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An Introduction to the AIDS and Theology Issue

AJET normally does not produce issues that focus on a single theme. But when Dr. John Chaplin, HIV/AIDS Consultant for Africa Inland Mission International, invited my wife and I to the *Theological Perspective on HIV and AIDS Conference* and I saw the speakers listed, it seemed a natural theme for *AJET*. Africa Inland Mission, in partnership with the Centre for World Christianity at Africa International University (AIU), sponsored this conference in order to bring together people involved in theological education with those involved in AIDS ministries of various kinds. The intent was to answer two key questions: (1) How can theological institutions prepare new pastors and church leaders to respond effectively to this major crisis? (2) How can those involved in AIDS work ensure that their response to AIDS is based on careful Biblical reflection on the issues brought up by AIDS? The conference was inspired by part of the *Cape Town Call to Action* issued at the *Third Lausanne Congress*, “We believe that the teachings and example of Jesus, as well as the transforming power of His cross and resurrection, are central to the holistic gospel response to HIV-AIDS that our world so urgently needs. ... We commit ourselves to such urgent and prophetic action as part of the integral mission of the Church.”¹

The conference participants met together at AIU from Monday 28th May to Friday 1st June 2012, but were not confined to listening to the lectures and PowerPoint presentations offered by the speakers. Monday afternoon Diane Stinton introduced the Pastoral Circle as part of her presentation on *Contextual Research Methods for Theology and HIV and AIDS in Africa* and this became the model we used in small groups to discuss and reflect theologically on topics such as: 1) Stigma, Shame and “Outcasts” (people living with AIDS, men who have sex with men, commercial sex workers, drug addicts), 2) Judgment, 3) Poverty and Suffering, 4) Faithfulness, Marriage and Parenting, 5) Youth and Sexuality and Initiation Rites, 6) Changing Beliefs and Values, 7) Orphans and Vulnerable Children, 8) Gender Issues.

Most of us in the small group discussions had not come across the Pastoral Circle approach, so we were largely learning by doing. This yielded a full range of discussion as Africans and non-Africans from a number of different countries and cultures learned from one another about AIDS ministry, theological applications to AIDS ministry, and how different personalities interact. While each small group likely would have benefited from someone walking us through the Pastoral Circle on a specific issue in order to model it for us, we did end up with a great deal of practice in actually applying theological truths to AIDS ministry.

¹ <http://www.lausanne.org/en/documents/ctcommitment.html#p2-2>. For an example of how wide the range of secular and religious interest is in HIV and AIDS, see the following: <http://hivaidsclearinghouse.unesco.org/search/resources/FBOAnnoBib.pdf>

Wednesday was a different day altogether with a field trip to visit the AIC Kijabe Hospital AIDS programme, a community AIDS support group, and the Moffat Bible College AIDS Education Programme where students visit area primary schools to teach an AIDS Behaviour Change Programme based on Adventure Unlimited. Moffat's programme is currently headed by Dr. Bob Carter and his wife Hope who took over from my wife Janet when we moved to Scott in 2011. The opportunity to see what these ministries are doing afforded conference participants with experience, not simply information and theory.

During the Conference there was no lack of information about some of the many different aspects of AIDS ministry as the articles in this issue of AJET demonstrate. In fact the virtual storm of statistics, data, acronyms, PowerPoint presentations and passionate activism displayed by the speakers is impossible to reproduce in an academic journal but a few notes are helpful. Firstly, even in the statistics in these articles it is clear that the numbers about how many people are infected and affected, for example, are not consistent from one quoted source to the next. As with all statistics, how they are collected and when they are collected can easily change the totals. But it is clear that HIV and AIDS remains a huge medical, theological, and pastoral challenge to African countries, churches and communities as well as those individuals directly affected. Secondly, the information available on HIV and AIDS in Africa, and the secular, Christian, and non-Christian responses to it are seemingly endless, especially as one searches through the Internet. There is a surprising amount of theological reflection from many Christian traditions on the crisis as well. Third, what is offered in this issue of AJET barely scratches the surface of the evangelical theological response, and unavoidably leaves many critical issues begging for greater reflection, even argument.

For example, how many ways are there for Christians to deal with the connected and controversial issues of abstinence and condoms? Did your blood pressure just go up? It is clear that for those who favour the widespread use of condoms and who insist that information about condoms must be given to all age groups, including children, have the laudable goal of saving lives. It is their highest value and that value is assumed to be unchallengeable by many. Should a Christian theologian be allowed to ask, "Should that value, that goal, be unchallengeable, and are there any Christian values that are higher than a longer life in this life?" Or, "Does the use of a condom within a marriage of a discordant couple have the same moral value as the use of a condom by two teenagers experimenting with sex outside of marriage?" This conference did not set out to settle all theological questions regarding HIV and AIDS but it does highlight the necessity for theological thought about the crisis.

In this issue of AJET I have kept the basic chronology of the presentations at the conference, but due to space limitations I have included only one of the morning devotionals, that by Samuel Ngewa who examines the parable of the Good Samaritan in Luke 10:30-37 and applies it to the HIV and AIDS crisis.

Diane Stinton's lecture and PowerPoint presentation, "*Into Africa*" explores the contextual research methods we can use to make theology relevant to the issue of HIV and AIDS in Africa. After briefly introducing contextual theology in Africa and then qualitative research methods in general, she focuses on the four steps of the Pastoral Circle or Cycle: Insertion (examining what is happening); Social Analysis (why is it happening?); Theological Reflection (how do we evaluate what is happening?); and Pastoral Planning (how do we respond to what is happening?). This approach can be a powerful tool to help us understand and respond to theologically important issues, including AIDS.

Priscilla Adoyo's forthright lecture on the sexual issues involved in the HIV and AIDS pandemic and the role of the Church in dealing with it was challenging as well as informative. James Nkansah-Obrempong straddled the divide between theology and HIV and AIDS by introducing us to a brief history of the disease and then spoke at length about how theologians should respond to its challenges, first using the relationship between HIV/AIDS and sin as well as Biblical teaching about sickness and death, then showing how theology helps us deal with this crisis, before finally pointing the way forward.

Mary Getui, the chair of the Kenya National AIDS Control Council, spoke about gender issues in relation to HIV and AIDS, generously emphasizing Eunice Odongi's assistance in preparing the lecture. Prof. Getui highlighted the effect of HIV and AIDS on both men and women and raised a number of issues theologians and the Church should be dealing with in regard to gender. Peter Okaalet's PowerPoint presentation ranged widely over the AIDS crisis giving us the larger context on the way to describing how the Church should be involved. John Chaplin ably translated that PowerPoint into an article, allowing me the possibility of editing it for *AJET*. Dr. Okaalet's detailed presentation and Dr. Chaplin's re-presentation was a collaboration only two accomplished Christian medical doctors could have pulled off. John Chaplin's own article on some of the newer perspectives and advances on HIV and AIDS prevention and treatment was not only informative and accessible for the non-medical people at the conference, but also demonstrates how the landscape is changing and changing quickly. Keeping up is challenging.

Keith Ferdinando's major paper, *Evil and AIDS – An African Perspective*, is an example of much a theologian can contribute to the medical ministry by digging into the elements of the African worldview that undergird people's actions in response to HIV and AIDS. The medical and the spiritual levels of this pandemic are intertwined. Rich Harrell led the committee that produced the Summary Statements at the end of the conference. Instead of Book Reviews, this issue ends with a few resources for further reading. Some were gleaned from two conference lists while others came from elsewhere. Not all the books are written from an evangelical tradition, but will prove of some value because so many Christians from all traditions have worked in HIV & AIDS ministry, often together and often with secular groups.