word to adding an entire chapter or story. Help us make the book more relevant to *your* country and situation. The field of HIV care is changing fast so we need to be up to date. For example, past advice against infected couples ever planning to have children is now perhaps outdated. Good antiretroviral therapy with good supervision may make the risks very low. By contributing to "AIDS is Real" you will be kept at the cutting edge and help others... join in, help give those ideas wider distribution and dialogue. Go to [http://www.ecwaevangel.org/air\\_wiki](http://www.ecwaevangel.org/air_wiki) or click the link on the *AIDS Is Real* main menu. (Not all the book is fully formatted yet on the wiki, we're still working on it. Help us please!)"

#### **6. Making it known: Telling the story of HIV & AIDS on www.sim.org**

Lisa Fehl in SIM International communications writes:

"Would you like to share some good news about God's work through your project? Do you have prayer requests or an upcoming event that friends of SIM can be praying for? Answers to these questions can be turned into articles for [www.sim.org](http://www.sim.org). I'm happy to work with you to tell the stories of God's work in the context HIV & AIDS."

"The kinds of articles we use:

- Interesting stories of real people (e.g., Christians you work with, a life changed by the Gospel, what it's like to live with HIV or to have AIDS.)
- Current prayer requests; please update us when God answers
- Profiles of special projects using human interest stories

- Sharp, clear photographs (low resolution is fine) are a must for all stories
- Five to eight photos that tell a story make a slideshow

“Some things to consider:

- If an ambassador of your country read this story, would he or she feel that you accurately portrayed this nation and people?
- Does your story motivate the reader to pray, give, or serve?
- Respect a person's privacy by changing their name; use a new name in "quotes"
- The Internet is open to the whole world. Keep security guidelines in mind.

“I rely on your news to keep the website content fresh and interesting. I can work with you to create a story, or I'm happy to receive your articles ready to edit and post. See *Intercom* #183 or [www.useit.com/papers/webwriting/](http://www.useit.com/papers/webwriting/) for helpful web writing guidelines. Send your submissions to [international.webeditor@sim.org](mailto:international.webeditor@sim.org) I look forward to hearing from you!”

## 7. Tip of the Month – Family dynamics & demographic silhouettes

“Family Dynamics” is a participatory technique to explore the implications of HIV & AIDS on family life. This requires 2 hours and a number of sets of figures which you draw and cut out, each representing a different type of family, each having members of a different age and sex such as: 1) a single mother with infants and young children; 2) a household with a father, mother, young children and a grandmother; 3) a young girl with an infant, and so on, depending on types of families existing in your context. Some of these figures will need to be colour-coded with a red dot on the reverse side to indicate those living with HIV.

1. Divided into groups of 4-5 persons with each group receiving a set of silhouettes representing one family/household
2. The group is to give ‘life’ to their family by discussing the questions such as: What are the people in the household doing? What are the relations between family members? How does the family survive? What are the goals and dreams of the family as a whole as well as of each individual household member?
3. Turn over the silhouettes and discover that at least one family member has a red dot on the back of the silhouette. The person/people with the dot are HIV positive
4. Discuss the implications: what has changed within the family? Report back in a plenary session
5. Place their silhouette families in the centre of the room. They represent the community at this point in time. Now visualize this community in five years time.
6. In groups discuss what could be done at the household level to care for family members with AIDS. How could they be treated with dignity?
7. Return to the plenary. The community has now to decide what to do with the problems associated with HIV & AIDS. The only condition is that someone from the family affected by HIV & AIDS has to ask for help from either another family or the broader community. Participants put themselves in the role of one of the silhouette family members that had been defined at the beginning of the session. A discussion takes place whereby participants look for ways to support the affected household members, while taking the ‘role’ of a family member.

Adapted from: *Demographic Silhouettes* in “Strengthening Community Responses to HIV/AIDS”, UNDP (2000) [www.undp.org/hiv/publications/toolkit/toolkit.html](http://www.undp.org/hiv/publications/toolkit/toolkit.html) and “HIV/AIDS: Part 1 Techniques” (2004) UNAIDS & the Royal Tropical Institute (KIT) page 19-21. Available at [www.kit.nl/publishers](http://www.kit.nl/publishers)



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Championing HIV & AIDS ministries and helping SIM and its partners respond more effectively to growing epidemics in Africa, Asia, and South America

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